



Renfrew County and District Health Unit

"Optimal Health for All in Renfrew County and District"

FARMERS' MARKET **VENDOR** APPLICATION

PART A

Name of Market: _____ Vendor Business Name: _____

Vendor Contact Name: _____

Vendor Mailing Address: _____

Vendor Phone Number: _____ Email Address: _____

PART B

I am a Farmer/producer primarily selling my own "farm products" (definition above)
COMPLETE PART C, D, E

Vendor selling food, and I operate an RCDHU inspected food premises.
COMPLETE PART D, E

Vendor selling food and I DO NOT operate an RCDHU inspected food premises.
COMPLETE PARTS C, D, E

Vendor selling crafts – I will not be selling ANY food.
FORM COMPLETE, SEE PART E

PART C

Food Items / Ingredients	Source of Food (grocery store, supplier/manufacturers, farm, garden)

PART D

For vendors selling/preparing food onsite, please answer the following:

- Sampling of food products on site? YES NO N/A
- Preparing food on site (cooking, reheating, assembling)? YES NO N/A
- Access to a handwashing sink/temporary handwashing set-up? YES NO N/A
- If YES, what is your water source: _____
- Coolers with ice or refrigerators to keep food cold? YES NO N/A
- Hot holding units to keep food hot and a probe thermometer? YES NO N/A
- Method of cleaning/sanitizing utensils available? YES NO N/A
- Food-grade sanitizer available for surfaces? YES NO N/A

PART E

I, _____, certify and accept responsibility for ensuring the above information is accurate and will be adhered to.

Signature of Applicant: _____ Date: _____