ENCINO FARMERS MARKET FARMER OR FOOD VENDOR APPLICATION FORM

DATE

Vendor Name (Farm):			_
Name of Resale Certificate Holder:			
Certificate Holder Mailing Address:			
Producer Certificate Number (CPC #):			
City:	State:	Zip Code:	
Work Phone:	Home Phone:		
Fax:	Cell Phone:		
Email:	Website:		
Primary Contact:	Phone Number: _		
Alternate Contact:	Phone Number: _		
Facebook: @	Instagram: @		
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If you have any questions please call **Rich Delagarza**, **Market Manager** at (818) 708-6611 **Email** this application with a copy of your Certified Producer Certificate(s) and Organic Certification (if applicable) and picture of your product if possible:

Encino Farmers Market 17400 Victory Blvd., Van Nuys, CA 91406 Email to farmersmarket@onegeneration.org