



**Please list the names of other independent farms whose produce you may be selling.**

Farm/Location	Crop/Item	Harvest/Sell Date	Growing Method

**ALL PRODUCE MUST HAVE BEEN HARVESTED WITHIN SOUTH CAROLINA, NORTH CAROLINA, OR GEORGIA.**

**ITEMS FROM OTHER INDEPENDENT FARMERS MUST NEVER REPRESENT MORE THAN 50% OF YOUR TOTAL INVENTORY FOR SALE.**

**ALL ITEMS MUST BE LABELED WITH NAME OF ITEM, PRICE, FARM & THE LOCATION WHERE IT WAS HARVESTED. (example: Carrots, \$3/bunch, Kim’s Farm, Bluffton, SC)**

**ANY MISREPRESENTATION WILL RESULT IN THE VENDOR’S IMMEDIATE TERMINATION OF PARTICIPATION.**

**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 the following document will be required before participation as a vendor in the Farmers Market of Bluffton:

- General Liability Insurance
- Bluffton Business License (if you do not have a BBL, an annual \$50 fee will be due at the beginning of each year or at the start of your participation in the market)

**I have read and agree to comply with the Farmers Market of Bluffton’s Rules & Regulations. I understand its 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, Executive Director/Market Manager  
PO Box 447, Bluffton, SC 29910  
[manager@farmersmarketbluffton.org](mailto:manager@farmersmarketbluffton.org) 843.415.2447**