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| LICHFIELD FARMERS’ MARKET | | |
| wheatsheaf1 | Lichfield City Council, Donegal House, Bore Street, Lichfield, WS13 6LU  Tel: (01543) 250011 Fax: (01543) 258441  Town Clerk: Anthony D Briggs  Please reply to Markets Officers: Lisa Howard & John Beard  Email: [markets@lichfield.gov.uk](mailto:markets@lichfield.gov.uk)Direct Line – 01543 309853 | ***LCC crest b&w*** |

ACCREDITATION FORM

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| **Business Name** |  |
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| **Your Name(s):** |  |

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| **Business Address** | |  | **Home Address (if different)** | |
| **Post Code:** | |  | **Post Code:** | |
| **Telephone:** | |  | **Telephone:** | |
| **Mobile:** | |  | **Mobile:** | |
| **Email Address:** | |  | **Email Address:** | |
|  | |  |  | |
| **Acreage (if applicable)** |  |  | **Holding No:** |  |

To assist us in managing a fair balance of trade please tick the boxes that best describe your business.

Fruit Hot/Cold Food to take away

Vegetables Honey / Bees wax products

Cheese and Dairy produce Jams / Chutneys / Preserves

Eggs Drinks

Raw Meat and Meat products Plants / Flowers

Bread / Pastries / Baked products Other (including Arts & Crafts)

Please list below **ALL PRODUCE / CRAFTS** that you intend to sell at the Lichfield Farmers’ Market.

You will only be permitted to sell produce/crafts listed below. You will be instructed to remove any undeclared items. Should you wish to change your trade or develop new lines you will be required to complete a new application form.

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Are all products/crafts to be sold at the Lichfield Farmers’ Market produced at the above address?

**YES** **NO** If **NO** please give full details below:

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Indicate the months in which your products will be available (please circle).

Jan. Feb. Mar. Apr. May. Jun. Jul. Aug. Sep. Oct. Nov. Dec. All Year

***(Please note that stall rent arrears will be charged for non-attendance in any of the months circled).***

If you are making products from raw ingredients (processed/added value) at least **one** ingredient must be locally grown. Please give details of these as proof and/or receipts will be required.

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Will you be attending the Markets to sell your produce in person? **Yes**  **No**

If **No**, please state who will be attending the markets and their position in your business or their relationship to you and to the produce on sale (e.g. employee, grower, partner etc.)

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| **Name:** | **Position:** |
| **Name:** | **Position:** |

How many 8’ x 4’ (2.44m x 1.22m) stalls do you require? **1** **2**

Do you require an electricity supply, charged @ £1 per appliance per day? **Yes** **No**

***(please note that connection to the electricity supply is via a round blue 16 amp plug, not a 3 pin plug)***

Are you registered as an organic food producer? **Yes** **No**

***(If you are please include a copy of your certification documents with this application)***

Do you have Public Liability Insurance for a minimum of £5,000,000? **Yes** **No**

***(A copy of your insurance certificate must be enclosed with this completed application)***.

Please give Name of Insurers and Policy Number:

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| Name of Insurer: | Policy No: | Expiry date: |
| Please list any other Farmers’ Markets which you currently attend. | | |
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If your business has been registered with your Local Environmental Health Officer (EHO) please give details below:

Name of Authority: ………………………………………………. Name of EHO ……………………………….

We will be holding your details on record and where necessary reserve the right to pass them on to Environmental Health & Trading Standards or other authorities.

In addition we may be asked to pass on details of stallholders to other interested parties (e.g. local media, advertisers and other Farmers’ Markets). If you are happy for us to do this, please tick below.

* Please pass on my address to other Farmers’ Markets and like events.
* Please pass on my details to the media (local press etc.)

**APPLICANT STATEMENT:**

**I agree to comply with the rules and conditions of Lichfield Markets and to sell only products produced on my (or my business’) premises or farm where applicable, to assist in any inspections required by agents of the market and to obtain relevant public liability insurance.**

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| **Signed:** |
| **Date:** |

The Lichfield City Council is responsible for the screening of potential vendors for their suitability and strict compliance with the Farmers’ Market criteria. If your application for accreditation is not successful, you will be notified. If there are no stalls available, you will be given the opportunity to go on a waiting list.

Any trader who is found not to be complying with the Lichfield Farmers’ Market Rules and Regulations will be suspended. Traders who misrepresent their goods as meeting the Farmers’ Market criteria may be referred by Trading Standards and may be liable for prosecution under the Trade Descriptions and Sale of Goods Acts.

**PLEASE RETURN THIS FORM TO:**

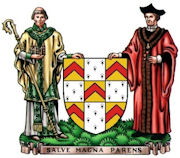
Lisa Howard & John Beard – Markets Officers

Lichfield City Council **For further information please contact:**

Donegal House, Bore Street Lisa Howard & John Beard 01543 309853

Lichfield 07970 861570

Staffs WS13 6LU Email: [markets@lichfield.gov.uk](mailto:lisamarketsward@lichfield.gov.uk)

****Council Name: Lichfield City Council

Council Address: Donegal House, Bore St, Lichfield WS13 6LU

Email Address: enquiries@lichfield.gov.uk

Telephone numbers: 01543 250011

**General Data Protection Regulations (Service) Consent**

**to hold Contact Information**

I agree that I have read and understand Lichfield City Council’s Privacy Notice. I agree by signing below that the Council may process my personal information for providing information and corresponding with me.

I agree that Lichfield City Council can keep my contact information data for an undisclosed time or until I request its removal.

I have the right to request modification on the information that you keep on record.

I have the right to withdraw my consent and request that my details are removed from your database.

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| Name |  |
| Date of birth if under 18 |  |
| Parental/Guardian Consent for any data processing activity |  |
| Address |  |
| Telephone No. |  |
| Email Address |  |
| Facebook |  |
| Twitter |  |
| Signature |  |
| Date |  |