



888-826-9868

New Processed Foods Application

Business name: _____

Vendor's name: _____ Phone No. _____

Address: _____

Type of product submitted for approval: _____

1. Briefly describe your product: _____

2. Are the majority of ingredients in your products: Self Grown Locally Grown by Others

3. What ingredients are not produced locally? _____

4. What makes your product unique? _____

5. What special handling at market is required for your product? _____

6. Briefly describe your product's labeling: _____

7. In brief, please explain how your product would be a benefit to the market. _____

Give this completed form, along with two (2) copies of current Kitchen License, permits, product liability insurance and other required licenses to the Market Manager or any board member. You will be notified when next Food Processors Jury Committee meeting is held. At that time you will need to bring sample/s of your product.

OFFICE USE ONLY

Board of Directors Approval

Yes

No

Signature _____ Date _____