



Approved Friday Weekly Fox Valley Market Stallholder Application

This form is for exclusive use by market managers, Trading Standards and Environmental Health officers. Please make a copy for your own records.

Name of Market Applied for.....
.....

Your Name.....

Company Structure (circle) Sole Trader, Partnership, Limited Company

Business Name.....

Business Address	Home Address (if different)
.....
.....
Postcode.....
Telephone.....
Website.....
Email.....	Postcode..... .
	Telephone..... .

Acreeage (if applicable)..... Holding No.....

Please indicate the core product you sell

.....

Products: Please list all the products that you intend to sell at this Market. You will only be permitted to sell produce listed below, and may be asked to remove any undeclared items. If

you change your trade or develop new lines, you must fill out a new application form (this is to avoid disproportionate duplication).

.....
.....
.....
.....
.....

Please list other outlets for your produce including other markets

.....
.....
.....

Will you be attending, in person, at all the markets to sell your produce? (please tick)

Yes No

If no, please state who else will regularly be at the markets and their position in the company.

Name (s).....

Position (s).....

Are you a member of any assurance or certification scheme (e.g Organic, LEAF), please tick

Yes - please include a copy of your certification document with this application No

Please give the name of the insurance company that provides your Public, Product and Employee Liability Insurance, the policy number and expiry date

Insurance company name:

Policy Number:..... Expiry date:.....

Trading Standards and Environmental Health

Has your production premises been visited by EHO and TSO? If so, when?.....

Have you had a 'score on the door' score? If so, what is it?.....

APPLICANT STATEMENT (please tick to acknowledge)

- I will agree to give at least 48 hours' notice if I am not able to make a market.
- I agree to sell only the items that I have detailed above.
- One of the persons named above will be present at my stall.
- I understand that my details will be passed to Environmental Health and Trading Standards.
- I agree to assist in any inspections and /or visits required to verify the above statements.
- My insurance is current and I will supply a copy of the policy if asked.
- I agree to uphold the rules of the market and to ensure that my representatives do likewise.

I, the undersigned, declare that the information provided is correct;

Signed..... Print Name.....

Position..... Date.....

Any stallholder who falsifies information on this form will be suspended from trading.

Payment for each market needs to be made in advance (pay a market in advance), this can be either by cheque or cash. Please make sure that the cheque is made out to Stocksbridge Regeneration Company Ltd.

<p>Enclosures</p> <ul style="list-style-type: none"><input type="checkbox"/> Copies of certificates for assurance schemes (e.g Organic, FABBAL etc)<input type="checkbox"/> Copy of Food Hygiene Certificate for food processors<input type="checkbox"/> Copy of public liability insurance policy

Please return to: Jess Horton, Dransfield House, 2 Fox Valley Way, Fox Valley, Stocksbridge, Sheffield, S36 2AB

Telephone: 01226 360 644 Email: Jessica.Horton@dransfield.co.uk