



“VERIFIED” ONTARIO VENDOR INFORMATION & AGRICULTURAL PRODUCTION PLAN 2010

Farm / Production Ownership

Applicant's Name & Farm:

Civic Address: _____ Fire Route (911) # _____

Town: _____ Postal Code _____

Phone Numbers: Home: _____ Cellular: _____

Fax: _____

Email Address: _____ Website: _____

Directions to Farm: _____

If you are purchasing from other farms and in order to qualify under our program, the farm will need to apply as a co-applicant or co-operative.

Co-Applicant's OR "Co-operative" Name & Farm:

Civic Address: _____ Fire Route (911) # _____

Town: _____ Postal Code _____

Phone Numbers: Home: _____ Cellular: _____

Fax: _____

Email Address: _____ Website: _____

Directions to Farm: _____

Farmer Association Membership(s) *(Check off one, if applicable)*

Christian Farmers Federation of Ontario (CFFO) Ontario Federation of Agriculture (OFA)

National Farmers Union (NFU-O)

Farm Business Registration # _____ *(if applicable)*

How did you hear about the program? _____

How many years have you been selling at a farmers' market?

First time or _____ Year(s)

Where do you sell? (Please list):

Do you conduct business at the Ontario Food Terminal? Yes _____ No _____

If so, do you sell or purchase there? Yes _____ No _____

If YES, please list what they are and where you sell them.

\$250 deposit cheque attached Yes

Farm Production Location (Please attached a copy of your Farm Tax Bill)

Farm Tax Bill attached

Lot	Concession	Township & County	Owner	Tenant
			<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>
Total land holding _____ (acres)				
Total land in production _____ (acres)				

Agricultural Production Plan

Other forms or additional pages may be used, however, they must contain the information requested below:

Vegetable, Fruit & Flower Production

Vegetable Production

For each crop, please indicate the acreage produced in the first column OR the number of rows and length of rows in the 2nd and 3rd columns. In the 4th column, indicate estimated harvest date.

Fruit Production

Please indicate the number of plants or trees in the **# of rows** column

Flower Production

Please indicate under **OTHER** in the CROP column all perennial, annual and bi-annual field flowers and the number of plants in the **# of rows** column.

Crop	# of Acres	# of Rows	Length of Rows	Estimated Harvest Date	Estimated Yields
Apples					
Apricots					
Asparagus					
Beans					
Beets					
Blueberries					
Broccoli					
Brussels Sprouts					
Cabbage					
Cantaloupes					
Carrots					
Cauliflower					
Cherries					
Cranberries					
Cucumber					
Cucumber (pickling)					
Fine Herbs					
Garlic					
Grapes					
Green Peas					
Lettuce					
Melons					
Mushrooms					
Onions (Green)					
Onions					
Parsnips					
Peaches					
Pears					
Peas					
Peppers					
Plums					
Potatoes					
Pumpkins					
Radishes					
Raspberries					

Rutabaga/Turnip					
Rhubarb					
Spinach					
Squash					
Strawberries					
Sweet Corn					
Sweet Potato					
Tomatoes					
Zucchini					
Other:					

Greenhouse Production (method of culture)

In the first column, indicate the name of the crop. In the second column, using the following letters (A) (B) (C) OR (D)

- (A) Flats – Styrofoam, fibre or cell types (B) Hanging baskets – all sizes
 (C) Plastic pots – all sizes (D) Fibre pots – all sizes

Crop	Method of Culture	# of Units	Estimated Harvest Date

Other Agri-food Products

Type	Total Production
Honey	_____ Lbs. _____ Kilos
Maple Syrup	_____ Gallons _____ Litres
Cheese	_____ Lbs. _____ Kilos
Eggs	Total # of chickens: _____ Total # of eggs: _____
Beef	Total #: _____
Pork	Total #: _____
Poultry (type)	Total #: _____
Other Meat (e.g. bison, elk, venison)	Total #: _____
Value-Added (e.g. smoked meats, preserves)	Lbs./Quantities:

I have read the Farmers' Markets Ontario "Verified Criteria" and hereby submit this Agricultural Production Plan in my name to be considered as a Verified Farmers' Market Vendor in 2010.

I understand that my application is based on the Farmers' Markets Ontario (FMO) "Verified Criteria", the information included on this application and the results of the inspection of the farm identified on this application.

I am prepared to provide copies of the following documents at the time of farm inspection:

- Utility bills supporting the farm operation
- Heating / maintenance / fuel bills supporting the farm operation
- Seed bills supporting the crops identified in the production plan
- **Honey** – OMAFRA Certificate of Registration
- Ontario **Maple Syrup** Producers Association membership information

By signing this compliance agreement with FMO where guarantees are provided as to my authenticity as a farmer, I acknowledge that false or misleading statements shall constitute fraud and subject to the appropriate legal ramifications and/or remedies.

I understand that anyone who does not qualify but knowingly applies, causing an unnecessary farm inspection visit, will be expected to pay for the cost of the failed inspection, **set at \$250.**

I hereby consent that FMO may contact AGRICORP to verify my Farm Business Registration Number.

I certify all of this information to be true, to the best of my knowledge.

Signature

Date

*Please attach your **\$250** inspection deposit cheque along with this application and it will be refunded upon approval of your inspection.*

Mail to:
Farmers' Markets Ontario
54 Bayshore Road, Brighton, ON K0K 1H0

NOTE: The attached brief Farmer Profile to be returned with this application.
This will allow us to create your free dynamic sign & personalized cards



Supported through the Ontario Farmers' Markets Strategy,
part of Growing Forward, a Federal-Provincial-Territorial initiative





Ontario Farmer Profile

To be submitted with your Agricultural Production Plan

NAME: _____

FARM: _____

BRIEF DESCRIPTION OF OUR FARM

About our farm and products

Location:

Products:

Where to buy:

Production practices:

Contact us

Phone:

Fax:

Email: