## MCCULLOCH COUNTY FARMERS MARKET VENDOR APPLICATION

Name:	
Sarm/Organization Name:    Address:	
Address:	
City, State, Zip	Organization Name:
Telephone:	Cell:
E-mail:	
Products to be sold:	
County Farmers Market and agree to comprepared, served, and labeled according to necessary licenses and permits must be avail understand that sales tax must be collect responsibility of each vendor to obtain a tand to collect such taxes and forward the is included in price, a sign must be posted. I release all parties from any liability result	apply with them. I understand that all food items must be o state regulations. I understand that copies of all ailable at the Farmers Market at all times for inspection. ed as required by State law and that it is the ax number, to be familiar with which items are taxable, in to the Texas State Comptroller when due. If sales tax so stating.
Applicant Signature	Date
FOR INTERNAL USE ONLY:	
Application Received on	by
Application Approved on	by
VENDOR NUMBER	