

# STALLHOLDER APPLICATION

Name:		
Business Name:		
Address:		
Postal Address:		
ABN/CAN:		
Email:		
Phone:	Mobile:	
Website:		
Facebook:		
Instagram:		
Produce and/or p	product details you will be selling:	
Do you require a	powered site? Yes No	
(Subject to availab	bility. Please Note: All electrical equipment must be tested and tagged by a qualified Electrician)	
Any other site re-	quirements:	
Will you be sellin	ig any food products?: Yes No	

If yes: All food stall operators must submit an approved "Notification to Council for temporary food stall" from MidCoast Council.

If you do not have a current approval letter or a FSS Certificate, you are unable to set-up and trade as a temporary food business

in the MidCoast Council area. The information you will need to supply to Council:

- Current FSS Certificate
- > Public & Products Liability Insurance with a limit of indemnity of not less than \$20 million for any one occurrence
- > Most recent temporary Food Stall inspection report
- Where a food vending vehicle is proposed to be used, Motor Vehicle Insurance with a limit of indemnity of not less than \$20M. MidCoast Council must be named as an interested party.

**INSURANCE** – Certificate of Currency for Public & Product Liability

Company:

Policy Number:

Expiry Date:

Please attach a copy of your insurance, if we do not receive with your application you will be notified as unsuccessful

#### **CERTIFICATION** – Organic, Bio-Dynamic, HACCP

Organisation: \_\_\_\_\_

Type: \_\_\_\_\_ Expiry Date: \_\_\_\_\_

Copy Provided: Yes

### MONTHLY STALL FEES :

- 3m x 3m Unpowered \$30
- 3m x 3m Powered \$35
- 3m x 3m Unpowered Pop-Up Stand: \$35 (One-off Market attendance. If additional dates are attended, the fee is \$30 per month thereafter)

## **PAYMENT OPTIONS:**

- Monthly: All stallholder fees are paid via The Gloucester Business Chambers Website, payments must be received COB the day prior to the event www.gloucesterchamber.com.au
- BSB: 932 000 Bank: Regional Bank of Australia Acct No: 500 030 132 Acct Name: Gloucester Business Chamber (Please include your surname or business name as your reference)

If payment on the day of the event is required, please contact the Market Coordinators for approval pre-event

 In Advance: Stallholders have the option to pay their stall fees in advance. (Pay for 11 months and get 1 month free. Please see the Market Coordinators to arrange.)

#### CONFIRMATION: Please tick that you have read

- o GFM Market Charter
- o GFM Site Induction

I declare that the above information is true and correct. I have read the Gloucester Farmers Market Charter and Site Induction and agree with the rules governing participation at this event.

Signature:	 	 
Name:		

Date:

If you would like to be one of our valued Stallhold	ders please return this completed
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- Stallholder Application,
  - ➢ Risk Assessment,
- Insurance Information and
- Council Notification (if required)

To <u>markets.gloucesterchamber@gmail.com</u> fourteen days prior to the Market Day you'd like to attend. You will be notified in writing if your application is successful.