NEW VENDOR APPLICATION FORM
2021-2022 Indoor Season: December 4th – April 9th

I. CONTACT INFORMATION
Farm/Business Name: ________________________________________________

Contact Person: _____________________________________________________

Business Address: ___________________________________________________

City, State Zip: ______________________________________________________

County: __________________________

Business Phone: ________________ Home/Cell Phone: ________________

E-mail Address: __________________________

Website Address: __________________________

Facebook URL: __________________________ Twitter: @____________________

Instagram: @____________________ Youtube: ___________________

Other Social Media: __________________________

You are a(n): __Individual___ Family___ LLC ___ Partnership ___ Corporation ___

Other Farmers Markets where you sell:
____________________________________________________________________
____________________________________________________________________
____________________________________________________________________
____________________________________________________________________

1
Please note that Illinois requires that sales tax be collected on the sale of food. Therefore, You must register with the Illinois Department of Revenue if you conduct business in Illinois, or with Illinois customers. You must be registered with the Illinois Department of Revenue and have an Illinois Business Tax Number before applying to this market and must include the IBT # below and attach a copy of the certificate of registration to this application. Vendors who participated in 61st Street Farmers Market last season (2018) must show proof of sales tax payment with this application.

Illinois Business Tax Number (IBT) # __________________ (attach copy of Illinois Department of Revenue certificate of registration).

Please attach a copy of 2020 sales tax paid to the State of Illinois (annual or monthly statement)

Are you certified to accept WIC and Senior Farmers Market Nutrition Coupons?

Yes___ No ____

II. VENDOR TYPE
Check each category in which you plan to bring product to market:

___ Fruits, Vegetables, Flowers
___ Meat, Fish, Poultry, Eggs, Dairy
___ Other, specify___________________________________________________

III. GENERAL INFORMATION
1. Are you Certified Organic? __ Yes __ No
   If yes, list certifying agency __________________

2. Are you Food Alliance Certified “Sustainable”? __ Yes __ No
   If yes, list date of last inspection. ______________

3. Do you possess any other certifications regarding your production practices?
   If yes, please list______________________________________________
   ____________________________________________________________
   ____________________________________________________________
4. Do you grow and/or raise all products or ingredients that you plan to sell at the 61st Street Farmers Market? ___ Yes ___ No
   If no, list all products or ingredients that you do not grow and/or raise yourself:
   ___________________________________________________
   ___________________________________________________
   Do the products or ingredients that you do not grow and/or raise yourself exceed 10% of the products or ingredients that you plan to sell? ___ Yes ___ No

IV. FARM / ORCHARD SITE LOCATION INFORMATION
Please list all sites including a map for each. If items are wild gathered, identify the location(s) and attach permission from property owner where gathered. If the land is rented, please include contact information for the owner and a copy of the rental lease agreement. If the property is owned by you, please attach a copy of your latest property tax bill.

Land Description & Address: ____________________________
County: ____________ City ________________ State ______
Number of Acres: _______  Total Acreage in production: _________
Greenhouse (# and total sq ft): __________
Tunnels (# and total sq ft): ________________
Landlord: ___________________________  Phone: ____________________

Land Description & Address: ____________________________
County: ____________ City ________________ State ______
Number of Acres: _______  Total Acreage in production: _________
Greenhouse (# and total sq ft): __________
Tunnels (# and total sq ft): ________________
Landlord: ___________________________  Phone: ____________________

Land Description & Address: ____________________________
County: ____________ City ________________ State ______
Number of Acres: _______  Total Acreage in production: _________
Greenhouse (# and total sq ft): __________
Tunnels (# and total sq ft): ________________
Landlord: ___________________________  Phone: ____________________
Tunnels (# and total sq ft): ______________________
Landlord: ___________________________ Phone: ________________

Land Description & Address: ____________________________
County: ______________ City _______________________ State ______
Number of Acres: _______ Total Acreage in production: __________
Greenhouse (# and total sq ft): ______________________
Tunnels (# and total sq ft): ______________________
Landlord: ___________________________ Phone: ________________

V. PRODUCTION PRACTICES

1. Farmers (raw vegetables and fruits, foraged goods, flowers and plants, etc.)

Integrated Pest Management (IPM) Practices

Do you use IPM practices? ____ Yes ____ No
Describe your IPM methods including detection strategies and materials used.

What IPM courses or training have you taken? Please note when and where.

What IPM certification do you have? Please note certifier and date.

Do you use an IPM scout or consultant? Please describe that relationship along with their name and contact information.
If you do not use IPM practices, please describe your pest management practices and list any purchased products or inputs to control insects:

________________________________________________________________________

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Please describe your disease control practices, including a list of any purchased products or inputs to control disease:

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Please describe your weed control practices, including a list of any purchased products or inputs to control weeds:

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Please describe how you maintain soil fertility:

________________________________________________________________________

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________________________________________________________________________
2. Producers (meat, fish, poultry, eggs, dairy)

If you plan to sell cheese but do not produce the milk, please report on the practices of the dairy producer(s) you use and provide their contact information below.

Nutrition

Do you use any feed additives or injectables to the supplement the animals' normal diet? _____ Yes _____ No. If yes, what do you use?

Please describe your nutrition program/practices:

Health

Do you use any hormones or antibiotics to maintain the animals’ health? _____ Yes _____ No. If yes, what do you use?

Please describe your health maintenance practices and how you fight sickness/disease:
Surroundings

_____ Feed lot  _____ Pasture  _____ Combination

Please describe the type of confinement or range the animals have to feed and move around.

Licensed Processing Locations: Are these USDA licensed? __________

Licensed Processing Locations: Are these FDA licensed? __________

Licensed Processing Locations: Are these State Health Department licensed? __________

<table>
<thead>
<tr>
<th>Product</th>
<th>Processor’s Name &amp; Location</th>
<th>Licensed by</th>
<th>License #</th>
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</tbody>
</table>

Egg Vendors

In accordance with the Illinois Egg and Egg Products Act, anyone who grades, packs, sells or barters eggs must be licensed with the Illinois Department of Agriculture.

If you plan to sell eggs at the 61st Street Farmers Market, please attach a copy of your Illinois Egg License with this application.
3. Processors (includes bakery goods, cheese and other dairy products, honey, jam and jellies, ciders, juice, maple syrup, candy, granola; all meat, fish and poultry items—frozen, cured, smoked, etc.; non-food items – soaps, etc.).

a. List all prepared food or other products you plan to sell at the market (be specific). Each must be accompanied by its own Ingredients List and source sheet (see attached) – please make additional copies if necessary. Please note what percentage of each ingredient is in the final product and highlight any local and Midwest grown ingredients used in your products. If you have seasonal items, please include the dates the items will be offered. A sample of all product labels must be submitted with application.

1. _______________________________________________
2. _______________________________________________
3. _______________________________________________
4. _______________________________________________
5. _______________________________________________
6. _______________________________________________
7. _______________________________________________
8. _______________________________________________

b. List the major ingredients that you produce that go into your products.

___________________________________________________________________
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___________________________________________________________________
If there are none, please explain:

___________________________________________________________________
___________________________________________________________________
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c. Are you personally involved in the physical production of your product(s)?
__ Yes __ No

Please describe how you make your products:
___________________________________________________________________
___________________________________________________________________
___________________________________________________________________
___________________________________________________________________
___________________________________________________________________


d. If you use a co-packer or co-producer, please explain what involvement you have
in the development and production of your product:
___________________________________________________________________
___________________________________________________________________
___________________________________________________________________
___________________________________________________________________


e. If you are required to have a health department license or safe food-handling
certificate, please attach a copy to your application.

f. If you are applying to prepare and/or serve food at the market (i.e. crepes, burgers,
sandwiches, smoothies, etc.), you must attach a completed Temporary Food Vendor
License Application with your Market application (copy attached).

g. Licensed Food Processing Locations (Where products are fabricated):

<table>
<thead>
<tr>
<th>Product</th>
<th>Processor’s Name &amp; Location</th>
<th>Licensed by</th>
<th>License #</th>
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</tbody>
</table>


h. The State of Illinois prohibits the sale of fresh meat and poultry. These products
must be frozen. If you intend to sell meat and/or poultry, they must be kept at a
temperature below 0 degrees Fahrenheit. The vendor is responsible for monitoring
and maintaining proper temperatures in accordance with health codes. Vendors who sell products that must be kept refrigerated or frozen must have an accurate thermometer on-site. In addition to frozen meat and poultry; eggs, dairy, and cheese must be held at 40 degrees Fahrenheit. Initial here if you will sell these products and understand these regulations __________.

i. How do you keep potentially hazardous foods at required Health Department temperatures during transportation and at market?

___________________________________________________________________
___________________________________________________________________
___________________________________________________________________

j. If you are selling your product as organic either through labeling or implying it is organic through your company name or advertising, the raw ingredients and their final percentage in the finished product must be certified organic and meet USDA organic labeling standards. Additionally, the facility where you produce or process your product in must be licensed for organic processing. Please attach all necessary documentation to support this with the application.

VI. PRODUCT LIST
Please list below all products you plan to sell at the 61st Street Farmers Market. Indicate the months during which the product will be available for sale:

<table>
<thead>
<tr>
<th>Product</th>
<th># of varieties</th>
<th>Nov</th>
<th>Dec</th>
<th>Jan</th>
<th>Feb</th>
<th>Mar</th>
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STALL SIZE AND FEES

Please indicate the stall size you would like for the 2021-22 indoor market season.

_____ Single $200 for the entire season (6’ x 6’)

_____ Double $300 for the entire season (6’ x 12’)

_____ Half $150 for the entire season (3’ x 4’)

Fees must be paid by the end of the first market day – December 4th, 2021. Any vendor not paying their stall fee in full by December 4th, 2021 will be subject to removal from the market. Application and vendor fees are used to support marketing and operational expenses.

Please indicate if you need access to electricity. Vendors will be responsible for plugging in and providing their own electrical cords. Access is limited and determined by need and context of each situation.

_____ Yes  ______ No
Please indicate any other special needs you may have for selling at the Market.

___________________________________________________________________
___________________________________________________________________
___________________________________________________________________
___________________________________________________________________

INSURANCE INFORMATION
All 61st Street Farmers Market vendors must carry commercial liability insurance ($1 million) and name the Experimental Station as an additional insured for protection against damages in the event an injury occurs at the Market or an injury is caused by the product(s) you sell at the Market.

Insurance Company: __________________________________________________
Policy # _________________________________
Exp. Date: _________________________________
Coverage Limits: ____________________________
Per Occurrence: ____________________________
Aggregate: _________________________________
Agent Name: ____________________________________
Agent Business Address: _________________________________
City: _____________________________ State______ ZIP Code: _____________
Business Phone: _________________ Business Fax: ____________ ______

A COPY OF YOUR INSURANCE POLICY CERTIFICATES MUST BE ON FILE WITH OUR OFFICE BEFORE YOUR APPLICATION WILL BE CONSIDERED COMPLETE.

Farmers and vendors that meet the 61st Street Farmers Market criteria for acceptance but for certain reasons (lack of space, current vendor mix, etc.) are not invited to participate in the 2021/22 market season will be placed on a waiting list. Those farmers and vendors placed on the waiting list will be contacted if or when space becomes available.
Application Deadline: November 15th, 2021

Completed Applications, all Supporting Documents, and $75 non-refundable Application Fee are due by November 15th, 2021. You will be assessed a $50 late fee if the application, all supporting documents, and $75 non refundable application fee are not received by November 15th.

WE CANNOT PROCESS YOUR APPLICATION UNTIL ALL OF THE FOLLOWING ITEMS ARE RECEIVED!

Application Checklist:

______Completed application
______ $75 Non-refundable application fee paid to ‘Experimental Station’
______ Copy of Illinois Department of Revenue certificate of registration
______ Copy of latest 2020 Illinois Sales Tax filing
______ Copy of most recent Property Tax Bill or Lease Document
______ Signed Affidavit
______ Commercial Insurance policy certificate
______ Link/EBT Vendor Agreement
______ Market Currency Agreement
______ Vendor Interview Questionnaire

If Applicable:

______ Documentation of Organic Certification
______ Copies of other certifications regarding production practices
______ 2021/22 Growing Calendar (copy attached)
______ Ingredients List(s) (copy attached)
______ Health Department Permits and/or Certifications
______ Copy of required licenses to sell prepared and processed food products
______ City of Chicago Temporary Food Vendor License Application (copy attached)
______ Copies of applicable licenses
AFFADAVIT

I have read the Mission Statement and Guidelines for the 61st Street Farmers Market and, if accepted into this market, I hereby agree to abide by all of its rules and regulations as described in its Guidelines. Further, I agree to sell at the 61st Street Farmers Market only such items as those listed within this application. I also acknowledge those products must be of my own production or produced at the location described in my application. I acknowledge full responsibility for all my activities at the market (and for those assisting and employed by me) throughout the term of this season's indoor market (December 4, 2021 – April 9, 2022) and hereby agree to indemnify the Experimental Station and its officers, agents, employees and assigns, and to hold them harmless, from any liability arising from my activities at the 61st Street Farmers Market. I acknowledge the authority of the Experimental Station Market Manager to immediately settle any disputes regarding product legitimacy, procedural and vendor conduct violations, and impose any penalties, including possible suspension or removal from the Market. I agree to allow the Market Manager and/or representatives of the Market at any time to inspect the premises where the products offered for sale are produced. Failure to allow an inspection will constitute a violation of Market rules. I understand that the 61st Street Farmers Market does not carry any insurance policies to cover individual participants and that I am required to carry such insurance. I certify that the information contained in this application is true and accurate.

Name of Business: ______________________________________

Signature:_______________________________ Date: _____________

Name of Signature (please print)_______________________________________

Title:____________________________________

If you have questions or would like additional information about the market, please contact Emily Cross at emily@experimentalstation.org or at 773-241-6044.

Please send completed application, supporting documents and check (made payable to ‘Experimental Station’) to:

Experimental Station
Attn: Emily Cross
6100 S. Blackstone Avenue
Chicago, IL 60637
The 61st Street Farmers Market will accept LINK Cards to purchase food items at the Market. In the state of Illinois food stamps benefits are on a debit-type card called the LINK card.

To use the LINK Card, the customer swipes her/his card at the Market Information Booth in exchange for Link currency, which she/he can than spend on Link-eligible items.

Vendor agreement regarding Food Stamps at the 61st Street Farmers Market

The vendor understands and agrees to the following terms:

Under no circumstances can the LINK card or Food Stamps be exchanged for cash or used to pay a credit account. If this policy is ever violated, the vendor will immediately be discharged from the Market to never return.

Local and state taxes cannot be collected on purchases made with food stamp benefits.

The items that can be purchased with a LINK Card at the 61st Street Farmers Market are FOOD items for the LINK shopper or their household to eat, such as:

- Fruits and vegetables,
- Meats, fish and poultry,
- Dairy products
- Breads and cereals
- Seeds and plants which produce food for the LINK shopper and their household to eat

The LINK card/food stamps **MAY NOT BE USED TO PURCHASE ITEMS**, such as:

- Beer, wine, liquor, cigarettes or tobacco,
- Pet food
- Soaps
- Paper products and household supplies
- Vitamins and medicines
- Hot foods at point of sale.
- Prepared food that intended to be eaten at the market (cold wraps, prepared salads, sandwiches not packaged to be brought home, or given with cutlery).

The LINK card/food stamps may never be used to purchase beer, wine, liquor and cigarettes.
As a vendor at the 61st Street Farmers Market I agree to comply with the stated rules and regulations.

Vendor Name__________________________________________

Authorized Signature _________________________ Date___________________

**Market Currency Agreement**

As a vendor at the 61st Street Farmers Market, I agree to comply with the stated rules and regulations governing the use of the following market currency:

<table>
<thead>
<tr>
<th>Currency</th>
<th>What it can be used for</th>
<th>Change Given?</th>
<th>Denominations</th>
<th>How Customers Get it</th>
</tr>
</thead>
<tbody>
<tr>
<td>Neon Orange, Yellow, or Pink Market Money</td>
<td>Anything sold at the market</td>
<td>NO</td>
<td>$1</td>
<td>Market raffle, chef demos, presentations at local schools, group tours of the market</td>
</tr>
<tr>
<td>Peach/Orange Credit/Debit</td>
<td>Anything sold at the market</td>
<td>YES</td>
<td>$1, $5</td>
<td>Using credit/debit card at info booth</td>
</tr>
<tr>
<td>Mushroom/Brown LINK Dollars</td>
<td>Only Link eligible items- NOT hot, prepared food or flowers</td>
<td>NO</td>
<td>$1, $5</td>
<td>Using Link card at info booth</td>
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<tr>
<td>Blue LINK MATCH (formerly DVCP)</td>
<td>Only FRESH Fruits &amp; Vegetables</td>
<td>NO</td>
<td>$1</td>
<td>Matches Link purchases up to $25 per market day</td>
</tr>
<tr>
<td>Food Rx/Fruit and veggie prescription</td>
<td>Only FRESH fruits and vegetables</td>
<td>NO</td>
<td>$1/$9</td>
<td>University of Chicago Medicine/South Side Diabetes/prescription from health clinics</td>
</tr>
<tr>
<td>Senior/WIC Checks</td>
<td>Only FRESH fruits and vegetables</td>
<td>NO</td>
<td>$3</td>
<td>Farmers Market Nutrition Program run by state of IL, must be below 185% of federal poverty level</td>
</tr>
</tbody>
</table>
61st Street Farmers Market
Ingredients List
Prepared & Processed Food Products

Baked goods, cheese, dairy products, honey, jams, preserves, cider, juice, maple syrup, meat, poultry, cased sausage, etc.

ONE SHEET PER ITEM – PLEASE MAKE COPIES IF NECESSARY

Business Name:______________________________

Product:_______________________________________

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<th>Ingredients</th>
<th>% of Recipe</th>
<th>Source</th>
<th>Organic (yes/no)</th>
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