



P.O. Box 253 • Kunia, HI 96759
 Phone: (808) 848-2074 • Fax: (808) 848-1921
info@hfbf.org • hfbf.org/farmers-market/

HFBF LLC FARMERS' MARKET APPLICATION

Thank you for your interest in the HFBF LLC Farmers' Markets. Please read the enclosed information. If you would like to be a Vendor, please fill out the following application. Once we have received your application, we will keep your application on file as a potential Vendor. When we have an opening for your type of product, we will contact you to discuss the possibility of participation. Only when a spot is secured for you by the Farmers' Market General Manager will we require supplemental business documents. If you have any questions, please call the Farmers' Market General Manager at (808) 848-2074.

_____ is signing up as a vendor for the HFBF LLC Farmers' Market(s):
 Company Name

MARKET	DAY	TIME	SPACE NEEDED (circle)
<input type="checkbox"/> Ala Moana Farmers' Market	Sundays	9:00 am – 12:00 pm	1 2 3 more
<input type="checkbox"/> KCC (Saturday) Farmers' Market	Saturdays	7:30 am – 11:00 am	1 2 3 more
<input type="checkbox"/> KCC (Tuesday) Farmers' Market	Tuesdays	4:00 pm – 7:00 pm	1 2 3 more
<input type="checkbox"/> Kailua Farmers' Market	Thursdays	5:00 pm – 7:30 pm	1 2 3 more
<input type="checkbox"/> Mililani Farmers' Market	Sundays	8:00 am – 11:00 am	1 2 3 more
<input type="checkbox"/> Honolulu Farmers' Market	Wednesdays	4:00 pm – 7:00 pm	1 2 3 more

VENDOR CONTACT INFORMATION:

Name _____

Company Name _____

Address _____

City _____, HI Zip Code _____

Business Phone _____ Cell Phone _____

Fax _____ Email _____

Best way to reach me is: Business Phone Cell Phone Fax Email

Business Type: Check all that apply: (use additional sheet if necessary to identify local ingredients and source of local ingredients or products)

- Fruits/vegetables — complete crop plan below
- Dairy: specify products _____
- Fish: specify products _____
- Meat: specify _____
- Maple/honey products: specify products _____
- Baked goods: specify products _____
- Prepared foods: specify products _____
- Value added – complete value-added plan below
- Nursery products: circle product types—annuals, perennials, vegetable/herb plants, nursery stock
- Eggs
- Herbs (dried or fresh-cut)
- Other _____

Crop Plan (if checked “Fruits/vegetables” above)

Indicate crops grown that you plan to sell at the HFBB LLC Farmers’ Market, including acreage of each item (use additional sheet if needed):

Crop	Acreage
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

Value Added Plan (if checked "Value added" above)

Additional value-added products you plan to sell, as allowed by the HFBF LLC Farmers' Markets' rules and regulations. Please identify locally sourced ingredients and local farm supplier. (Use additional sheet if necessary):

Product	Locally Sourced Info

Farm Inspections:

HFBF LLC reserves the right to do spot visits and farm inspections to assure that the products sold are in compliance with the HFBF LLC Farmers' Markets' rules and regulations.

Directions to your farm:

AGREEMENT (Application is not complete unless signed below):

I understand that the HFBF LLC reserves the right to cancel this application/agreement, with or without cause, at any time.

I have read the contents of "Oahu Farmers' Market Handbook," which is incorporated herein by reference, and agree to the terms set forth.

The HFBF LLC has the right to terminate this application/agreement if I do not abide by the rules and requirements set forth in "Oahu Farmers' Market Handbook," or if I conduct myself in a manner that is injurious to the best interest of the Hawaii Farm Bureau Federation and HFBF LLC.

Signature of Vendor

Date _____

Print Name of Vendor

Send in Application Form via:

MAIL:
HFBF LLC
PO Box 253
Kunia, HI 96759

EMAIL:
info@hfbf.org

FAX:
(808) 848- 1921

FOR HFBF LLC USE ONLY

Based on reviewed products to be sold, Vendor category is determined to be:

Tier 1

Tier 2

Tier 3