

## ARUNDEL FARMERS MARKET - APPLICATION FORM

(Please return completed form to: AFM Office, Arundel Lido, Queen Street, Arundel BN18 9JG)

<b><u>STALLHOLDER DETAILS</u></b>	
Name of Stallholder:	
Stallholder Company (if any):	
Full Postal Address:	Post Code
<b><u>CONTACT NUMBERS</u></b>	
Telephone No:	
Mobile No:	
Fax No:	
Email address:	
<b><u>PRIMARY PRODUCE (e.g. meat, fish, vegetables, plants)</u></b>	
Type of Produce:	
Where reared/caught/grown:	
<b><u>SECONDARY PRODUCTS (i.e. processed goods such as bread, cakes, preserves, etc)</u></b>	
Type of Goods:	
Where produced:	
%age of local ingredients: ("local" = grown within 40 miles)	
<b><u>MONTHS OF TRADING</u></b>	
Please state the months in which you would wish to trade at this market:	
<b><u>INSURANCE DATA</u></b>	
Public, Product & Employers Liability Insurance (Minimum cover of £5m for each category)	
Insurance Company:	
Policy No:	
Expiry date:	
<b><u>HEALTH &amp; HYGIENE DATA (Food Producers only)</u></b>	
Details of current Food Hygiene certificate(s):	
<b><u>OTHER INFORMATION</u></b>	
How many 2-metre pitches would you require?	
Would you wish to hire an AFM stall?	
Would you need an electricity supply?	
Would you agree to pay by Standing Order?	
Who would operate you stall AND would he/she have detailed knowledge of your production methods?	

\_\_\_\_\_ (Signature)

\_\_\_\_\_ (Date)

**NOTE:** Please attach copies of your current Public, Product & Employers Liability Insurance Certificate(s) and – if a Food Producer - current Food Hygiene certificates for the people who would operate your stall.