



Town of Pleasant Garden
4920 Alliance Church Road
PO Box 307
Pleasant Garden, NC 27313

2021 Farmers Market Vendor Application

Name: _____

Company Name (if applicable): _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: _____ Email: _____

I will be selling: _____

PLEASE CHECK ONE

_____ I am a returning vendor.

_____ I am a new vendor.

REQUIRED ATTACHMENTS:

1. _____ Signed, written statement verifying that you grow or make all of the products you are offering for sale.

OR

_____ Copy of your NC Department of Revenue Certificate of Registration if you sell products grown or produced by someone else.

2. _____ Signed liability waiver form

3. _____ Copy of your inspection certificate if you are selling home-prepared foods

Signature

Date