

# 2017 Downtown Hazleton Farmer's Market Application

Fridays 10 a.m. to 2 p.m. on sidewalks Downtown Hazleton

**Business Name:** \_\_\_\_\_

**Name:** \_\_\_\_\_

**Address:** \_\_\_\_\_

**Telephone(primary):** \_\_\_\_\_ **Cell phone:** \_\_\_\_\_

**Email Address:** \_\_\_\_\_ **Fax:** \_\_\_\_\_

**Products to be sold:**

\_\_\_\_\_

\_\_\_\_\_

**Products to be sold from outside farm:** \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**If not from your farm, where did products originate?** \_\_\_\_\_

**Approx. area you will need (standard area 10'x20')** \_\_\_\_\_

**Season start date:** July 14, 2017 \_\_\_\_\_ **Season end date:** Sep 1, 2017 \_\_\_\_\_

(Every Friday from 10 a.m. to 2 p.m.)

**Vendor Fee Paid (\$50 per space)\*(office use)** \_\_\_\_\_ **Date Paid** \_\_\_\_\_

**\*See attached Business License Application from the City of Hazleton**

**Proof of Vendor Insurance Received\*\*(office use):** Yes \_\_\_\_\_ No \_\_\_\_\_

**\*\*Proof of insurance is required prior to participating**

**Guidelines Received(for office use):** Yes \_\_\_\_\_ No \_\_\_\_\_

**I understand by signing this document that I have read and understand the guidelines and agree to abide by them:**

**Signature:** \_\_\_\_\_

**Return completed form to:**

**Greater Hazleton Chamber of Commerce**

**20 W. Broad Street**

**Hazleton, PA 18201**

**Questions: 570-455-1509 Fax: 570-450-2013**