



Date received:
Amount received:
(For Market use only)

FARMER/PROCESSOR/PREPARED FOOD 2025 APPLICATION TO SELL Please read the 2025 Guidelines and Procedures BEFORE completing this application

If accepted into the 2025 TFM, an acceptance letter will be sent to you. **CHECK APPROPRIATE BOX:** ☐ Farmer/Grower — circle type of farm product: Produce Value-added Nursery/Flowers Other (please explain) Processor (Food made from products/ingredients of which majority are grown by seller) Prepared Food Vendor (Fresh food products that vendors have processed into products offered at the market) Type of Food: **Craft/Artisan Vendors please fill out the Craft/Artisan Application** VENDOR NAME: (First Name) (Last name) (Middle Initial) VENDOR MAILING ADDRESS: CITY: ______ STATE: _____ ZIP: _____ COUNTY: DAYTIME PHONE: () ______ EVENING PHONE: () _____) ______ E-MAIL ADDRESS _____ CELL PHONE: (WEBSITE/FACEBOOK/SOCIAL MEDIA: (TUKWILA FARMERS MARKET WILL LINK TO YOUR WEBSITE/SOCIAL MEDIA) *TUKWILA BUSINESS LICENSE#:_____ VENDOR UBI# (ENCLOSE A COPY OF YOUR CURRENT MASTER BUSINESS LICENSE) FARM OR BUSINESS NAME: * PRIMARY FARM OR BUSINESS ADDRESS_____ CITY: _____ STATE: ____ ZIP: ____ COUNTY: ____ (For Farmers) HOW MANY ACRES DO YOU FARM AT THIS ADDRESS (PRIMARY)? WHAT TYPE OF CROP(S) ARE GROWN AT THIS LOCATION (PRIMARY)? ROW ORCHARD BERRIES OTHER (LIST): (For Farmers) DO YOU LEASE/RENT ADDITIONAL LAND TO FARM? Yes No (For Farmers) IF YES, HOW MANY OTHER SITES DO YOU LEASE/RENT? *IF YES, NOTE LEASED/RENTED LAND ADDRESS (SITE 1):

(For Farmers) HOW MANY ACRES DO YOU FARM AT THIS ADDRESS (SITE 1)?

WHAT TYPE OF CROP(S) ARE GROWN AT THIS LOCATI	ON (SITE 1)	? ROW	ORCHARD	BERRIES	OTHER (LIST):
(For Farmers) DO YOU LEASE ADDITIONAL LAND TO F	ARM? Yes	No			
* IF YES, NOTE LEASED/RENTED LAND ADDRESS (SITE (ENCLOSE A COPY OF YOUR CURRENT LAND LEASE AC					<u></u>
WHAT TYPE OF CROP(S) ARE GROWN AT THIS LOCATION	ON (SITE 2)?	ROW	ORCHARD	BERRIES	OTHER (LIST):
(For Farmers) HOW MANY ACRES DO YOU FARM AT T	HIS ADDRES	SS (SITE 2)?	-	
*If your farm/land has no address, describe its locatio activities take place (use additional pages if needed; c					-
BOOTH NEEDS:					
1. How many 10x10 booths are you requesting?	1	2	!		
2. Will your vendor booth need power?*	YES	ı	NO		
*Power availability is limited and is an additi have power available	onal \$5 per	market d	ay; checking YE	S is no guaraı	ntee that your space will
3. Do you accept debit/credit cards at your booth?	YES	NO			
 Do you plan to offer samples of your product?* *Does not apply to Prepared Food Vendor. A required, along with appropriate hand wash 		-	_	County Healt	th Department may be
5. Will your vendor booth use propane tank(s)?	YES	NO			
6Will your business attend other Farmers Market th If so, please list all markets:	is season?	YES	NO		
2025 Market fee is \$30 per 10x10 booth per day, plus the entire season (all 5 market days) a discounted fee					

te TFM opening day. Please do not include payments with your application. Payment details will be made available at that time.

WHAT DAYS WILL YOU SELL AT THE TUKWILA FARMERS MARKET AT THE TUKWILA COMMUNITY CENTER **SUNDAYS, 10:00 AM - 2:00 PM**

JULY 20

AUGUST 3

AUGUST 17

AUGUST 31

SEPTEMBER 7

List items to be sold at the Market and approximate dates of availability. **VENDORS WILL BE GRANTED PERMISSION TO SELL ONLY WHAT IS LISTED.** This application will not be processed without a detailed list of crops/items you will bring to the Market. Additions to list during the season must be approved by the Market Coordinator and are subject to additional farm checks.

Include a separate page if needed.

Crop/Item	Date Expected	Crop/Item	Date Expected
List full names and contact info prior to market open date if not	(cell phone/email) of family members the known, please update market of a	ers and employees who may sell ny changes during season):	for you (info may be provided

INDEMNIFICATION & HOLD HARMLESS AGREEMENT

THE MARKET VENDOR PARTICIPANT NAMED BELOW SHALL INDEMNIFY and hold the City of Tukwila (TUKWILA) and its elected and/or appointed officials, agents, employees, and/or volunteers, harmless from and shall process and defend at its own expense any and all claims, demands, suits, at law or equity, actions, penalties, loss, damages, or costs, of whatsoever kind or nature, (including but not limited to attorneys' fees and court costs) brought against TUKWILA arising out of, or in connection with, or incident to, the MARKET VENDOR PARTICIPANT'S, or the MARKET VENDOR PARTICIPANT'S agents, employees, officers, or volunteers) participation at the TUKWILA FARMERS MARKET, and/or the MARKET VENDOR PARTICIPANT'S performance or failure to perform in a manner consistent with TUKWILA facility rules and regulations, to follow TUKWILA staff instructions or procedures, and/or any applicable laws, regulations or public health guidance . If such claims are caused by or result from the concurrent negligence of TUKWILA, its elected and/or appointed officials, agents, employees, and/or volunteers, this indemnity provisions shall be valid and enforceable only to the extent of the misconduct and/or negligence of the MARKET VENDOR PARTICIPANT; and provided further, that nothing herein shall require the MARKET VENDOR PARTICIPANT to hold harmless or defend TUKWILA, its elected and/or appointed officials, agents, employees, and/or volunteers for damages or loss caused by TUKWILA'S sole negligence. The MARKET VENDOR PARTICIPANT expressly agrees that the indemnification provided herein constitutes the contractor's/vendor's waiver of immunity under Title 51 R.C.W., for the purposes of this Indemnification and TUKWILA FARMERS MARKET participation if the MARKET VENDOR PARTICIPANT is any type of business entity, whether for profit or not for profit. TUKWILA'S insurance requirements do not imply advice on insurance coverage. MARKET VENDORS are responsible for their own insurance coverage in limits that are adequate for liability protection.

No MARKET VENDOR PARTICIPANT is an employee, agent, representative or volunteer of TUKWILA or tFM based on their TUKWILA FARMERS MARKET participation. As independent contractors/vendors, MARKET VENDOR PARTICIPANTS are not entitled to compensation, workers' compensation, insurance or benefits from TUKWILA or TFM.

PHOTO/VIDEO RELEASE: I the undersigned MARKET VENDOR PARTICIPANT and/or any representative of my TUKWILA FARMERS MARKET participation, give permission to have photos/video tapes taken without compensation, during City of Tukwila or TFM activities and used for publicity purposes in any manner by TUKWILA or TFM.

TFM APPLICATION & REGULATIONS: I have read the TFM Application, Guidelines and Procedures and the Hold Harmless Agreement. My signature below indicates that I agree to abide by the guidelines and procedures of the Tukwila Farmers Market, including those regarding set up & take down, sales & safety procedures and booth request/assignment procedures.

SIGNATURE:	DATE:
LICENSES, PERMITS AND SPECIAL REQUIREMENTS: I have read ar Agriculture, Public Health – Seattle & King County, and Tukwila Farm	
SIGNATURE:	DATE:
PARKING: I agree to park in the TFM recommended areas on the parking.	perimeter of the market and not in valuable customer
SIGNATURE:	DATE:
CANCELLATION POLICY & NO-SHOWS PENALTIES: I have read and Cancellation Procedures and No-Show Penalties.	agree to comply with the Tukwila Farmers Market
SIGNATURE:	DATE:
Printed Name of Person Signing Above (Must be 18 years of age or	older) COMPANY / BOOTH NAME

PUBLIC RECORDS DISCLOSURE NOTICE Signatory acknowledges that the City is an agency governed by the public records disclosure requirements set forth in Chapter 42.56 RCW; therefore, all documents/information furnished to the City may be subject to disclosure – unless exempted by law.

THIS APPLICATION MUST BE FILLED OUT COMPLETELY TO BE ACCEPTED

Completed applications can be emailed to michael.may@tukwilawa.gov or mailed to:

Tukwila Parks & Recreation, ATTN: Tukwila Farmers Market, 12424 42nd Ave S, Tukwila, WA 98168

Question: contact Michael May, michael.may@tukwilawa.gov, 206-635-8751

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