

West Virginia Department of Agriculture

Kent A. Leonhardt, Commissioner
Joseph L. Hatton, Deputy Commissioner



West Virginia Farmer Market Registration Form

Name of Farmers Market:	
Legal owner name:	
Physical Address of Farmers Market: (Location of the market (if not a mobile unit) OR your business location (if a mobile unit))	
Email address:	
Telephone #:	Fax#:
Mailing address: _____ Same as above (If different than above address)	
Type of Farmers Market: <input type="checkbox"/> Traditional <input type="checkbox"/> On farm <input type="checkbox"/> Consignment <input type="checkbox"/> Online <input type="checkbox"/> Mobile <input type="checkbox"/> Other _____ If you are a consignment farmers market, please attach your Food Establishment Permit	
Facility type: <input type="checkbox"/> Permanent structure or building <input type="checkbox"/> Parking lot or open-air market <input type="checkbox"/> Mobilized unit	
Dates of open & close:	

Days of Operation & Time:

(Check days which apply & complete time facility is open)

<input type="checkbox"/> Monday	Time _____	<input type="checkbox"/> Friday	Time _____
<input type="checkbox"/> Tuesday	Time _____	<input type="checkbox"/> Saturday	Time _____
<input type="checkbox"/> Wednesday	Time _____	<input type="checkbox"/> Sunday	Time _____
<input type="checkbox"/> Thursday	Time _____		

Please provide your Farmers Market's definition of local (*50 mile radius, county, etc*):

Will sampling be permitted at your market?

Yes **No**

If yes, do you have an available hand washing area / station, describe below?

Name of Responsible person (Print)

Signature

Date

Complete this form and email or fax to:

farmersmarkets@wvda.us

fax: 304-558-3594

phone: 304-558-2227

mailing address: 1900 Kanawha Blvd. East, Charleston, WV 25305-0170

physical address: 217 Gus R. Douglass Lane, Charleston, WV 25312

telephone: 304-558-3550 • fax: 304-558-2203

www.agriculture.wv.gov

