



2018-19 INDOOR SEASON APPLICATION for NEW or FORMER* VENDORS

WHAT IS THE LOGAN SQUARE FARMERS MARKET?

Since 2005, the Logan Square Farmers Market has been an open-air food market and weekly community gathering. In 2009, it expanded its operation to include an Indoor Market. The Market is operated by Logan Square Chamber of Commerce, a tax exempt 501(c)6 not-for-profit community organization, of nearly 150 local businesses, whose mission is to advance the civic and commercial interests of Logan Square.

WHAT IS THE MISSION OF THE LOGAN SQUARE FARMERS MARKET?

The Market is a place where regional farmers and sustainable food producers sell their goods and build relationships with consumers, where residents come to see their neighbors, be fed and entertained, and participate in the Logan Square community.

There are three primary goals of the Market:

- **To Build an Alternative Food System:** The Market is an outlet for delivering nutritious, conscientiously grown and locally produced foods to all members of our community regardless of income level.
- **To Foster Entrepreneurship and Support Family and Small-Scale Food Producers:** The Market functions as an incubator for small-scale, local entrepreneurs, especially those in the food sector.
- **To Build Community:** The Market serves the community by raising the profile of the neighborhood, reinforcing a positive image of Logan Square, and creating a site for civic engagement and entertainment.

**Logan Square Chamber of Commerce
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www.logansquarefarmersmarket.org

INDOOR MARKET SEASON

The Indoor Market will run Sundays beginning November 4, 2018, through March 31, 2019 at Emporium Arcade Bar of Logan Square at 2363 N. Milwaukee Ave, Chicago, IL 60647. The LSFM will be CLOSED on November 25, December 23, and December 30. Based on vendor response, the LSFM will consider planning one Holiday market on a date to be determined. The Market will be open for business from 10am until 3pm. (Emporium will be opening early for business on Sundays to accommodate us.)

Vendors are expected to commit to the entire season. If your business model requires an alternate schedule of participation, this must be noted in your application and arranged directly with the Market Manager before the season begins.

APPLICATION INSTRUCTIONS

This application is for New Vendors or Former Vendors wishing to participate in the 2018-19 Indoor Season. Former Vendor applies to any vendor who has sold at the Logan Square Farmers Market prior to the Outdoor 2018 Season.*

Complete all applicable questions carefully & completely. Incomplete applications will not be considered. Vendors with unpaid balances due to the Logan Square Chamber of Commerce will not be considered until their balance is paid in full.

Your complete application, including a \$50 non-refundable application fee and all supporting documents, **must be submitted by midnight on October 13, 2018**. Early submission is recommended. Applications submitted after this date, or incomplete applications (includes unaccompanied by the application fee, missing information and/or supplemental documentation) will be subject to an additional nonrefundable late fee of \$50. Fees are non-refundable, regardless of acceptance status.

All vendors must submit supporting documents as listed in the application below. Supplemental documents may be sent by email to "rosie@loganchamber.org" as converted 8x11" printable PDF attachments, faxed or mailed to the LSCC.

Applications will be reviewed by the Market Management Team and representatives of the Logan Square Chamber of Commerce. **You will be notified of the status of your application by October 19, 2018.** After the official application process has closed, the Chamber of Commerce reserves the right, in its sole discretion, to admit additional vendors to the Market at any time.

PLEASE NOTE: Preference will be given to vendors who are able to participate for the entire season.

PLEASE READ THE 2018-2019 LOGAN SQUARE FARMERS MARKET RULES AND REGULATIONS BEFORE COMPLETING THIS APPLICATION. ALL VENDORS ARE ACCOUNTABLE FOR THE REQUIREMENTS DESCRIBED THEREIN.

I have read the 2018-19 Rules and Guidelines

I. Contact Information

Business Name: _____

Primary Business Contact Name: _____

Business Mailing Address: _____

City, State, Zip: _____

Township: _____ County: _____

Business Phone: _____ Secondary Phone: _____

E-mail: _____

Website: _____

Social Media Handles: _____

Business Type (check one):

Individual Family Partnership LLC For-profit Corporation
 Not-for-profit Corporation Other

Is this your first time applying to the Logan Square Farmers Market? Yes No

If you are a former vendor, please list the seasons you have sold at the Logan Square Farmers Market. (eg. 2010 Outdoor, 2011 Outdoor, 2011-12 Indoor, etc.)

MARKET STAFFING: List individual(s) responsible for market-day stall management and sales other than yourself, if any:

1. Name: _____ Title _____

Cell Phone: _____ E-mail: _____

2. Name: _____ Title _____ Cell Phone: _____

E-mail: _____

How will you be submitting the non-refundable \$50 application fee, due no later than October 13, 2018, for consideration? (circle one) CHECK BY MAIL or PAYPAL

II. Vendor Specifications

1. Choose one of the following Vendor categories:

____ **Farmer/Producer** of raw, minimally processed agricultural products

____ **Baker/Processor** of raw ingredients produced by others creating a value added product

____ **Prepared Foods** produced in whole or part at the Market, intended primarily for immediate consumption

____ **Associate Vendor** in partnership with _____
(Name of Primary Vendor)

2. Are you applying to be considered as a:

____ **Weekly All Season Vendor**, November through March

____ **Biweekly All Season Vendor**, November through March

____ **Occasional or Short-Season Vendor**

3. Stalls at the Market are no more than seven feet square, intended for a maximum 6' long folding table, with some room for product storage to the rear. Farmer/Producers may request one or two stalls, while other vendors will be limited to one stall. Because the Market's layout is dictated by the venue's floorplan, not all stalls will allow equal amounts of space and may not be perfectly square. How many stalls are you requesting? _____ 1 _____ 2 _____ Very small set-up

4. Electricity is available for a limited number of vendors at the Market. Do you require an electrical outlet? _____ Yes _____ No

If "Yes", please explain why you require electricity below and any voltage requirements:

5. Please list any markets other than Logan Square where you have sold in the past and those where you intend to sell during the 2018-19 Indoor Season:

Previously: _____

Anticipated: _____

2. Which FEE SCHEDULE do you prefer?

Vendor Type	Non-refundable Application Fee	Pay-As-You-Go & Pop-Up Vendors	Advanced Pay for Full Season Vendors 19 MARKETS due by Nov. 4, 2018
Farmer/Producer	\$50	\$30	\$540
Baker/Processor	\$50	\$35	\$630
Prepared Food	\$50	\$45	\$810
Commercial Stall for Chamber Member	n/a	\$100	n/a
Commercial Stall for Non-Chamber Member	n/a	\$300	n/a
Non-refundable Late Submission Fee	+\$50 for a Total App Fee of \$100	n/a	n/a
Associate Vendor	\$100 one-time fee	n/a	n/a

_____ - **Advance Payment, available to full-season, weekly vendors only:** due by November 4, 2018. Payment may be made by check or money order mailed to LSCC or by credit card by calling gate LSCC office. This payment is non-refundable. *Please note: advanced payment may be available to alternating or rotating vendors. Upon acceptance, please discuss with Market Management to arrange.*

_____ - **Pay-as-you-go, available to all vendors excluding pop-up vendors:** Vendors will be charged for all scheduled dates unless the Market Operations Manager is notified by noon the Friday before the Market. Payment may be made directly to LSCC each week at the Market by cash, credit or check. At the end of each month, vendors will be issued a statement from LSCC showing all fees due, payments received, and any credit for electronic payments processed by LSCC. Payment of the balance of this statement is due upon receipt. Excessive cancellations and/or non-payment may result in removal from the Market.

_____ - **Pop-Up Vendors, appearing fewer than 4 times in a season:** Upon acceptance, pop-up vendors will be required to pay their stall rental fees to reserve their space for scheduled dates at the market. These fees are due immediately upon acceptance and are non-refundable.

6. Vendors are expected to commit to the entire November through March season. Those able to commit to the whole season will be given preference. If this is not possible for you, please use this space to explain. Specify which dates you would like to attend, or on which you will be absent, whichever is most concise.

7. Would you sell at the Market on an alternating or rotating basis?

No Yes Yes, but I would prefer to come each week.

8. If a weekly space is not available, would you be willing to sell at the Market on an alternating or rotating schedule?

No Yes Yes, but I would prefer to start November 4th.

Comments: _____

III. Sales Tax & Insurance

A. Sales Tax: Please note that Illinois requires that sales tax be collected on the sale of food and goods. All applicants must have an Illinois Sales Tax Number before applying to this Market. Submit proof of sales tax and insurance by email, fax or mail.

Illinois Department of Revenue (IDOR) Account ID (formerly Illinois Business Sales Tax #) _____

B. Insurance: All applicants must have a current minimum \$1,000,000 per occurrence Commercial General Liability Insurance Policy which must be submitted with this application. If accepted to the market, you must update this insurance with the following two entities listed as additionally insured: DDMB 2 LLC 2363 N Milwaukee Ave Chicago, IL 60647 and the Logan Square Chamber of Commerce, 3147 W Logan Blvd, Suite 12, Chicago, IL 60647. Upon acceptance, your updated insurance must be submitted no later than October 28, 2018 (one week advance of the first Indoor Market).

Initial that you understand and will comply: _____

Insurance Co. _____ Policy #

_____ Expiration Date: _____

IV. General Information

Please answer the following questions in the space below, or attach separately.

A. Farm/Business History: Please provide us some background on the history of your farm or business. Do you consider yourself a small or family business? Why or why not? How many people do you employ? What is your mission?

B. Fit for the Market:

Considering the Logan Square Farmers Market mission and your personal experience with the Logan Square community, what makes your business a good match for the Market? Please note: local farmer sourcing and compostable disposable requirements follows below.

C. Sustainability:

Please describe how your farming and/or production methods result in a high quality product and show care for the environment, your farm or business, and your community. Consider your environmental and community impact (ie. Local or direct sourcing, waste management, sustainable packaging). Note: Farmers/Producers, discuss your pest and weed control practices, animal handling practices, and waste management. Bakers/Processors and Prepared Food Vendors will be asked to source appropriate ingredients from a local LSFM farm. All Vendors must source compostable disposables for use at the LSFM (sampling items, utensils, cups, lids, straws, bowls, plates, napkins, ready-to-eat to-go containers). We'll share this information with the public.

Are your products USDA Certified Organic? Yes No

Do you hold or are you actively seeking any other 3rd party certification? Yes No

For each 3rd party certification you currently hold or are actively seeking, please enter the following information (attach a separate sheet if necessary):

Certifying Agency: _____

Effective Date: _____ Expiration (or Next Inspection) Date: _____

Contact information for certifying agency/ inspector:

Name: _____ Phone #: _____

Attach a copy of your certificates and/or certification letters to this application.

V.Farmers/Producers Only

1. Farm/Orchard Site Location Information

Please list all production sites including a map or GPS ready address for each. If items are wild gathered, identify the location(s). If the land is rented, shared or leased, please include contact information for the owner. This information will be used in the event that Market Management decides to perform a site visit. Please make sure of its accuracy.

Land Description and Address: _____

County: _____ City: _____ State: _____

Number of Acres: _____ Total Acreage in production: _____

Greenhouse (# and sq ft): _____ Tunnels (# and sq ft): _____

Landlord: _____ Phone: _____

Land Description and Address: _____

County: _____ City: _____ State: _____

Number of Acres: _____ Total Acreage in production: _____

and sq ft): _____ Tunnels (# and sq ft): _____

Greenhouse (#

Landlord: _____ Phone: _____

Land Description and Address: _____

County: _____ City: _____ State: _____

Number of Acres: _____ Total Acreage in production: _____

Greenhouse (# and sq ft): _____ Tunnels (# and sq ft): _____

Landlord: _____ Phone: _____

Land Description and Address: _____

County: _____ City: _____ State: _____

Number of Acres: _____ Total Acreage in production: _____

Greenhouse (# and sq ft): _____ Tunnels (# and sq ft): _____

Landlord: _____ Phone: _____

2. Products: Do you grow and/or raise all products or ingredients that you plan to sell at the Market?

___Yes ___No

If "No," please list all items produced by others and specify their origin. *See the Rules and Guidelines Section III for further information. Note that Associate Vendors whose products you intend to sell for them are required to submit a completed application and, if accepted, an associate vendor fee. This is a Producer-Only market, and the percentage of associate vendor products must be minimal to meet Producer Only market standard.

3. **Produce Farmers Only** - List your suppliers for seeds. Do you use seeds treated with insecticides or fungicides? If so, explain why.

4. **Animal Product Farm Vendors (meat, fish, poultry, eggs and dairy) & Farmers with Added Value Products (jams, preserves)** - Please list your licensed processing locations below. If necessary, attach additional information.

Product	Processor's Name & Location	Licensed By			License#
		USDA	FDA	Dept. of Health	

5. **Animal Product Farm Vendors Only (meat, fish, poultry, eggs, and dairy)** - List your suppliers for feed. What kind of feed (contents of feed, supplier and whether it is GMO/certified organic/other) do you use for your animals?

6. **Itemized Lists.** Please include an itemized list of all products you intend to sell at the LSFM, with dates expected for sale of each item. Crop and cut flowers and plant lists can be found starting on p.13.

VI. Bakers/Processors & Prepared Food Vendors Only

If you intend to sell anything at the Market other than crops in their whole, unadulterated form, please fill out this section in so far as it applies to your products.

1. Products: On a separate piece of paper, please provide a list of all food or other products you plan to sell at the Market (including bakery goods, cheeses, sandwiches, granola, jams, pickles, non-food items, etc.) Be as specific as possible. Please make special note of locally sourced ingredients or any ingredients which are organically certified.

___ I have attached my product list to my application. List the major ingredients that you grow that go into your products. Be specific about sourcing for ingredients, highlighting locally sourced ingredients, ingredients you have grown or produced yourself, or any ingredients which are organically certified. It is strongly encouraged that processed foods contain ingredients directly sourced from local LFSM farm vendors, as well as other local and sustainable producers. If you are not currently sourcing locally, please make note where you will be available to transition to locally grown or produced agricultural ingredients.

2. Do you personally oversee the production of your products? ___ Yes ___ No

3. Please describe how you make your products, including your personal involvement in the physical processing.

4. How are your products packaged? *Note that the Market favors sustainable and aesthetically pleasing packaging. The following compostable disposable products are required for use at the LFSM: sampling wares, ready-to-eat containers, utensils, napkins, plates, bowls, straws, cups, lids, etc. Styrofoam is strictly prohibited, and plastic wrapping should be kept to a minimum. See R & G for more information.

5. If you use a co-packer or co-producer, please explain what involvement you have in the development and production of your product.

6. Licensed Food Processing Locations (where products are fabricated):

Product	Processors Name & Location	Licensed by	License #

7. If you are required to have a health department license or safe food handling certificate, please attach a copy to your application.
8. If you intend to sell foods that require hot or cold storage to prevent spoilage, how do you intend to keep them at correct Health Department stipulated temperatures during transport and at the Market? (Electricity is only available for a limited number of vendors at the Market.) Describe the system you will use to verify that these temperatures are being maintained throughout the day.

VII. PREPARED FOODS

1. **On a separate piece of paper, please list each item planned for sale at the Market that you produce.** Be as specific as possible, including ingredients and sources of ingredients. Please make special note of locally sourced ingredients or any ingredients which are organically certified. Note that the vendor must be the primary producer of all items offered for sale at the Market, including beverages offered. Please review the beverage policy and note that all coffee sales are limited to vendors exclusively offering beverages.

___ I have attached my product list to my application. List the major ingredients that you grow that go into your products. Be specific about sourcing for ingredients, highlighting locally sourced ingredients, ingredients you have grown or produced yourself, or any ingredients which are organically certified. It is strongly encouraged that processed goods contain ingredients directly sourced from local LSFM farm vendors, as well as other local and sustainable producers. Please note where you anticipate transitioning ingredients, if accepted.

2. **Describe how you prepare your products** and using what methods, including any and all preparation that will be done off site as well as on-site at the Market.

3. **Vendors are required to use the following compostable disposable items:** utensils, sampling spoons and cups, plates, bowls, ready-to-eat containers, straws, napkins, lids. Please note that products labeled biodegradable, plant-based, or bio-based do not qualify as compostable. To qualify, products must clearly state they are compostable or be certified compostable. **Please initial that you understand and will comply.** _____

4. Attach a copy of your health department license and/or safe food handling certificate, to your application. Without exception, at all times food is being handled, a person who has current Food Safe Manager Certification for the current year must be present at the booth, with their certificate. (See Rules & Guidelines: Prepared Food Vendors). _____ (Attached)

2018-19 ITEMIZED CROP LIST

Please list all crops you plan to sell at the Market and the estimated dates that they will be available. There are separate sections for vegetables, fruits, and other crops.

Example:

AFFIDAVIT

I have read this application and the Logan Square Farmers Market 2018-19 Indoor Market Rules and Guidelines, and, if accepted into this Market, I hereby agree to abide by all Rules and Regulations of the Logan Square Farmers Market and accept all decisions and interpretations made by the Logan Square Chamber of Commerce, the operator of the Market, as final.

I agree to sell at the Market only those products listed in this application. I also acknowledge those products must be of my own production or produced at the location described on my application. I agree to comply with all relevant government rules and regulations related to this business and pay all taxes due in a timely manner. I acknowledge full responsibility for actions taken at the Market by myself and all those employed by or assisting me.

I acknowledge the sole authority of the Logan Square Chamber of Commerce, its Market Management and staff, to enforce and interpret the Rules of the Market, to immediately settle any disputes regarding product legitimacy, procedural or vendor conduct violations and impose any penalties, including possible suspension or removal from the market.

I agree to allow the Market Management and/or representatives of the Market at anytime to inspect the premises where the products offered for sale are produced, and acknowledge that failure to allow an inspection will constitute a violation of Market rules. I understand that the Logan Square Chamber of Commerce does not carry insurance covering individual participants and that I am required to carry such insurance.

Indemnification and Hold-Harmless Agreement: The undersigned, for himself and, if different, for the person, business or organization on behalf of whom this application is submitted, hereby agrees to indemnify the Logan Square Chamber of Commerce and the venue and their officers, agents, employees and assigns, for, and to hold them harmless from, any liability, and/or for any contractual or quasi-contractual obligations to third parties in connection with any activity, event(s), use or occurrence at the Market.

I understand that market fees are due and payable upon receipt of bills, and that non-payment may, at the sole discretion of the Logan Square Chamber of Commerce, result in suspension or removal from the Market; and that final fee payment is due no more than 30 days after the last market day. I understand that all application fees and subsequent fees are non-refundable, regardless of application or participation status.

I certify that the information contained in this application is true and accurate. Name of Business:

Signature: _____

Date: _____