



Twin City  
Farmers  
MARKET

# Vendor Application

Business Name:			
Primary Contact Person:			
Mailing Address:			
Phone:		Cell:	
Email:			
Business Website:			
Business Social Media:			
Type of Vendor:	<input type="checkbox"/> Indoor - Permanent/Year-Round  <input type="checkbox"/> Outdoor - Seasonal (1 <sup>st</sup> Saturday of May through last Saturday of October) <i>If not applying for full season, please specify dates during this period of time:</i> <hr style="width: 60%; margin-left: 0;"/> <input type="checkbox"/> Visitor <i>Please specify date(s) requested</i> _____		
Do you need electricity?	If yes, please specify for what type of appliance(s):		
<input type="checkbox"/> YES <input type="checkbox"/> NO			
Please list any applicable licenses, permits & certifications held: <i>(please attach copies)</i>			
Where are the items you will be selling grown/produced/made:			

Do you sell your products at other markets and/or locations?

YES       NO

If yes, please specify:

Will persons other than the Applicant be staffing the Booth at the Market? *If yes, please list names and relationship to applicant of those who may be responsible for the booth:*

Please list items to be sold and description of business (be as specific and detailed as possible).

Arts/Craft Vendors, please attach photographs of your work or email photos to  
[farmersmarket@sterlingmainstreet.org](mailto:farmersmarket@sterlingmainstreet.org)  
Applications received without photos will be deemed incomplete.

*Please use other side or attach additional pages as needed*

The undersigned hereby makes application to the Twin City Farmers Market to be a vendor. Applicant certifies that he/she has read the Market Handbook Rules & Regulations, understands and agrees to abide by said rules and regulation should this application be accepted. Applicant further understands that TCM reserves the right to limit the number of vendors for each product area to ensure a diverse and sustainable product mix for the Market and that priority will be given to locally grown produce and other food items.

\_\_\_\_\_  
Applicant Signature

\_\_\_\_\_  
Date

**For Office Use Only:**

Date Application Received: \_\_\_\_\_

Date Reviewed: \_\_\_\_\_

Approved:      Yes / No

Date Applicant Notified: \_\_\_\_\_

Start Date at Market: \_\_\_\_\_

**Comments:**

Please return completed application to:  
Sterling Main Street  
15 E. 3<sup>rd</sup> Street  
Sterling, IL 61081

Or scan & email (along with product photos) to:  
[farmersmarket@sterlingmainstreet.org](mailto:farmersmarket@sterlingmainstreet.org)