## Alexandria Health Department Farmers Market Food Vendor Registration

Please complete and submit this form to the Alexandria Health Department via mail or email. If applicable, please also submit your permit, license, and/or last inspection from the regulatory authority agency that inspects you (VDACS, health department, USDA, FDA) if you prepare your food in a commissary kitchen, inspected home kitchen, etc. Please note: The sale of certain food items require inspections and permits.

Email: alexehhealth@vdh.virginia.gov

Mail: 4480 King Street, Suite 360

Alexandria, VA 22302

The Health Department will review your information and contact you with any questions within 10 business days of receipt. When the Health Department completes their review, they will email you an approval letter outlining food safety steps you should take to protect the health of your customers.

CONTACT	TINFORMATION		
Name			
Home/Bus	siness Address:		
Food Prep	aration Address (home, farm, commissary kitchen):		
Phone Nu	mbers: Business: ( )		
	Home: ( )		
	Mobile: ( )		
	Fax Number: ( )		
Email Addı	ress (where approval letter will be sent):		
May we se	nd you additional informational emails? $\square$ YES $\square$ N	NO	
	OF VENDOR REPRESENTATIVE(S) IN CHARGE, ON-SITE, DUR On-site phone numb On-site phone numb On-site phone numb	per: ( )	
	On-site phone numb On-site phone numb On-site phone numb	per: ( )	
<b>PRODU</b> Farmer	On-site phone numb	per: ( ) per: ( ) pu would like to se	II/serve at an Alexandria
PRODU	On-site phone numb On-site phone numb On-site phone numb On-site phone numb	per: ( )	
<b>PRODU</b> Farmer	On-site phone numb	per: ( ) per: ( ) pu would like to se	II/serve at an Alexandria
<b>PRODU</b> Farmer a.	On-site phone numb Will you be selling raw fruits, vegetables, nuts and/or grains?	per: ( ) per: ( ) pu would like to se	II/serve at an Alexandria □ NO
PRODU Farmer a. b.	On-site phone numb	per: ( ) per: ( ) pu would like to se	II/serve at an Alexandria
PRODU Farmer a. b.	On-site phone numb	per: ( ) per: ( ) pu would like to se	II/serve at an Alexandria  NO NO NO

Environmental Health Division, 4480 King Street, Suite 360, Alexandria, VA 22302Phone: (703) 746-4910 Fax: (703) 746-4919 <a href="https://www.alexandriava.gov/EnvironmentalHealth">www.alexandriava.gov/EnvironmentalHealth</a>

vegetables, please contact the Environmental Health Division at (703) 746-4910.

If at a later time you would like to begin offering cut produce or samples of your fruits, nuts or

In the chart below, please list all the food items you will be selling and include the requested information: Food Item: Primary Ingredient(s): **Source of Ingredients** Where is the Is the food item (i.e. Sysco, Safeway) food item cooked or heat treated prepared? prior to packaging? 1) FOOD SAMPLES: Do you want to serve samples of prepared foods at the Farmers Market? ☐ YES\* \*If you answered yes to the question above, please provide additional information on which prepared food items you want to sample and how the items will be displayed and served to prevent contamination of food. 2) PACKAGING: How are your prepared food items packaged? (i.e. plastic containers, canning jars) 3) LABELING: How are your prepared food items labeled? (i.e. descriptive name of food, business name, business address, business phone number, ingredient list) If at a later time you would like to sell any prepared food products not listed above or begin offering samples of your food products, please contact the Environmental Health Department. The above information is complete and accurate.

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**Date** 

**Food Vendor's Signature**