



# 2016 FARMERS MARKET OF BLUFFTON

March 17, 2016 – December 15, 2016

## VALUE-ADDED FOOD VENDOR APPLICATION

(food that has been altered from its raw or original state)

Name of Business: \_\_\_\_\_

Name of Applicant: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: \_\_\_\_\_ Cell: \_\_\_\_\_

Email: \_\_\_\_\_ Website: \_\_\_\_\_

Business Address (if different): \_\_\_\_\_

Months during which you plan to sell at the market: \_\_\_\_\_

Forms of payment you will accept: Cash \_\_\_\_\_ Credit/Debit \_\_\_\_\_ Check \_\_\_\_\_

DHEC Certification: \_\_\_\_\_ SC Dept. of Agriculture Certification: \_\_\_\_\_

Kitchen Location: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Kitchen Owner: \_\_\_\_\_ Phone: \_\_\_\_\_

I understand and certify that 100% of the products that I offer for sale at the Farmers Market of Bluffton (FMB) will be produced by me, my family, and/or my employees for direct sale to the public. I further certify that all such products are produced in accordance with all laws and regulations of Beaufort County and the State of South Carolina governing food production and distribution.

**Please list ALL of the food items that you wish to sell and indicate if they are for consumption on-site or packaged to be consumed off-site. Future additional items must be approved before selling. List all required cooking devices and power requirements.**

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**Please include a written description your business including history, store location, services, size, background, etc., to be used in our vendor profiles. This description can be written on the back of this page or emailed to [manager@farmersmarketbluffton.org](mailto:manager@farmersmarketbluffton.org). Include logos and/or photos if available.**

Upon approval of this application, a copy of each of the following documents will be required before participation as a vendor in the FMB:

- Bluffton Business License ([www.townofbluffton.gov](http://www.townofbluffton.gov))
- General Liability Insurance
- DHEC/SC Department of Agriculture Certification

I have read and agree to comply with the Farmers Market of Bluffton's Rules & Regulations and the SCDHEC Farmers Market Guidelines (updated October 2015). I understand FMB's violations and sanctions, including grounds for suspension and disqualification. I understand that this is not a contract for entry into the Market and that the Board of Directors must approve my application before I can participate in the Market.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**Please forward completed application to:  
Farmers Market of Bluffton  
Attn: Kim Viljac, Market Manager  
PO Box 447, Bluffton, SC 29910  
[manager@farmersmarketbluffton.org](mailto:manager@farmersmarketbluffton.org) 843.415.2447**