



FOOD ARTISAN VENDOR APPLICATION

Food Artisan: edible, hand made and value added food products including baked goods, candies, cereals, pickles and preserves produced in a certified facility (Food Artisan) or in an individual's home (Cottage Food) and processed, labeled, stored and transported in compliance with all applicable local, state, and federal laws.

BUSINESS NAME: _____

SALES TAX # (if applicable): _____

MAILING ADDRESS: _____

BUSINESS ADDRESS (if different): _____

BUSINESS TEL: _____

BUSINESS EMAIL: _____

WEBSITE: _____

FACEBOOK: _____ **TWITTER:** _____

INSTAGRAM: _____ **OTHER:** _____

1.) OWNER/DIRECTOR NAME: _____

CELL/ PHONE: _____

E-MAIL: _____

PREFERRED COMMUNICATION (circle one): **PHONE** **EMAIL**

2.) SUNDAY EMPLOYEE / VOLUNTEER (if different):

CELL/ PHONE: _____

E-MAIL: _____

PREFERRED COMMUNICATION (circle one): **PHONE** **EMAIL**

Please list below all items you intend to sell at the market. Use the back of this sheet (if necessary) to provide more information. Please be descriptive with your methods of food production (i.e. gluten-free, grass-fed, etc.).

ANYTHING you add after this point must be approved by the Market Manager.

Permits required for your product: _____

Copies of the following documents must be included when submitting along with application:

- Travis County Health Department
 - PERMIT B, or
 - Cottage Food Law (No permit needed; Cottage Food labeling required)
- Liability Insurance (Required for all)
- Food Handlers Certificate (Required if sampling)
- Organic Certificate (If applicable)

Questions: Please call The Travis County Health Department Main Office Phone Number at 512-978-0300.

I hereby certify that all the information contained in this application is correct.

Signature: _____ Date: _____

Approved: _____ Date: _____