

Frankfort Country Market Application 2017



Note: First Time Applicants: Submit Application Only for Review & Approval

Returning Vendors: Submit Application, Certificate of Insurance, Rules & Regulations Acceptance, ST-1 Form and Indemnification Certificate

Applications received after the January 31 deadline will be considered on a first come/first serve basis.

SPRING market runs 5 weeks from April 30 through May 28 (Hours: 10:00 AM to 2:00 PM)

SUMMER market runs 12 weeks from June 4 through August 27 (Hours: 9:00 AM to 2:00 PM)-(no market July 9 Bluegrass Festival)

FALL market runs 5 weeks from September 10 through October 8 (Hours: 9:00 AM to 1:00 PM) (no market September 3 Frankfort Fall Festival)

DATE _____

ILLINOIS STATE SALES TAX NO. _____
(Attach 2016 IL State Tax Form ST-1 or ST-2)

CONTACT NAME _____

BUSINESS NAME _____

ADDRESS _____

CITY _____

STATE _____

ZIP _____

PHONE: _____ (DAY)

_____ (EVENING)

_____ (CELL)

EMAIL: _____

WEBSITE ADDRESS _____

Location of land used for production (if applicable):

SEC. _____ TOWNSHIP _____ COUNTY _____ STATE _____

SEC. _____ TOWNSHIP _____ COUNTY _____ STATE _____

SEC. _____ TOWNSHIP _____ COUNTY _____ STATE _____

If renting, give name, address & phone number of land owner(s):

(Attach proof of land ownership/lease (as applicable))

LIST ALL ITEMS THAT YOU INTEND TO SELL DURING THE SEASON:

***Note:** Sellers are *only* allowed to sell items you grow, produce, and/or make yourself. If an item is not listed, you may NOT sell it unless you amend your application. Listing a product is not authorization to sell. Products must be approved. **No product additions during market season without prior approval.**

2017 Market Participation Fee

Prepared Food & Producer:

Spring Market runs 5 weeks from April 30 through May 28

- Yes**, I would like to participate in the SPRING market at \$175 for a single space (10 x 10 space): \$175.00
- Yes**, I would like additional space at \$175 for each additional 10 x 10 space requested _____ # of spaces @ \$175 each= \$ _____
- Yes**, I require electricity for the SPRING market (**one outlet**) \$ No Charge
 (Please indicate for what purpose – be specific; include amps
 (i.e., refrigerator, freezer, cash register, etc.) _____)
- Yes**, I would like additional electrical outlet at \$25 for each additional outlet requested _____ # of outlets @ \$25 each= \$ _____

TOTAL SPRING MARKET FEE: \$ _____

Summer Market runs 11 weeks from June 4 through August 27 (no market on July 9, Bluegrass Festival & September 3, Labor Day Weekend)

- Yes**, I would like to participate in the SUMMER market at \$375 for a single space (10 x 10 space): \$375.00
- Yes**, I would like additional space at \$375 for each additional 10 x 10 space requested _____ # of spaces @ \$350 each= \$ _____
- Yes**, I require electricity for the SUMMER market (**one outlet**) \$ No Charge
 (Please indicate for what purpose – be specific; include amps
 (i.e., refrigerator, freezer, cash register, etc.) _____)
- Yes**, I would like additional electrical outlet at \$25 for each additional outlet requested _____ # of outlets @ \$25 each= \$ _____

TOTAL SUMMER MARKET FEE: \$ _____

Fall Market runs 5 weeks from September 10 through October 8

- Yes**, I would like to participate in the FALL market at \$175 for a single space (10 x 10 space): \$175.00
- Yes**, I would like additional space at \$175 for each additional 10 x 10 space requested _____ # of spaces @ \$175 each= \$ _____
- Yes**, I require electricity for the FALL market (**one outlet**) \$ No Charge
 (Please indicate for what purpose – be specific; include amps
 (i.e., refrigerator, freezer, cash register, etc.) _____)
- Yes**, I would like additional electrical outlet at \$25 for each additional outlet requested _____ # of outlets @ \$25 each= \$ _____

TOTAL FALL MARKET FEE: \$ _____

GRAND TOTAL 2017 FEE: \$ _____

Vendor Signature: _____

PLEASE NOTE: **Returning Vendors:** Total participation fee, application, certificate of insurance, rules and regulations acceptance form, sales tax form(s), proof of land ownership/lease and indemnification certification are due with the submission of the application.

DEADLINE: JANUARY 31, 2017

Make Check Payable to: Village of Frankfort

Mail check, application, certificate of insurance, rules and regulations acceptance form and indemnification certificate to:

Village of Frankfort

Frankfort Country Market – Attn.: Mary Canino

432 W. Nebraska

Frankfort, IL 60423

Fax # 815-469-7999

Office Use Only:

Date Rec'd.: _____

Info Complete: Yes No

Date Approved: _____