## Alexandria Health Department Farmers' Market Food Vendor Registration

Please complete and return this form to the Alexandria Health Department. The Health Department will review the information and contact you if they have any questions. When the Health Department completes their review, they will send you a letter outlining food safety steps you should take to protect the health of your customers.

arm or Kitchen A	ddress:						
Phone Numbers:	Business:	(	)				
	Home:	(	)				
	Mobile:	(	)				
	Fax Number:	(	)				
Email Address:							
NAME OF VENDO	R REPRESENT	ATIVE	(S) IN CH	ARGE, ON-SITE, DI	JRING THE	FARMERS' MARK	ET:
				On-site phone nu	mber: (	)	
				On-site phone nu	mber: (	)	
				o	mhori (	)	
PRODUCTS: Plea	se answer the fo			<ul><li>On-site phone nu</li><li>about food products</li></ul>		l like to sell/serve at	
<b>PRODUCTS:</b> Plea Alexandria Farme	se answer the fo	ollowin	g questions	about food products		•	
PRODUCTS: Plea Alexandria Farme A. RAW FRU	se answer the forms' Market.	ollowin	g questions	about food products	s you would	l like to sell/serve at	
PRODUCTS: Plea Alexandria Farmel A. RAW FRU 1) Will yo	se answer the forms' Market.	ollowin LES, N	g questions	about food products GRAINS	s you would	l like to sell/serve at □ NO	
PRODUCTS: Plea Alexandria Farmer A. RAW FRU 1) Will yo 2) Will yo	se answer the fors' Market.  JITS, VEGETAB  ou be selling frui	ollowin LES, N its, veg	g questions NUTS, AND getables, nu	about food products GRAINS	s you would □ YES	l like to sell/serve at □ NO □ NO	
PRODUCTS: Plea Alexandria Farmer  A. RAW FRU  1) Will you  2) Will you  3) Will you	se answer the fors' Market.  JITS, VEGETAB  ou be selling fruit  ou be selling spr	ollowin  LES, N  its, veg  outs?  shroon	g questions NUTS, AND getables, nu ms?	about food products GRAINS	s you would □ YES □ YES	□ NO □ NO	
PRODUCTS: Plea Alexandria Farmer  A. RAW FRU  1) Will you  2) Will you  3) Will you  4) Will an	se answer the fors' Market.  JITS, VEGETAB  ou be selling fruit  ou be selling spr  ou be selling mu	LES, Notes that the cours of the cuts?	g questions NUTS, AND getables, nu ms? ut?	about food products GRAINS	□ YES □ YES □ YES □ YES □ YES	□ NO □ NO	

If at a later time you would like to begin offering cut produce or samples of your fruits, nuts or vegetables, please contact the Environmental Health Division at (703) 746-4910.

Food Item:	Primary Ingredient(s):	Where is this food item prepared?	Is this food item cooked or heat treated prior to packaging?	
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your ingredie			are, please list the source(s)	
at the Farme If you answere	ed yes to the question above, ple ss you want to sample and how	ease provide additional infe		
	& LABELING: How are your prepatc.) and labeled?	red food items packaged (in o	canning jars, sealed in plastic	
	you would like to sell any prep			
	od products, please contact the		5.6.1 de (7.6.5) 7.10 1.5.201	
ples of your fo	od products, please contact the tion is complete and accurate.		ut (200) 2 10 10 10 10 10 10 10 10 10 10 10 10 10	

B. PREPARED FOODS, EGGS, MEATS, SEAFOOD, POULTRY, AND DAIRY PRODUCTS
1) Will you be selling prepared foods (including cooked fruits and vegetables),

eggs, meats, seafood, poultry and/or dairy products?

☐ YES\*\*\* ☐ NO\*\*

Environmental Health Division, 4480 King Street, Suite 360, Alexandria, VA 22302 Phone: (703) 746-4910 Fax: (703) 746-4919 <a href="www.alexandriava.gov/EnvironmentalHealth">www.alexandriava.gov/EnvironmentalHealth</a>