



# Big Lake Farmers Market 2021 Vendor Application

Every Wednesday from June – August • 3:00 – 7:00pm  
Every Wednesday in September • 3:00 – 6:00pm  
Lakeside Park, 101 Lakeshore Drive, Big Lake, MN 55309



Interested vendors must submit the following items to Big Lake City Hall (160 Lake Street North, Big Lake, MN 55309):

- 1) Vendor Application with Signatures
- 2) MN Department of Revenue’s ST19 “Operator Certificate of Compliance” form
- 3) Copies of any food or product licenses required by the state of Minnesota
- 4) Vendor fee of \$120 for the season (*checks payable to “City of Big Lake”*) or \$10 per week up to \$180

Name of Business/Farm:	
Name of Primary Contact:	
Mailing Address:	
Cell Phone:	Home Phone:
Email:	Website:
Address where produce is grown:	
Do you give permission to the market manager to release your name, phone number and/or email to customers interested in contacting you for product information? Circle One:      Yes      No	
List the items below that you plan to sell at the market. Your items <u>must be home grown or handmade</u> . Items purchased for resale are not allowed. Items not listed below will not be allowed to be sold at the market without prior approval.	

Read and Initial Below:

\_\_\_\_\_ I have read and agree to abide by the Big Lake Farmers Market Rules and Regulations Policy.

\_\_\_\_\_ I agree that the City of Big Lake and their respective officers, employees, market managers, agents and consultants are not liable for any injury, theft, or damage to either the buyer or seller, or their property arising out of or pertaining to preparation for or participation in the Big Lake Farmers Market whether such injury, theft, or damage occurred prior, during, or after the Big Lake Farmers Market. Business/Farm further agrees to indemnify, defend, and hold harmless the City of Big Lake and their respective officers, employees, agents, and consultants for and against any claims for such injury, theft or damage.

\_\_\_\_\_ I understand that the City of Big Lake recommends that I carry my own general liability and product liability insurance, as the City of Big Lake does not provide this coverage.

Signature of Primary Seller \_\_\_\_\_ Date \_\_\_\_\_

Please Mark All Weeks You Plan On Attending Market:

- |                                    |                                  |                                  |                                   |                                    |                                    |
|------------------------------------|----------------------------------|----------------------------------|-----------------------------------|------------------------------------|------------------------------------|
| <input type="checkbox"/> June 2    | <input type="checkbox"/> June 9  | <input type="checkbox"/> June 16 | <input type="checkbox"/> June 23  | <input type="checkbox"/> June 30   | <input type="checkbox"/> July 7    |
| <input type="checkbox"/> July 14   | <input type="checkbox"/> July 21 | <input type="checkbox"/> July 28 | <input type="checkbox"/> August 4 | <input type="checkbox"/> August 11 | <input type="checkbox"/> August 18 |
| <input type="checkbox"/> August 25 | <input type="checkbox"/> Sept. 1 | <input type="checkbox"/> Sept. 8 | <input type="checkbox"/> Sept. 15 | <input type="checkbox"/> Sept. 22  | <input type="checkbox"/> Sept. 29  |

**Application Contact:**

Corrie Scott: Recreation and Communication Coordinator  
Phone: 612.297.6331  
Email: cscott@biglakemn.org

**Application Site:**

Big Lake City Hall  
160 Lake Street North  
Big Lake, MN 55309

# Operator Certificate of Compliance

Read the information on the back before completing this certificate. **Person selling at event:** Complete this certificate and give it to the operator/organizer of the event. **Operator/organizer of event:** Keep this certificate for your records.

**Do not send this form to the Department of Revenue.**

<b>Print or type</b>	Name of business selling or exhibiting at event		Minnesota tax ID number	
	Seller's complete address		City	State      Zip code
	Name of person or group organizing event			
	Name and location of event			
	Date(s) of event			

<b>Merchandise sold</b>	Describe the type of merchandise you plan to sell.

<b>Sales tax exemption information</b>	Complete this section if you are not required to have a Minnesota tax ID number.
	<input type="checkbox"/> I am selling only nontaxable items.
	<input type="checkbox"/> I am not making any sales at the event.
	<input type="checkbox"/> I participate in a direct selling plan, selling for _____ (name of company), and the home office or top distributor has a Minnesota tax ID number and remits the sales tax on my behalf.
	<input type="checkbox"/> This is a nonprofit organization that meets the exemption requirements described below: _____ Candy sold for fundraising purposes by a nonprofit organization that provides educational and social activities for young people primarily aged 18 and under (MS 297A.70, subd. 13[a][4]). _____ Youth or senior citizen group with fundraising receipts of \$10,000 or less per year (MS 297A.70, subd. 13[b][1]). _____ A nonprofit organization that meets all the criteria set forth in MS 297A.70, subd. 14.

<b>Sign here</b>	<i>I declare that the information on this certificate is true and correct to the best of my knowledge and belief and that I am authorized to sign this form.</i>	
	Signature of seller	Print name here
	Date	Daytime phone (    )

**PENALTY** — Operators who do not have Form ST19 or a similar written document from sellers can be fined a penalty of \$100 for each seller that is not in compliance for each day of the selling event.