



## Poringland Farmers' Market Stallholder's Application Form

This form is for the exclusive use of Poringland Farmers' Market and Norfolk C. C. Trading Standards and South Norfolk D. C. Environmental Health Officers. Please make a copy for your own records.

**Name of all Market(s) currently attended** .....

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**Your Name** .....

**Business Name** .....

Acreage (if applicable) ..... Holding No .....

<p><b>Business address</b></p> <p>.....</p> <p>.....</p> <p>Postcode .....</p> <p>Telephone .....</p> <p>Web site .....</p> <p>Email .....</p>
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<p><b>Home address</b></p> <p>.....</p> <p>.....</p> <p>Postcode .....</p> <p>Telephone .....</p> <p>Mobile .....</p>
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Please tick the box that best describes your core business

- |   |  |
|---|--|
| <input type="checkbox"/> Fruit                      | <input type="checkbox"/> Chocolate/Confectionery           |
| <input type="checkbox"/> Vegetables                 | <input type="checkbox"/> Honey products                    |
| <input type="checkbox"/> Cheese and dairy produce   | <input type="checkbox"/> Preserves                         |
| <input type="checkbox"/> Eggs                       | <input type="checkbox"/> Drinks                            |
| <input type="checkbox"/> Raw meat and meat products | <input type="checkbox"/> Other <i>please specify</i> ..... |
| <input type="checkbox"/> Bread/pastries/baked goods |  |

Please list **all the products or produce you intend to sell** at Farmers Markets. You will only be permitted to sell produce listed below, and may be asked to remove any undeclared items. If you change your trade or develop new lines, you will need to complete a new application form.

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Please circle the months in which you are able to sell your produce or products.

All Year    Jan    Feb    Mar    Apr    May    Jun    Jul    Aug    Sep    Oct    Nov    Dec

If you are making products from raw ingredients (i. e. cakes, bread or beers) you should include local ingredients. Local means within 30 miles or up to 50 miles if not available, of your premises. **Please give details of these.** Proof may be required.

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- Will you yourself be attending the markets to sell your produce?  
 Yes       No

**If no, please state who else will regularly be at the markets. To qualify to sell at a Farmers Market, produce must be sold by the producer, a family member or by a member of staff with a working knowledge of the production of goods on sale.**

Name(s) .....  
Position .....

- Are you a member of any assurance or Certification scheme (e.g. Organic, LEAF, FABBAL etc)?  
 Yes       No

If you are, please include a copy of your certification document with this application.

**Applicant Statement** - Please tick to acknowledge

- I agree to sell only items that I have produced, grown or raised.
- Only the persons named above will be present at my stall.
- I understand that my details may be passed on to environmental health and trading standards officers.
- I understand that trading standards and environmental health officers will communicate with the Market Manager any issues which may affect my ability to attend the markets.
- I agree to assist in any inspections required to verify the above statement.
- I have read and understood the Rules of Poringland Farmers' Market.
- I agree to abide by the above.

Signed .....      Date .....

**Thank you**

Any stallholder who falsifies information on this form or fails to keep to the agreed conditions will be suspended from trading.

It would be useful, but not essential, if you could supply:

- A copy of your public and produce liability insurance
- Copy of your Basic Food Hygiene Certificate
- Evidence of Registration as a Food Business with your local authority
- Copies of certificates for assurance schemes (e.g. Organic, FABBAL etc)
- Copy of electrical safety certificate for any appliances to be used at the market.

Please return this form to:

Poringland Farmers' Market  
Loddon Mill  
45a Bridge Street  
Loddon  
Norwich  
NR14 6NA