



**City of South Portland  
Office of the City Clerk  
25 Cottage Road  
South Portland, ME 04116-9422  
207-767-7628**

**Application for a Farmers' Market License**

Valid \_\_\_\_\_ through *April 30th* \_\_\_\_\_  
Code of Ordinances §14-105

**Check the applicable license**

<b>Food License</b> Proof of a Department of Agriculture License must be submitted with this application (when applicable)	Farmers' Market Definition: A person may not sell farm and food products at a market labeled "farmers' market" unless at least 75% of the product offered by that person was grown or processed by that person or under that person's direction. A product not grown or processed by that person must have been purchased directly from another farmer. Any items sold at the Farmers' Market that are not the products of the farmer selling them must be so labeled.
<b>Non Food License</b>	Craft producer: A vendor associated with a farmers' market who manufactures or crafts non-farm and food products by the force of their own labor, who has control over the means and methods of production and who assumes the financial and liability risk for the production enterprise.
<b>Service Vendor</b>	A vendor associated with a farmers' market who provides a service intended for immediate consumption.

Please Indicate Market Locations:

- \_\_\_\_\_
- \_\_\_\_\_
- \_\_\_\_\_
- \_\_\_\_\_

Location Fee **\$25.00** Per Location  
Processing Fee **\$20.00**  
Total Fee \$ \_\_\_\_\_

Business / Farm Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Address of Farm: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

Contact Person: \_\_\_\_\_ Phone: \_\_\_\_\_

Email: \_\_\_\_\_

Website: \_\_\_\_\_

**Please list the items that you will be selling at the Farmers' Market:**

**Product Description:** \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Proof of insurance must be submitted with this application if on CITY PROPERTY**

(This includes evidence of public liability coverage in an amount not less than \$400,000 and naming the **City of South Portland** as an additional insured. The certificate shall provide no less than a thirty (30) day notice prior to cancellation to the City. Insurance must be maintained at all times while engaged in sales at the Farmers' Market.)

**Please read carefully and sign below**

I/we hereby certify that all statements made in this application are true. I/we agree and understand that any misstatements or omissions of material fact herein will result in refusal of license. I/we understand that any information provided on this application shall become public record, and I/we hereby waive any rights of privacy with respect thereto.

**Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

The City Clerk shall revoke the license from anyone who has combined with any other licensee in the fixing or maintaining of a price, fraudulent use of weights or measures, or who intentionally deprives another licensee from conducting business in the Farmers' Market.

**Municipal Use Only**

Date of Application: \_\_\_\_\_ Date Paid: \_\_\_\_\_ Receipt # : \_\_\_\_\_

**Corporation Counsel**

Approved \_\_\_\_\_

**Fire Chief**

Approved \_\_\_\_\_

**Health Inspector**

Approved \_\_\_\_\_

**Police Chief**

Approved \_\_\_\_\_