



# VENDOR APPLICATION

## VENDOR INFORMATION

Vendor/Business Name	<input type="text"/>		
Contact Name	<input type="text"/>		
Mailing Address	<input type="text"/>		
Website	<input type="text"/>		
Phone Number	<input type="text"/>	E-Mail	<input type="text"/>
Minnesota Tax ID Number (attach completed ST-19 Form)	<input type="text"/>		
Preferred Set-up Day (Please select one)	<input type="checkbox"/> Friday, November 22 2pm - 6pm	<input type="checkbox"/> Saturday, November 23 6:30am-9am	
List of hand-crafted items produced (Include images if no website)	<input type="text"/>		
Price range for selling items	<input type="text"/>	to	<input type="text"/>

## VENDOR AGREEMENT (PLEASE SIGN AND DATE BELOW AFTER REVIEW)

- Vendors must produce what they sell. Resellers are not eligible to participate.
- Vendor fee (\$100) includes 9x9 ft space. Vendor fee must be paid in full along with the submission of application. Any vendor not accepted into the market will have their vendor fees returned. Once the vendor fees have been accepted, they are not refundable or negotiable.
- If providing products for consumption, vendors must include appropriate licensing.
- Vendors are responsible for providing easels, display racks, table coverings and tables.
- Vendors must remain on-site for the duration of the event.
- Vendor must include website or images of their work to be considered.

Name (Please sign)

Date

## OFFICE USE ONLY

Date Received

Date Returned

Photos Included

## PAYMENT/VENDOR FEE \$100

### Return form with payment to:

City of Plymouth  
Attn: Alyssa Fram  
3400 Plymouth Blvd  
Plymouth, MN 55447

763-509-5225  
afram@plymouthmn.gov

**THANK YOU**

Payment

☐

Cash

☐

Check

☐

Credit Card

Visa / Mastercard / Am Ex / Discover

Expiration Date

Signature

Date