



## Farmers Market Vendor Application for Non-Missouri Farmers

Please complete form in its entirety.

### I. Market Information

Name of Market #1 (Fee \$50): \_\_\_\_\_

Name of Market #2 (Fee \$30): \_\_\_\_\_

Name of Market #3 (Fee \$30): \_\_\_\_\_

*Additional paper may be used for additional market locations.  
An additional \$30 fee for each market applies, up to a maximum  
of \$193, when operating at multiple markets at the same time.*

#### For office use only:

Stamp date received/payment: _____	Product Approved: Yes / No
	Supplier Approved: Yes / No
	Approval Date: _____
	Approved By: _____
	Registration #: _____
Assigned To: _____	

### II. Operator Information

No cooking of food products is allowed as a Farmers Market Vendor. A Farmers Market Food Establishment Permit is required for providing cooked food products.

Organization/Farm Name: \_\_\_\_\_

Contact Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Address: \_\_\_\_\_ Fax: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ ZIP: \_\_\_\_\_

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

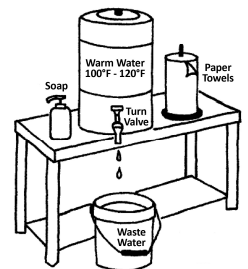
1. If you are selling meat, where is your meat processed? \_\_\_\_\_

2. Is it inspected by MoAg or USDA? ☐ Yes ☐ No

3. If you are selling meat do you have a freezer available? ☐ Yes ☐ No ☐ N/A

4. If you are sampling, is a hand washing station available with a water jug with a free-flowing spout, a bucket for wastewater, soap and paper towels like the one shown? ☐ Yes ☐ No

5. If you are doing any offsite food preparation do you have a commissary agreement and the most recent health inspection? ☐ Yes ☐ No ☐ N/A



**Saint Louis County Department of Public Health sampling guidelines are to be followed  
if providing samples of farm produce to the public.**



Type of Farm Product/Produce:	Method of Transportation/Preparation:	Sampling? Yes/No

*Additional paper may be used for additional menu items.*

**Saint Louis County Department of Public Health sampling guidelines are to be followed if providing samples of farm produce to the public.**

Applicant's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Applicant's Printed Name: \_\_\_\_\_

**Public Health Satellite Offices**

**North**

715 Northwest Plaza Dr  
St. Ann, MO 63074  
o: (314) 615-7469  
f: (314) 615-7439

**South**

4562 Lemay Ferry Rd  
St. Louis, MO 63129  
o: (314) 615-4027  
f: (314) 615-4008

**West**

74 Clarkson Wilson  
Chesterfield, MO 63107  
o: (314) 615-0929  
f: (314) 615-0925

**Central**

6121 N Hanley Rd  
Berkeley, MO 63134  
o: (314) 615-8900  
f: (314) 615-8951

**For additional food safety information, visit us at: [www.stlouiscountymo.gov](http://www.stlouiscountymo.gov)**