

**Potomac Village Farmers Market  
Application for Participation  
2018**

I, \_\_\_\_\_, apply for participation in the Potomac Village Farmers Market  
(print) (PVFM)

for the 2018 season, with the intent to sell my products. Enclosed, please find the individual checks in the amount of \$300.00.

My signature attests to the accuracy of the information provided and attests to adhere to the rules, regulations and responsibilities stated by the market. In addition, I agree to adhere to the following:

1. I acknowledge that my business can be inspected anytime during the season following a phone call from the market 1 or 2 days ahead of time.
2. This application does not constitute acceptance into the market.
3. Upon acceptance into the market, I will adhere to the principles as stated in the Operating Agreement for PVFM.

\_\_\_\_\_  
Signature of Business Applicant

\_\_\_\_\_  
Name (Print)

\_\_\_\_\_  
Business Name

\_\_\_\_\_  
Phone #-Business

\_\_\_\_\_  
Business Address

\_\_\_\_\_  
Phone #-Cell of main contact

\_\_\_\_\_  
City, State          Zip Code

\_\_\_\_\_  
E-Mail Address

*Mail completed application and check(s) to:*

Potomac Village Farmers Market c/o  
Suzanne Hermes  
9809 Brookford Rd.  
Potomac, MD 20854

**Make check payable to: Farm Fresh Chef, LLC**

*Please return completed application and check no later than April 1<sup>st</sup>, 2018*

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To be considered for participation in the market, you must provide all of the requested information below.

**Part I - BUSINESS PRODUCTS**

Web Address: \_\_\_\_\_

Will you advertise your participation in the market on your web site and in marketing material? YES NO

On Facebook? YES NO

On Twitter? YES NO

On Instagram? YES NO

**Part I ITEMS PRODUCED BY BUSINESS**

**The following products require a permit by the Department of Health & Human Services.**

***IMPORTANT:* Please contact the Department of Health & Human Services, Licensure & Regulatory Services, (DHHS) 255 Rockville Pike, 2<sup>nd</sup> Floor, Rockville, MD 20850. A HHS permit is required by the county to sell at any county market. Please obtain this application from the DHHS as soon as possible. You may call them with any questions at 240-777-3986.**

Baked goods (cookies, cakes, pies, breads – classified as non-hazardous)  
Processed or prepared items (i.e. jams, jellies, honey, preserves, conserves, fruit spreads, cider)  
Eggs  
Dairy & Cheeses  
Meats & Poultry

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**Dairy**

Name	Type (Goat, Cow, Sheep)	Organic, Grass-fed, Raw, (O),(G), (R) or Conventional(C)	Milk produced on farm (PF) or Purchased Wholesale (PW)

**Crafts/Jewelry**

Please indicate the type of Craft: \_\_\_\_\_

Is it handmade by you or others in your business? YES    NO

Do you source your materials locally? YES    NO

Will you purchase any products not made by your business to sell at the Potomac Village Farmers Market? YES    NO

Please list the products: \_\_\_\_\_

**Crafts/Jewelry**

Type of Craft/Jewelry

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**Part 2**

Please list other Farmers Markets that you participate in: \_\_\_\_\_

\_\_\_\_\_

If you have any questions, please contact, the Potomac Village Farmers Market (PVFM) at [potomacvillagefarmersmarket.com](http://potomacvillagefarmersmarket.com) or [potomacfarmersmarket@gmail.com](mailto:potomacfarmersmarket@gmail.com)