

# ***Petal Farmer's Market***

## **2016 Vendor Application**

First Name \_\_\_\_\_

Last Name \_\_\_\_\_

Street Address: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Home phone Number: \_\_\_\_\_

Email address: \_\_\_\_\_

Cell phone Number: \_\_\_\_\_

Will you be needing electricity? \_\_\_\_\_

If so, what will you be using it for (i.e. cooler freezer, etc.) \_\_\_\_\_

Electricity will be on first come first serve basis. There are limited electric outlets.

**Please check box of each category for products you intend to sell.**

☐ Vegetables

☐ Jams/Jellies

☐ Fruits

☐ Plants/Flowers

☐ Prepared Foods

☐ Baked Goods

☐ Dairy

☐ Honey/Syrup

☐ Other

If you checked "other", please list those items here: \_\_\_\_\_

\_\_\_\_\_

**Please specify each product you plan to sell for each category marked above.  
(Ex: Vegetables/Radishes)**

\_\_\_\_\_/\_\_\_\_\_

\_\_\_\_\_/\_\_\_\_\_

\_\_\_\_\_/\_\_\_\_\_

\_\_\_\_\_/\_\_\_\_\_

By my signature on this form, I hereby consent to all the terms of this certification\* and agree to abide by all rules, regulations, and policies of the State of Mississippi\*\*, the Mississippi Department of Agriculture and Commerce, and the Petal Farmer's Market\*\*\*.

\*Market staff or designated representative may visit any approved producer's facilities to ensure compliance with applications and market regulations. Non-compliance issues will be reported in writing by the Market Manager.

\*\*Section 27-65-103(b), Mississippi Code of 1972, provides an exemption from sales tax for sales of agricultural products only when sold by the producer and when sold in their original state without further processing or preparation. This exemption is applicable only if the producer is selling those agricultural products that he or she has produced. The mixing of products purchased from another producer with products raised by the seller will result in all sales becoming taxable. By signature on this form, I hereby understand that I will be liable for sales tax on all of my sales if I sell any agricultural products that I have not grown or that are not in their original state.

\*\*\*All participants, upon submitting application, also thereby approve the Petal Farmer's Market Rules.

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Signature

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Date