

# 2012 Mukilteo Market Application

## Mukilteo Farmers Market

P.O. Box 1021  
Mukilteo, WA 98275  
425-418-6064  
www.mukilteofarmersmarket.org

Home Phone \_\_\_\_\_  
Business \_\_\_\_\_  
Cell \_\_\_\_\_  
Email \_\_\_\_\_  
Web site \_\_\_\_\_

Business Name \_\_\_\_\_  
UBI # (required) \_\_\_\_\_

Name & Mailing Address \_\_\_\_\_

Farm Location \_\_\_\_\_  
\_\_\_\_\_

Describe the crops or products you intend to sell: \_\_\_\_\_

Please Check those that apply

- Farmer
- Certified Organic
- Cut Flowers
- Processor
- Honey
- Food Concessions
- Nursery
- Baked Goods
- Seafood
- Meat
- Dairy
- Related Farm Product
- Garden Art Product
- Crafter
- Other

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

List any licenses/permits required by the state, county or city:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

What other markets do you sell at?

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

I would like to attend on the following dates:

- |          |                          |      |                          |
|----------|--------------------------|------|--------------------------|
| 6/6      | <input type="checkbox"/> | 8/8  | <input type="checkbox"/> |
| 6/13     | <input type="checkbox"/> | 8/15 | <input type="checkbox"/> |
| 6/20     | <input type="checkbox"/> | 8/22 | <input type="checkbox"/> |
| 6/27     | <input type="checkbox"/> | 8/29 | <input type="checkbox"/> |
| July 4th | no market                | 9/5  | <input type="checkbox"/> |
| 7/11     | <input type="checkbox"/> | 9/12 | <input type="checkbox"/> |
| 7/18     | <input type="checkbox"/> | 9/19 | <input type="checkbox"/> |
| 7/25     | <input type="checkbox"/> | 9/26 | <input type="checkbox"/> |
| 8/1      | <input type="checkbox"/> |      |                          |

Have you sold at the Mukilteo Market? \_\_\_\_\_

By signing this document I am certifying that I have read and understand the rules of the Mukilteo Farmers Market and agree to abide by them. I certify that I am in compliance with all licensing requirements for my business. I agree to an inspection to verify the authenticity of my business if necessary. I agree to hold harmless and release the Mukilteo Market, the City of Mukilteo and any agents thereof from any and all claims or to property and person(s), loss, damage or theft which may arise out of, or occur to person(s) display or inventory while participating in the Mukilteo Market. I understand the Mukilteo Market has the right to refuse service. I understand that vendors are required to collect and report sales tax to the Department of Revenue. I understand and agree that if I use a canopy and or umbrella it will be sufficiently and safely anchored at each ground contact point during all market operations, from the time said canopy is put up to the time it is taken down. I understand that if I forget my weights I will not use my canopy or umbrella. Should I choose not to sell, there will be no refunds.

I have read and agreed to the Mukilteo Farmers Market Rules.

**SIGNED** \_\_\_\_\_ **DATE** \_\_\_\_\_

### For Market Use Only

SHD Permit	Exp. Date _____	Nursery Fee	_____	Exp. Date	_____
Certified Kitchen	Exp. Date _____	UBI #	_____	Exp. Date	_____
Organic Certification	Exp. Date _____				
WSDA Processor	Exp. Date _____				