1220 N Forest St
315 Westerly Rd
Bellingham, WA
360-734-8158
www.communityfood.coop

NEW FARMER APPLICATION

Thank you for considering the Community Food Co-op to retail your product(s). New Farmer Applications/Packets must be delivered or mailed to:

Community Food Co-op
Attn: **Terry Parks**
315 Westerly Road
Bellingham, WA 98226

Please also mark the packet **ATTENTION: NEW ITEM or NEW VENDOR**. Submit to the Customer Service desk when dropping off your packet in person. Please fill out the new farmer application on the next pages and include any supplemental information asked for below. If you have questions about this process, please contact **Terry Parks at vendor@communityfood.coop or at 360-734-8158, ext 330.**

Community FOOD CO-OP

Checklist for New Farmer Application

The following information must be included in your New Farmer Application:

- ☐ Vendor application, including insurance information.
- ☐ List of products available, including seasonal information if possible.
- ☐ Acknowledgment of Production Agreement for Farmers (by signing this application you are agreeing to the production agreement as outlined in the New Vendor Packet).
- ☐ Any supplemental information on your farm that you feel would be helpful.
- ☐ Sample of invoice.

Community FOOD CO OP

New Farmer Application

Submit your farm information below. We will use this information to decide if your products are a good fit for our stores and customers. Please visit both stores to look at our existing product mix to ensure that you are submitting a product that is either missing or underrepresented in any given produce category (see Category Management and Local Products section of New Vendor Packet).

Contact/Billing Information

Business Name:

Billing Contact Person:

Phone:

Email:

Ordering Contact Person:

Phone:

Email:

Website:

Physical Address:

City:

State:

Zip:

Billing Address (if different from physical location):

Business Information

Federal Tax ID Number:

Farm Location (City, County):

Total Acres Farmed:

Liability Insurance Provider (required):

Dollar Amount:

Certified Organic: Choose One

If **Yes**, Certification number:

Issue Date and Certifying Agency:

If **No**, list any pesticides, herbicides, fungicides, pest management system, etc. that are used on your products, and describe the conditions under which they are applied. Please feel free to submit on a separate document if you need to supply more detailed information:

Community FOOD CO OP

Product Information
What do you grow?

Food Safety
Does your farm have GAP (Good Agricultural Practices) or other food safety certification? Choose One
If **Yes,** please list your certification number and certifying agency:

Field
Do you compost your own manure, or have livestock on site? Choose One
If **Yes,** please describe the measures in place to ensure the prevention of contamination of vegetable fields from runoff:

Do you have preventative measures in place to keep contamination of on-site chemicals or fertilizers out of your fields and water supply? Choose One

Facilities
Do you have a covered, clean, pest-free area to wash and pack produce prior to delivery? Choose One
Do you reuse wax produce boxes? Choose One
Do you have reusable packaging used in the delivery of produce to the Co-op? Choose One
If **Yes,** please describe how these are cleaned.
Do you have clean, dry, pest-free storage areas for packing materials? Choose One
Are fertilizers, chemicals, and other potential contaminants kept in storage areas separate from food packing or prep areas? Choose One
Do you have a toilet and hand washing facilities on site? Choose One
Are smoking and eating confined to designated areas separate from product handling? Choose One
Do you have refrigeration on site for your products? Choose One
Are any chemicals used in the processing of your products prior to delivery to the Co-op? Choose One
If **Yes,** please list:
Do you process food, cut, alter, or wash for consumer consumption? Choose One (If no, skip to next section)
Do you have a health department inspected and approved space to cut, or process food? Choose One
Are food-grade packaging materials used (when applicable)? Choose One
Do you produce any "potentially hazardous" foods, i.e. salad mix, loose leaf greens, or sprouts? Choose One
Is a cold chain required in the transportation of these products to the Co-op? Choose One
If **Yes,** please describe your facility, processing, and handling procedures for these products.

Community FOOD CO-OP

Transportation

Do you have a clean, food-safe means of transporting your food products to the Co-op? Choose One

Does your vehicle have refrigeration? Choose One

Worker Health and Hygiene

We support, and choose to do business with farms and producers that treat all employees with fairness and respect.

Are your employees paid a fair wage, have safe working conditions, and access to support if needed? Choose One

Is there an effective and ongoing worker food safety training program in place? Choose One

If **Yes,** please describe:

I confirm that the information provided above is accurate to the best of my knowledge and that my production and/or farming practices are in accordance with state law. I also confirm that I have read and agree to the conditions set forth in the Production Agreement for Farmers in the Co-op's New Vendor Packet.

Signature of Seller:_____

Date:_____

Note: If you have additional information you would like to provide, please use another sheet of paper.