



# Imlay City DDA's 2021 Farmers Market EVENING SEASON Vendor Application

Market Season: Market Day & Time:	June 8, 2021 – August 31, 2021 (11-week Season) Tuesday, 3 PM – 8 PM					
Walket Day & Tille.	•	Set-up starts at 2 PM; Takedown by 9 PM				
Market Location:	Lawn space located on the corner of Third Street and Main Street, across the street from the Post Office in Downtown.					
Rental Rates (per stall):						
<u>Daily Rate</u> – <b>\$</b> <u>Full Season V</u> e	-	– paid at the start of each market day attended.				
		D RATE, paid in-full before or on April 30, 2021 – <b>\$35</b> ON RATE, paid in-full on or after May 1, 2021 – <b>\$50</b>				
Please make you check paya	ble to:	The City of Imlay City				
Mail to:		Imlay City Downtown Development Authority 150 North Main Street, Imlay City, Michigan 48444				
To join our market, your	application	on must include the following:				
☐ Completed Busin	ess Inform	nation (page 2)				
☐ Completed Stall	Request In	formation (page 3)				
☐ Completed Agree	ement of C	Compliance / Waiver Form (page 4)				
☐ Copy of Liability	Insurance (	OR Completed Sole Proprietor Form (page 5)				
☐ Completed Progr	ram Partici	pation (page 6)				
☐ Completed	W-9 Form,	if participating in any programs (page 7)				
□ Pro	_	additional agreements to be signed by Market Manager before market)				
☐ Payment for stall	(s)					
☐ Market Manager Appro	val & Conf	irmation				

Imlay City Downtown Development Authority
2021 Imlay City Farmers Market
810-724-2135 /// www.icdda.com





### 2021 Farmers Market – EVENING SEASON (Tuesdays) Vendor Application – Business Information

Representative Name:				
(checks will be issued to this person, if applicable)				
Address:				
ome Phone #: Cell Phone #:				
Email Address:				
Preferred Method(s) for Contact:		□ text cell □ email		
Business Name:				
Facebook Page:		An online presence is HIGHLY		
Website:		SUGGESTED so that we can connect your business page on our Facebook		
Products you plan to sell at our ma	rket:	posts, gaining your business more exposure, and giving customers a way		
☐ Locally-Grown Produce		to contact you outside of our market.		
☐ Michigan-Sourced Produce	☐ Maple Syrup	☐ Food Truck		
☐ Honey / Bee-Products	☐ Flowers & Plants	☐ Milk, Meats & Eggs		
□ *Baked Goods; what types: _				
□ *Canned Goods; what types:				
□ *Beverages; what types:				
☐ Pet Products; describe:				
□ Soaps & Skincare Products □ Antiques & Resale				
☐ Arts & Crafts / Handmade Pro	oducts; describe:	·		
□ Other:				

<sup>\*</sup>Please make sure you are aware of and following all of the regulations set by Michigan's Cottage Food Law – if you'd like more information on Cottage Food Law, check here:  $\Box$ 





## 2021 Farmers Market – EVENING SEASON (Tuesdays) Vendor Application – Stall Request Information

Please enter how many stalls you are requesting:

	Truck Stall	Grass Stall		
	I will pay on a daily basis \$10 a day (per stall) at the start of each market day			
	I will pay the Early Bird Rate for the entire 11-week season (before or on April 31, 2021) of \$35 (per stall)			
	I will pay the Full Season Rate for the entire 11-week season (on or after May 1st) of <b>\$50</b> (per stall)			
How of	ten do you plan to attend market?	☐ Full Season OR ☐ select dates*		
<u>JUNE</u>	JULY	AUGUST		
□ 8	No Market Ju			
□ 15	□ 13	□ 10		
□ 22	□ 20	□ 17		
□ 29	No Market Ju	uly 27 □ 24		
		□ 31		
nor do	cting dates does not lock you into those ces it exclude you from attending others. A attendance will be confirmed on a closer	Actual		

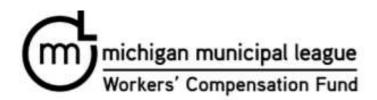
Follow our Facebook page Imlay City Farmers Market for updates on what's happening at our market each week, day-of photos of what products we're hosting, and any cancellation information.





# 2021 Farmers Market – EVENING SEASON (Tuesdays) Agreement of Compliance / Waiver of Responsibility / Media Waiver

l,	, have read and fully understand the
Imlay City Downtown Development Authority F	Farmers Market Rules & Regulations. I hereby
agree to comply with these rules and regulation	ns, as well as all other federal, state, and local
regulations that apply, knowing full well that I	will forfeit my right to sell at the Imlay City
Downtown Development Authority Farmers M	arket if I am found to be in noncompliance.
ı,	, accept the responsibility of the use
of the Farmers Market Facility. I will compensa	te the City of Imlay City for damages that may
occur to the facility while in my use. The City of	f Imlay City will not be held responsible for
accidents or injuries sustained by myself (vend	or) and / or my associates while using the
Farmers Market Facility. I, the vendor, will not	hold the City of Imlay City responsible for any
damages or harm to my employees, products,	or equipment that may occur while using the
Farmers Marker Facility.	
I,	, understand that images of myself,
my employees, and / or my products may be us	sed in promotional efforts by the Imlay City
Downtown Development Authority and Marke	t Manager, which may include, but are not
limited to, social media, websites, and printed	media.
Printed Name:	
Signature:	
Date:	-
Do you have Liability Insurance?	
No, I do not have liability insurance. Co.	mpletely fill out the sole proprietor form (attached)
Yes, I have liability insurance. (HIGHLY	RECOMMENDED) Provide a copy for our records



#### SOLE PROPRIETOR FORM For Sole Proprietors with No Employees

For workers' compensation purposes, we are required to maintain verification regarding workers' compensation coverage for all independent contractors.

You must provide the following information if you:

- a) Are a sole proprietor with no employees, and
- b) Do not carry workers' compensation insurance.

Name of Sole Proprietor:	
2) Federal Tax Identification Num	nber or last 4 digits of Social Security No
3) I am doing business as:	
Your business card:	ame certificate you filed with the county;  , Business Flyer, evidence of professional social
media presence (Linked)	
	usiness or private homeowners that you have worked for in the he date this document is signed, including address/phone #:
Please complete the following	
+ <del></del>	a Sole Proprietor with no employees, will provide services to on a periodic basis
	titled to workers' compensation benefits under Michigan's Law; nsible for any injuries/illnesses I may sustain while performing my
Signed:	Date:
Sole Proprietor	





# 2021 Farmers Market – EVENING SEASON (Tuesdays) Vendor Application – Program Participation

Are yo	u runnir	ng your own debit / credit card transactions at your stall?		
□ Yes		□ No		
	If No, v	vould you like to participate in our market's <b>Debit Token Program</b> ?		
		Our Market Manager runs customer debit / credit cards in exchange for wooden tokens; tokens are given to vendors as payment; vendors turn in tokens at the end of each day and are reimbursed via check the following market week.		
_	и.с	☐ Yes ☐ No		
•	ı sell tod	od products?		
☐ Yes		□ No – if you don't sell food, the following does not apply to you.		
	If Yes,	would you like to participate in:		
	$\square$ EBT	/ SNAP / Food Stamp Tokens (Michigan Food Products are eligible –		
		including Cottage Food Law items)		
		Our Market Manager runs customer EBT / P-EBT cards in exchange for wooden tokens; tokens are given to vendors as payment; vendors turn in tokens at the end of each day and are reimbursed via check the following market week.		
	□ <b>Double Up Food Bucks Tokens</b> ( <i>Michigan Produce and Food-Bearing Plants</i> )			
		Metal tokens are provided to customers to match all EBT / P-EBT transactions; tokens are given to vendors as payment; vendors turn in tokens at the end of each day and are reimbursed via check the following market week.		
	□ wic	Project FRESH Coupons (Michigan Produce ONLY)		
		Paper coupons are provided straight to the customer via this government program — SIGNED coupons are given straight to the farm vendor; those coupons are turned in at the end of each day and are reimbursed via check the following market week.		
	☐ Senior Project FRESH Coupons (Michigan Produce & Honey ONLY)			
		Paper coupons are provided straight to the customer via this government program – SIGNED coupons are given straight to the farm vendor; those coupons are turned in at the end of each day and are reimbursed via check the following market week.		

There are additional agreements that must be completed before accepting any of these payment programs. <u>Vendors who accept these payments without completing the agreements will not be reimbursed.</u> Market Manager will provide these to be signed before market.

If Yes to participate any program above, you will need to complete a 2021 W-9 form (attached) in order to be reimbursed. <u>Payments cannot be issued without a completed 2021 W-9 form.</u>

# Form (Rev. October 2018) Department of the Treasury Internal Revenue Service

#### Request for Taxpayer Identification Number and Certification

► Go to www.irs.gov/FormW9 for instructions and the latest information.

Give Form to the requester. Do not send to the IRS.

	<ol> <li>Name (as shown on your income tax return). Name is required on this line;</li> </ol>	do not leave this line blank.					
n page 3.	2 Business name/disregarded entity name, if different from above						
	following seven boxes.				4 Exemptions (codes apply only to certain entities, not individuals; see instructions on page 3):		
e.	☐ Individual/sole proprietor or ☐ C Corporation ☐ S Corporation single-member LLC	ITUSO ESTATE	Exempt payee code (if any)				
Print or type. See Specific Instructions on page	□ Limited liability company. Enter the tax classification (C=C corporation, S=S corporation, P=Partnership) ► Note: Check the appropriate box in the line above for the tax classification of the single-member owner. Do not check LLC if the LLC is classified as a single-member LLC that is disregarded from the owner unless the owner of the LLC is another LLC that is not disregarded from the owner for U.S. federal tax purposes. Otherwise, a single-member LLC that is disregarded from the owner should check the appropriate box for the tax classification of its owner.						
96	Other (see instructions)	- fi	Dogwoodorfo nomo		seinteined outside the U.S.)		
S	5 Address (number, street, and apt. or suite no.) See instructions.		Requester's name a	and address (option	onal)		
Š,	6 City, state, and ZIP code						
-	7 List account number(s) here (optional)						
Part	Taxpayer Identification Number (TIN)						
	our TIN in the appropriate box. The TIN provided must match the na	me given on line 1 to avoi	id Social sec	curity number			
backup	withholding. For individuals, this is generally your social security nu	mber (SSN). However, for					
	it alien, sole proprietor, or disregarded entity, see the instructions for ti is your employer identification number (EIN). If you do not have a		.	i.=	-		
TIN, lat		namber, see new to get	or		No. 28 10 10 1		
	f the account is in more than one name, see the instructions for line	1. Also see What Name a	nd Employer	identification nu	mber		
Numbe	r To Give the Requester for guidelines on whose number to enter.			_			
Part							
	penalties of perjury, I certify that:						
2. I am Serv	number shown on this form is my correct taxpayer identification num not subject to backup withholding because: (a) I am exempt from ba ice (IRS) that I am subject to backup withholding as a result of a failu- onger subject to backup withholding; and	ackup withholding, or (b) I	have not been n	otified by the In	ternal Revenue		
	a U.S. citizen or other U.S. person (defined below); and						
	FATCA code(s) entered on this form (if any) indicating that I am exem	not from FATCA reporting	is correct.				
Certific you hav acquisit	eation instructions. You must cross out item 2 above if you have been real efailed to report all interest and dividends on your tax return. For real estion or abandonment of secured property, cancellation of debt, contribution interest and dividends, you are not required to sign the certification,	notified by the IRS that you state transactions, item 2 or tions to an individual retired	are currently sub does not apply. For ment arrangement	or mortgage inter t (IRA), and gene	rest paid, erally, payments		
Sign Here	Signature of U.S. person ►	D	ate ►				
Gen	eral Instructions	Form 1099-DIV (divi funds)	dends, including	those from stor	cks or mutual		
Section references are to the Internal Revenue Code unless otherwise noted.		<ul> <li>Form 1099-MISC (various types of income, prizes, awards, or gross proceeds)</li> </ul>					
Future developments. For the latest information about developments related to Form W-9 and its instructions, such as legislation enacted after they were published, go to www.irs.gov/FormW9.		<ul> <li>Form 1099-B (stock or mutual fund sales and certain other transactions by brokers)</li> </ul>					
		Form 1099-S (proceeds from real estate transactions)					
	oose of Form	• Form 1099-K (merci					
An individual or entity (Form W-9 requester) who is required to file an information return with the IRS must obtain your correct taxpayer		<ul> <li>Form 1098 (home mortgage interest), 1098-E (student loan interest), 1098-T (tuition)</li> </ul>					
	cation number (TIN) which may be your social security number individual taxpayer identification number (ITIN), adoption	Form 1099-C (canceled debt)					
(EIN), to	er identification number (ATIN), or employer identification number o report on an information return the amount paid to you, or other t reportable on an information return. Examples of information	<ul> <li>Form 1099-A (acquisition or abandonment of secured property)</li> <li>Use Form W-9 only if you are a U.S. person (including a resident alien), to provide your correct TIN.</li> </ul>					
	include, but are not limited to, the following.	If you do not return Form W-9 to the requester with a TIN, you might					

If you do not return Form W-9 to the requester with a TIN, you might be subject to backup withholding. See What is backup withholding,

later.

· Form 1099-INT (interest earned or paid)