

MS Farmers Market Application Processed Food Vendors 2024

Name:						
County of Op	eration:					
Home: (_)	Cell: ()			
Address:						
Email:						
Facebook Pag	ge:		Websit	e Address _		
☐ Cott Please identif ☐ C Please specify provided on b NOTE: Only	,	o which your ams/Jellies ou plan to sel	□ Con r products □ Bal	apply: ked Goods category ma	rked above (m	ty Foods
vendors.	Cate	gory		Pro	oducts	
						-

All vendors are required to submit a label for each proof for cottage foods must contain the cottage food statement the Cottage Food Law.	
New applicants (those that have not sold at the Mississ examples of packaging and a product sample.	ippi Farmers Market) must also submit
Will another individual(s) represent you or operate you their name(s) and contact information.	or space in your absence? If yes, please list
List other vendors with whom you may share stall space vendors)	e (must be other certified
List all food safety training certifications and applicable include a copy of each with the completed application. submit a copy of current permits and training certificat	Commercially-licensed operators must
Contact the Mississippi State Department of Health safety training certifications and/or applicable food you intend to sell at the Mississippi Farmers Marke	permits are required for the products
By my signature on this form, I hereby consent to all the abide by all rules and policies of the State of Mississippe Agriculture and Commerce, and the MS Farmers Mark	pi, the Mississippi Department of
Applicant's Signature	Date
Confirmed and Certified by:	

Jonathan McCraw: Manager, MS Farmers Market 929 High Street Jackson, MS 39202

MFM Director

Date