

Asheville City Market Vendor Agreement

Owner / Business _____

Listed Representative(s)

Family member, employee or intern involved in production, or farm coop partner.

Status ___ member (\$100 annual fee) ___ day vendor

Category ___ farm vendor (\$20/week)
 ___ value added / prepared foods vendor (\$20/week)
 ___ art / craft vendor (\$25/week)
 ___ day vendor (\$35/week)
 ___ electrical access as available (\$5/week)

Confirmed market dates (day vendor dates subject to change)

___ April 19	___ June 7	___ July 26	___ September 13	___ November 1
___ April 26	___ June 14	___ August 2	___ September 20	___ November 8
___ May 3	___ June 21	___ August 9	___ September 27	___ November 15
___ May 10	___ June 28	___ August 16	___ October 4	___ November 22
___ May 17	___ July 5	___ August 23	___ October 11	___ November 29
___ May 24	___ July 12	___ August 30	___ October 18	___ December 6
___ May 31	___ July 19	___ September 6	___ October 25	___ December 13
				___ December 20

Product List

License, Permit, Certification, and Inspection documentation provided

_____ NCDAs Kitchen Inspection	_____ USDA Organic Certification
_____ NCDAs Meat Handler’s License	_____ City of Asheville Privilege License
_____ FDA Short Course Certification (for acidified foods)	_____ Sales Tax ID Number
_____ other: _____	
_____ other: _____	
_____ other: _____	

Liability provisions – Hold Harmless (draft section pending additional review)

Each vendor participating in the Asheville City Market shall be responsible for any loss, personal injury, deaths, and/or other damage that may occur as a result of the vendor’s negligence or that of its servants, agents, and employees, and hereby agrees to exonerate, hold harmless, indemnify and defend Asheville City Market and A.S.A.P., its successors and assigns, from and against any and all losses, damages, claims, suits or actions, judgments and costs, and attorneys fees which may arise or grow out of any injury or death of persons or damage to property in any manner connected with the vendor’s products, operations, or vending at the Market.

I submit that the information provided for my application, site visit checklist, and vendor agreement is accurate and complete. I have been provided with a copy of the *ACM Rules & Regulations* and that I will abide by its provisions.
Member fee amount due: _____

SIGNATURE(S): _____

DATE: _____