



## Haverhill Farmers Market: Application Checklist

The following documents are required to apply as a vendor by **April 15, 2018**. For new vendors, please contact Jeff Grassie ([jeffgrassie@yahoo.com](mailto:jeffgrassie@yahoo.com)) to inquire about space availability.

1. \_\_\_ **Completed Market Vendor Application**
  
2. \_\_\_ **Signed Market Rules and Regulations 2018**
  
3. \_\_\_ **Copy of your 2018 Vendor Liability Insurance:** If you have any questions regarding vendor liability insurance, contact your local insurance agent or our market insurer, Campbell Risk Management (Contact name is Larry Spilker at 800-730-7475 ext. 203).
  
4. \_\_\_ **Payment:** a check payable to the **Creative Haverhill** for the full season (\$275) or half season (specific dates x \$20). **For full season and half season you must pay all money up front and mailed with application by April 1<sup>st</sup> to reserve a space.**

**If you are selling anything other than whole fruits and vegetables or if you plan to serve, cut or offer samples of any food, fruit or vegetable product, you need a Haverhill Temporary Food Permit.**

5. \_\_\_ **Copy of your 2018 Haverhill Board of Health Temporary Food Permit** See page 4 for more details. Vendors from other towns must be approved by the Haverhill Board of Health.

Send the above documents by **April 15, 2018** to:

Send to:

Jeff Grassie  
c/o Haverhill Farmers Market  
1153 West Lowell Ave  
Haverhill, Ma. 01832.

**Applications are not considered complete until all documents and checks have been received.**

If you have any questions, please contact me at 978-872-7535 or e-mail [jeffgrassie@yahoo.com](mailto:jeffgrassie@yahoo.com).

# Market Vendor Application

Name:			
Name of Farm/Business:			
Address:			
Home Phone:	Business Phone:	Cell:	
Email address:			
Website:			
Produce/Items being sold:			
<b>Vegetables:</b>			
<input type="checkbox"/> Asparagus	<input type="checkbox"/> Beans-Green	<input type="checkbox"/> Beans-String	<input type="checkbox"/> Beans-Wax
<input type="checkbox"/> Beets	<input type="checkbox"/> Broccoli	<input type="checkbox"/> Cabbage	<input type="checkbox"/> Carrots
<input type="checkbox"/> Cauliflower	<input type="checkbox"/> Celery	<input type="checkbox"/> Corn	<input type="checkbox"/> Cucumbers
<input type="checkbox"/> Eggplant	<input type="checkbox"/> Greens-Collard	<input type="checkbox"/> Greens-Mustard	<input type="checkbox"/> Greens-Turnip
<input type="checkbox"/> Kale	<input type="checkbox"/> Kohlrabi	<input type="checkbox"/> Lettuce-Boston	<input type="checkbox"/> Lettuce-Romaine
<input type="checkbox"/> Lettuce-Red Leaf	<input type="checkbox"/> Onion-Yellow	<input type="checkbox"/> Peas	<input type="checkbox"/> Peppers-Green
<input type="checkbox"/> Peppers-Hot	<input type="checkbox"/> Potatoes-White	<input type="checkbox"/> Potatoes-Sweet	<input type="checkbox"/> Pumpkins
<input type="checkbox"/> Radishes	<input type="checkbox"/> Scallion	<input type="checkbox"/> Spinach	<input type="checkbox"/> Squash-Summer
<input type="checkbox"/> Squash-Winter	<input type="checkbox"/> Tomatoes	<input type="checkbox"/> Turnip	<input type="checkbox"/> Zucchini
Other Vegetables: _____			
<b>Fruits, Berries, Melons:</b>			
<input type="checkbox"/> Apples	<input type="checkbox"/> Blackberries	<input type="checkbox"/> Blueberries	<input type="checkbox"/> Strawberries
<input type="checkbox"/> Cantaloupe	<input type="checkbox"/> Nectarines	<input type="checkbox"/> Peaches	<input type="checkbox"/> Watermelons
<input type="checkbox"/> Pears	<input type="checkbox"/> Plums	<input type="checkbox"/> Raspberries	
Other Fruits, berries or melons: _____			
<b>Ornamental Crops:</b>			
<input type="checkbox"/> Bedding Plants	<input type="checkbox"/> Cut Flowers	<input type="checkbox"/> Hanging Plants	
<input type="checkbox"/> Mums	<input type="checkbox"/> Wild flowers		
Other Ornamental Crops: _____			
<input type="checkbox"/> Apple Cider	<input type="checkbox"/> Baked Goods	<input type="checkbox"/> Cheese	<input type="checkbox"/> Wine
<input type="checkbox"/> Eggs	<input type="checkbox"/> Honey	<input type="checkbox"/> Jam/Jelly	<input type="checkbox"/> Maple Syrup
<input type="checkbox"/> Turkey/ Poultry	<input type="checkbox"/> Herbs	<input type="checkbox"/> Beef	<input type="checkbox"/> Fish

## FEES:

### Farmers/Prepared Foods:

\$20/market day or discounted \$275/season (19 weeks, \$14.50/week)

### Dates of Attendance (if not full season):

\_\_\_\_\_

## 1. Market Rules and Regulations 2018

1. The market will be open **Saturdays June 23 to October 27.**
2. The time of the market is **9:00 AM – 1:00 PM** each Saturday. All vendors must arrive early enough to be set-up before the start of the market, **no later than 8:45am.**
3. **Each seller must have sufficient tent weights** and leave his/her area broom clean condition within ½ hour after selling stops. No food stuff, rubbish, or personal belongings of any sort shall remain after the market is closed.
4. All produce, plants, flowers, crafts, eggs, honey, cider, maple syrup, etc. must be locally grown and produced by the vendor registered at the market. **Products that are not locally grown or produced by the vendor must get pre-approval by the market organizer (Jeff Grassie).** This market is a “Seller Made, Seller Grown” farmers market.
5. Baked goods, pickles, jams, jellies, and similarly processed foods may be sold if made locally. **It is the vendor’s responsibility to meet all of the requirements of the Health Department and obtain any necessary licenses. All vendors must be able to show evidence of compliance.**
6. Prices will be determined by the seller; however, such **prices must be posted** in a conspicuous manner. Neither the Farmers’ Market nor the City is responsible for any sales arrangements or warranty of any sort, expressed or implied, concerning products bought or sold.
7. Vendors must have their **scales sealed by an official City or State Sealer of Weights and Measures.**
8. The market will open at 9AM and close at 1PM. **Vendors are required to be at the market until closing time (1 PM) due to the safety of the customers.** If a vendor needs to leave before 1 PM, they must make arrangements with the market manager at the start of the market.
9. The market managers shall be in charge of the market operations such as parking, greeting new vendors and informing them of rules, fees, quality control, etc. Disputes will be settled by the designated market manager, and such decisions will be final.
10. All regularly participating vendors are asked to assist the market manager in monitoring the area around his/her truck for traffic congestion, new vendors who are not familiar with the market rules and fees, and other situations that may arise.
11. **Absolutely, NO smoking near the market.** Any smoking must take place at least 25 feet away from the market. Please be considerate of the other vendors and our customers.
12. Any violation of these rules shall subject the violator to denial of further participation in the Haverhill Farmers’ Market.
13. Solicitation and the distribution of pamphlets from any group, organization or political committee are prohibited without prior approval from the market manager.

Signature \_\_\_\_\_ Date \_\_\_\_\_

## **2018 Haverhill Board of Health Temporary Food Permit**

Vendors require a **Haverhill Board of Health Temporary Food Permit** if:

- you are selling any food item other than whole fruits and vegetables
- you plan to serve, cut or offer samples of any food, fruit or vegetable product

To apply for **Haverhill Board of Health Temporary Food Permit**

- Complete the **APPLICATION FOR TEMPORARY FOOD ESTABLISHMENT PERMIT (pages 5-7)**
- Include a check for **\$50** payable to the **City of Haverhill** and
- **Mail** to the following address:

**Haverhill City Hall  
Haverhill Board of Health  
4 Summer St. Room #210  
Haverhill, MA 01832**

**For more info call Mark Tolman at 978-374-2325 from 8-9am and 3-4pm**

**If your business is not located in Haverhill, you will also need your town/city's food permit in addition to Haverhill's temporary food permit.**

Serve Safe Certification is good for 5 years. If you don't have this certificate, contact Common Sense Food Safety at 978-346-0404 in Merrimac, MA, NECCO Haverhill at 978-556-3000 or Pilgrim Hospitality at 800-852-3042 for more information.

**CITY OF HAVERHILL**  
 4 Summer Street Room 210  
 Haverhill, MA 01830  
 (978)-374-2335  
 ◆ **BOARD OF HEALTH**

**APPLICATION FOR TEMPORARY FOOD ESTABLISHMENT PERMIT**  
**Fee: \$50.00** Please make check payable to: **City of Haverhill**

Name of Establishment: \_\_\_\_\_ Contact Telephone # \_\_\_\_\_

Name of Event/Location \_\_\_\_\_ Date of Scheduled Event \_\_\_\_\_

Operator Mailing Address \_\_\_\_\_

1. Before completing this application, read the temporary food establishment **Are You Ready? Checklist**.  
 Have you read these materials      **YES**      **NO**

2. **MENU:** Attach or list below all items. Any Changes must be submitted and approved by the Haverhill Board of Health at least 5 days prior to the event.

3. Will all foods be prepared at the temporary food establishment booth?

     **YES** Complete **SECTION A** below if you answered YES to question 3.

     **NO** Attach a copy of the permit where the food will be prepared. If food is prepared at a licensed establishment in Haverhill list name only. \_\_\_\_\_

Complete **SECTIONS A and B** below if you answered **NO** to question 3.

4. **List each food item prepared**, and for each item **check** which preparation procedure will occur.  
 Please attach a copy of the menu.

**SECTION A: At the Booth**

Food	Thaw	Cut / Assemble	Cook	Cool	Cold Holding	Reheat	Hot Holding	Portion Packaging



**SECTION B: At the licensed food establishment.**

Food	Thaw	Cut / Assemble	Cook	Cool	Cold Holding	Reheat	Hot Holding	Portion Packaging

5. Food Source(s): \_\_\_\_\_

Source and Storage of water/ice: \_\_\_\_\_

Storage and disposal of wastewater: \_\_\_\_\_

**I certify that I am familiar with 105 CMR 590.00 Minimum Sanitation Standards for Food Establishments-Article X, and the above described establishment will be operated and maintained in accordance with the regulations.**

Applicant's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

## **CITY OF HAVERHILL BOARD OF HEALTH CONDITIONS AND REQUIREMENTS FOR FOOD VENDORS**

*Please Note: These conditions and requirements only apply if you are selling anything other than whole fruits and vegetables or if you plan to serve, cut or offer samples of any food, fruit or vegetable product.*

These requirements are in accordance with the State Sanitary Code of the Massachusetts Department of Public Health, 105 CMR 590.00. This code states, "The Board of Health may impose additional requirements to protect against health hazards related to the conduct of the temporary food establishment, may prohibit the sale of some or all potentially hazardous foods, and when no health hazard will result, may waive or modify the requirements of these regulations."

**Therefore the Haverhill Board of Health reserves the right to evaluate individual establishments/farm stands and make necessary requirements to protect the public health.**

A CERTIFIED FOOD MANAGER IS REQUIRED AT ANY TEMPORARY FOOD ESTABLISHMENT/FARM STAND THAT PREPARES OR SERVES POTENTIALLY HAZARDOUS FOODS. ANY VARIATION FROM APPROVED APPLICATION MAY RESULT IN REVOCATION/SUSPENSION OF CURRENT PERMIT OR DENIAL OF FUTURE PERMITS.

### **ALL TEMPORARY FOOD ESTABLISHMENTS/FARM STANDS MUST COMPLY WITH THE FOLLOWING:**

- Foods served are limited to the following: Baked goods, fresh fruit and vegetables, and pre-cooked potentially hazardous foods. **Raw chicken, raw beef, raw pork, or other raw potentially hazardous food is NOT allowed.**
- The application must be filled out completely. Incomplete applications may result in a refusal to permit the establishment/farm stand.
- Necessary permits for the operation of the establishment/farm stand, including the Food Permit, must be conspicuously displayed.
- Running water with liquid soap and disposable towels for hand washing must be available. Bottle water with a pull out spout is acceptable. If such container is used, a method of collecting waste water must be provided.
- All food handlers must wash their hands after utilizing toilet facilities, eating, or smoking.
- Smoking is not allowed within 10 feet of the establishment/farm stand.
- All utensils and food contact surfaces must be sanitized with an approved sanitizing solution. Test strips for that sanitizing solution must be readily available on site and used to verify its strength.
- Premises must be kept clean. Refuse and garbage must be disposed of in a satisfactory manner. Refuse must not be placed in city containers.
- Plan for trash handling must be approved by the Board of Health.
- All utensils, equipment, and containers must be maintained in a clean and sanitary condition.
- Food handlers must wear clean outer garments and utilize good hygienic practices.
- A permit from the Fire Department is required for the use of propane and generators.

### **VENDORS MUST ENSURE FOOD PROTECTION BY ADHERING TO THE FOLLOWING REQUIREMENTS:**

- Only foods listed on the permit may be served.
- Cold foods must be maintained at a temperature of 41°F or less.
- A visible accurate thermometer must be placed in each cooler and maintained at 41°F or below as mandated.
- Hot foods must be maintained and held at a temperature of 140°F or higher.
- Food must be obtained from a permitted source. Proof of the source must be readily available to view by Board of Health Sanitarians on site.
- All food must be purchased from a wholesaler licensed by the State.
- Stem type thermometers must be on site to check that proper temperatures are being maintained.
- All food must be covered and protected during transportation, storage, preparation, and display.
- Food shall be stored at least 6-8 inches off the ground.
- Trash bags shall not be used as storage containers.
- Bare hand contact with ready-to-eat foods is not allowed. Tongs, tissues, clean single use disposable gloves must be used when handling all ready-to-eat foods.

**ON SITE INSPECTION OF YOUR AREA WILL BE CONDUCTED BY BOARD OF HEALTH SANITARIANS TO ENSURE COMPLIANCE WITH THE CODE AND THESE REQUIREMENTS. IF VIOLATIONS ARE OBSERVED YOU MAY BE REQUIRED TO CEASE OPERATION AND TO LEAVE THE EVENT.**

1. I understand and agree to all of the Program Guidelines, Vendor Policies and Board of Health Requirements and Conditions. I understand that the board of health may require additional information in order to process this application.
2. If selected, I understand that I must obtain all necessary permits and licenses from the City of Haverhill.
3. I agree to attend the week(s) that I have committed to during the day/time referenced in the program guidelines for the 2015 Haverhill Farmers' Market.
4. I agree to indemnify and hold harmless the Haverhill Farmers' Market, the City of Haverhill and its agents, its servants, volunteers and employees from any and all liability, claim or cause of action for any property damage, personal injury, wrongful death or damage to property or persons arising out of or in connection with any error, omission or negligence by me or my employee or agent while participating in Haverhill Farmers' Market.
5. I agree to maintain sufficient insurance coverage for property damage and personal injury liability while participating in the Haverhill Farmers' Market.
6. I agree to maintain the property, including, but not limited to, sweeping up debris and taking all trash with me after each vending day.
7. I authorize the Haverhill Farmers' Market to promote the Haverhill Farmers' Market and my participation in the market, including but not limited to, using photographs and descriptions in materials, links to websites and press releases.
8. I understand that Haverhill Farmers' Market or the City of Haverhill reserves the right to make changes to any of the vendor Policies as warranted.

I \_\_\_\_\_ the owner of Farm/Business have read the Program Guidelines, Vendor Policies, Board of Health Requirements and Conditions, and the above General Conditions and agree to abide by them and the spirit of this Farmers' Market.  
Pursuant to MGL C62c, S49A, I certify under the penalties of perjury that I, to the best of my knowledge and belief, have filed all State tax returns and paid all State taxes required under law.

Signature of Owner \_\_\_\_\_ Date \_\_\_\_\_

**Haverhill City Hall  
Haverhill Board of Health  
c/o Mark Tolman  
4 Summer St. Room #210  
Haverhill, MA 01832.**