

Please check one :
Returning Vendor
New Vendor



Waxhaw Farmers Market
27283 Waxhaw Parkway
Waxhaw, NC 28173
Main Season: April - December
Winter Season: January - March

Waxhaw Farmers' Market Vendor Application

Business Name: _____

Check your primary classification:

Farmer of produce, berries, mushrooms, nuts, honey

Livestock Farmer of meats/dairy/eggs/cheese

Gardener/Grower/Nursery Dealer of plants/flowers

Fisherman from the Carolina Coast

Preparer of specialty food/beverage or value-added goods

Crafter of natural materials, natural produce use, handmade, and/or farm crafts

Food Truck or Mobile Trailer

Non-Profit Organization

On-site Artisan

How often do you plan to attend?

Full-time

Part-time

Occasionally as a guest

When do you plan to attend?

check all that apply

Main Season (April - December)

Specific Season (indicate below)

Winter Market (January - March)

Wednesday Market (June - August)

Who We Are: The Waxhaw Farmers' Market ("WFM") was established in 2001. We aim to promote the direct marketing of farm products and value-added agricultural offerings from the original producer to the consumer. We are a 501c6 non-profit organization. Our Board of Directors includes market vendors and community members. We are a year-round, rain-or-shine, producers-only market.

Our Goal: To promote direct marketing of farm products and value-added offerings, from the original producer, to the consumer. Since we are a "producer-only" market, the potential vendor must raise, grow, gather, bake, or make offerings to be sold at the market. The goal of our organization is to operate a Farmers Market within the surrounding Waxhaw area in order to support local farms as a viable part of the community. It is the market's mission to not only provide fresh, local food and foster the direct relationship between farmers and customers, but to enhance the quality of life in the local area by providing a community gathering location. The WFM strives to educate its customers on the benefits of quality fresh locally grown foods and healthy eating. The success of our market is determined by the quality of our offerings and the integrity with which we treat our customers.

Application Submission: Please review the Market Rules and Regulations to make sure that you meet the requirements to become a vendor.

- ✓ Application: pages 1, 3, 4, the section that pertains to your business, 10, 11, & 12
- ✓ Rules and Regulations: pages 8, 9, & 10
 1. initialized and signed Code of Sales
 2. Code of Conduct
 3. The Acknowledgment page
- ✓ Non refundable application fee of \$25
- ✓ All applicable documentation: all required documentation can be submitted by:
 1. Email: info@waxhawfarmersmarket.org
 2. Mail: Waxhaw Farmers Market PO Box 343 Waxhaw, NC 281731

****Please note the application will not be reviewed unless the processing fee is presented**

Application Review Process:

- Applications submitted BEFORE the beginning of the main season in April, will be reviewed by the Board of Directors during the winter season. After the start of the main season, applications will be reviewed periodically.
- All farms, gardens, and animal dwellings will be inspected prior to approval of application.
- Returning vendors who have complied with the rules and regulations, adhered to the ethical code of sales, and have maintained good communication with the market manager throughout the year, will have first priority in the review process.

****ONLY fully completed applications will be considered for review.**

Application Decision:

- The decision to accept or reject an application is based on whether or not:
 - The vendor's offerings are in alignment with the Market's mission.
 - The vendor's offerings are in compliance with federal, state, & local laws plus the market's rules and regulations.
 - The vendor and the offerings will be a good fit for the market as a whole.
 - The offering is a "high-demand" fit for our customers' wants.
 - The offerings will cause saturation as other vendors are able to satisfy customer needs/wants.
- An email will be sent out from the market manager regarding acceptance status.
- All approved full and part time vendors will be required to pay a \$150 membership fee before the main season begins.

Date: _____

Name of Owner(s):

Business/Farm Physical Address:

Cell Number: _____

Email Address: _____

Preferred Method of contact:

Phone

Email

Text

Social Media Sites:

Facebook: _____

Instagram: _____

Website: _____

Why would you like to be a vendor at the WFM?

How many miles will you travel to sell at the Waxhaw Farmers Market? _____

Tell us about your business: Describe your business/farm and submit pictures:

Booth Space Request:

Booth sizes and associated rental fees - guest vendors will pay an additional \$5 per booth fee, if applicable. Non-profits, sponsors, donors, and supporters of the market will not incur a booth fee.

10' x 10' = \$15

20' x 10' = \$30

Food Truck = \$25

Electricity Request:

Will you need electricity? Yes No If yes,

What will the electricity be used for? _____

What amperage/volts will be needed to run your equipment? _____

* You must bring a heavy duty, 10 or 12 gauge, outdoor extension cord and mat to cover the outlets. The mat should be excessive in length as outlets are accessible to all booths. Use of electricity is at your own risk.

Market Presence:

Do you sell at other markets? Yes No

If yes, where? _____

Do you intend to be present at the market to sell your products? Yes No

Do you plan to have anyone other than family sell for you during the market? Yes No

How long will this person be replacing your presence at the market? _____

Farmer:

- What variety of crops do you grow?

- Do you farm full or part time? _____
- How long have you been farming? _____
- How much area do you have in production? _____
- How long has the area been under cultivation? _____
- What water source is used to water growing produce and wash harvested produce? If well water, a copy of water testing is required. _____
- Where do you purchase your seeds, spores, or plugs? _____

- Are any of the seeds GMO? _____
- Please explain your practices/products for pest management, weed control, fertilizers, and soil amendments. Are they organic?

- What kind of fertilizer do you use? _____
- Do you have any certifications? _____
- Do you request to have other offerings at your table? Yes No

Describe: _____

Livestock Farmer:

• What items will you produce from your livestock? _____

• How much livestock do you have on your land? _____

• Are your livestock pasture-raised? Yes No

Where are they kept? Indoors Outdoors Both

Additional Information if needed: _____

• How much area do they have to pasture? _____

• For how long each day are they outside? _____

• What feed do you offer your livestock? _____

○ Is it organic? Yes No

○ Do you supplement with soy (even if it's organic)? Yes No

○ Do you supplement with corn (even if it's organic)? Yes No

○ Are there any oils (like canola) mixed into your feed? Yes No

• Do you have a dairy certification? Yes No If yes, please submit with application

• Are hormones or antibiotics used? Yes No

• If yes, describe: _____

Are your ruminant animals grass-fed only? Yes No

• Describe your nutrition and health maintenance practices of your animals: _____

• Do you have a meat handlers license? Yes No

• Do you request to have other offerings at your table? Yes No

Describe: _____

○ Do you request to have an item at your table not crafted by you but can be utilized with your offerings? Yes No

○ If yes, describe: _____

Grower/Gardner/Nursery Dealer:

- Are you NCDA nursery license - last inspection date _____
- Are all of your plants/flowers grown by you? _____
- Will your offerings be cut flowers or starts? _____

Carolina Fisherman:

- Do you have a fishing license? _____
- Do you only fish in the Carolina waters? _____

Preparer of specialty food/beverage or value-added goods:

- What food/beverage items will you be offering: _____

- Will these items be made at home or in a commercial kitchen? *Must provide NCDA/SCDA inspection and contract with commercial kitchen (if applicable)* _____

- Do you grow some of the ingredients used in your baked goods/beverages? Yes No

*If yes, fill out the farmer (grower) portion of the application. If not, where are your supplies/ ingredients purchased? Are they locally sourced?

- Will you include ingredients purchased from the WFM vendors? Yes No
- Are your ingredients organic? Yes No
- Are your ingredients gluten-free? Yes No *Must submit proof of gluten free testing results
- Do you request to have an item at your table not crafted by you but can be utilized with your offerings?
Yes No
- If yes, describe: _____

Crafter:

- Are all items handcrafted by you? Yes No
- Describe your product/s _____

- Are some of the main ingredients of your product grown by you? Yes No
- What are those ingredients: _____

- What ingredients included in your products:

- Explain the production process: _____

- Do you request to have an item at your table not crafted by you but can be utilized with your offerings?
 Yes No
- If yes, describe: _____

Non-Profit:

- What kind of non profit organization are you?

- What is your reason to attend the market?

Food Truck: We encourage a portion of your ingredients to be purchased from our farmers/growers.

- Dept of health inspection Yes No
- NCDA inspection Yes No
- License from the state Yes No
- Serve Safe Yes No
- Type of food/beverages being offered

- Are you willing to purchase ingredients from local Waxhaw farmers? Yes No
- Generator db level? _____
- Do you offer breakfast, lunch, or dinner options on your menu?

On- Site Artisan: vendors who perform their skills/talents while at the market. Examples include: face painting, knife sharpening, wood turning, drawing/painting, etc.

- What skill will you be performing at the market? _____
- Will you charge a fee for your services? **Yes** **No**

General Liability Insurance: \$1,000,000 minimum – please attach a copy (required for all vendors) and be sure the Waxhaw Farmers Market is listed as held harmless or “Additional Insured”. Liability Insurance and Hold Harmless Provision – Waxhaw Farmers Market holds general liability insurance covering the Waxhaw Farmers’ Market. A Hold Harmless clause is included here as part of the Vendor Agreement. Each vendor participating in the Waxhaw Farmers’ Market shall be responsible for any loss, personal injury, deaths and/or other damage that may occur as a result of the vendor’s negligence or that of its agents and employees, and hereby agrees to exonerate, save harmless, protect and indemnify Waxhaw Farmers’ Market, its successors and assigns, from and against any and all losses, damages, claims, suits or actions, judgments and costs, and attorneys’ fees which may arise or grow out of any injury or death of persons or damage to property in any manner connected with the vendor’s products, operations or vending at the Market.

Application Check off list:

All vendors must provide the following:

Completed Application
Page 8, 9, and 10 of the Rules and Regulations
NC/SC DOR business license - sales tax license
Pictures of your farm/animals/production/product
Liability Insurance holding WFM harmless for 2022
\$25 Application fee

Provide these documents if applicable:

NCDA/SCDA Inspection
USDA Organic Certification
Course Completion Certificates (acidification, serve safe, etc)
Health Inspection Report
All required licenses for sales (meat handler's, dairy, nursery, etc)
Well water inspection
Commercial kitchen contract

Initial the following agreements:

I submit that the information provided for my application is accurate and complete
I understand the mission and goals of the WFM.
I will volunteer 5- 10 hours a season by either joining a committee or helping with market needs
I have read and understand the WFM Rules and Regulations and will abide by them.
I will adhere to the WFM code of conduct and I will abide by its provisions.
I will adhere to the WFM code of sales
I agree to have my farm/production site inspected by a designee of the Waxhaw Farmers' Market Board.
I will have with me at the market the NC/SC Department of Revenue Sales Tax Certificate of Registration or exemption letter from North or South Carolina.
As a condition of membership, I agree to release, and hold harmless, the Waxhaw Farmers Market Inc., its Board of Directors, officers, managers and employees/volunteers from all claims relating to property damage or personal injury to myself, my family members and employees arising from such membership. I assume the sole risk of selling at the market. In addition, I agree to release and hold harmless the lessor of the farmers' market site, from all claims relating to property damage or personal injury to myself, my family members and employees related to or arising from my presence on the market site or its parking areas.
Farmers/Growers: I hereby attest that all of the above listed items are grown or raised on my Farm/garden
Preparers/Crafters: I attest that all products are made by me.
I agree to comply with all Federal, State, and local laws governing food safety and labeling and provide the Market Manager with valid and current documentation of required licenses, permits and/or certifications.
I agree to promote the market by sharing social media posts, inviting friends & neighbors to the market, etc. I will also make suggestions for market improvements and consider joining the board.

PRINT NAME: _____

SIGNED: _____

DATE: _____

-----For Market use only-----

Application received by _____ Date _____

Farm inspection by _____ Date _____

Approval/Rejection _____ Date _____

Approval/Rejection letter sent _____ Date _____

\$25 fee received Yes No

\$150 Membership fee received Yes No

Notes: _____

Emergency Contact Form

Date: _____

Vendor Information:

Name : _____

Business/Farm Name: _____

Home address _____

Cell #: _____

Email: _____

Primary Emergency Contact:

Contact Name: _____

Relationship to Contact: _____

Home #: _____ Cell #: _____

Email: _____

Secondary Emergency Contact

Contact Name: _____

Relationship to Contact: _____

Home #: _____ Cell #: _____

Email: _____

Additional Information

Allergies (Food, Medication, Insects, Etc.): _____

Medical Alert(s): _____
