

Mableton Farmers Market 2017 Vendor Application

Contact Name: _____

Business Name: _____

E-mail: _____

Phone: _____

Mailing Address: _____

Farm Address: _____

Please describe the Georgia-grown, Georgia produced or homemade products that you would like to sell. If your product is fresh produce, please give us the expected harvest date for each item.

May _____

June _____

July _____

August _____

Copy of a GA Department of Agriculture Food Sales establishment license is required for food prepared/processed off-site and not exempted by Georgia Department of Agriculture Guidelines for Food Products Sold at Events Sponsored by Non-profit Organizations. Copy of a Cobb County Health Department Temporary Food Service permit is required for food prepared on-site.

I have read and agree to operate by the Mableton Farmers Market Rules and Regulations and the Indemnification and Hold Harmless Agreement.

Signature _____

Printed Name _____

Date _____

Mail to Dave McDaniel, 533 Shannon Green Circle SW, Mableton GA 30126 or email to farmersmarket@mableton.org. Application submitted without a completed Hold Harmless agreement and/or licenses/certificates as necessary cannot be approved.

Received:

Approved:

Booth#

Permit #:

David McDaniel

Mableton Farmers Market Manager

404-323-0608

mcda5958@bellsouth.net