Limestone Coast Food

Farmers & Makers Market

Application to Trade 2026-2027

1. Applicant Details			
Date			
Name			
Address			
Town			
State		Postcode	
Phone		Mobile	
Email			
Emergency Contact		Phone	

2. Business Details			
Business Name			
Trading As			
ABN			
Business Address			
Town			
State		Postcode	
Are you a member of Limestone Coast Food Group?	☐ Yes ☐ No		

3. Stall Details			
3.1	Names of stall operators		
3.2	Do you have your own public & product liability insurance **to the value of $10m (this is a requirement)**		
	☐ Yes – Please provide a copy of your certificate of currency		
If yes -	Amount of cover for public liability?	$	
	Amount of cover for product liability?	$	
	Name of insurance company/broker		
	Expiry date		
3.3	How many sites do you require? *Enter Number* ➡ NB Sites are minimum 3m x 3m outside and 3m x 2m inside at Robe	☐ Inside	☐ Outside

3.4	Do you require power? The amount of power available is very limited.	☐ Yes	☐ No – go to question 4.
	If yes – number of outlets needed.	☐ 10 Amp	☐ 15 Amp

Please list all equipment needing power and the amount of power drawn by each appliance.
All electrical equipment must be tested and tagged by an electrician.
If not enough space, please provide an extra sheet of paper. Power is generally only available for outside stalls.

	Amps
	Amps
	Amps

4. Which category of products will you be selling? You may tick more than one category.

4.1	**Fresh Produce**	Eg. fruit, vegetables, meat, eggs (out of season produce must not be sold)

Please list everything that you will be selling during the application period for this category

Are your products certified organic?	☐ No	☐ Yes – please provide a copy of your certificate
Did you grow all the above produce yourself?	☐ No	☐ Yes
If you wish to sell eggs, have you applied for accreditation?	☐ No	☐ Yes

➡ If yes, please provide your accreditation number.

4.2	☐ **Value added foods**	Eg. cheese, coffee, wine, cakes, oils, smallgoods, etc.

Please list everything that you will be selling during the application period for this category

Did you grow or produce any of the ingredients yourself?	☐ No	☐ Yes
Did you value add any of the above goods yourself?	☐ No	☐ Yes

➡ **NOTE: If selling alcohol, a temporary liquor license for each market attended.**

4.3 ☐ **Hot or cold food or drinks for immediate consumption**

Please list everything that you will be selling during the application period for this category

Do you grow or produce any of the ingredients yourself?	☐ No	☐ Yes
Are any of your ingredients sourced from Limestone Coast Producers?	☐ No	☐ Yes

4.4	☐ **Maker - Art & Craft items**	Non food items eg. clothing, soaps, wood work, books, etc.

Please list everything that you will be selling during the application period for this category

Do you make all of the products yourself?	☐ No	☐ Yes
If no, what percentage of your goods did you make?		
Where did you source the products you didn't make?		
Regarding the products you didn't make, why do you wish to sell these products at the Limestone Coast Farmers & Makers Markets?		

4.5	☐ **Acting as an agent for other Limestone Coast producers?**

Please list the producers for which you will be acting as an agent (maximum of 2) and which category of product this falls in, eg. fresh, value added or for immediate consumption.

1.		
2.		

4.6	**Is there anything else you wish to sell at the LC Farmers & Makers Markets that you have not listed anywhere above? Please list below.**

5. If you are selling food products of any sort ..	
Which council area are you registered in?	
What is your food notification number?	
Have you participated in a safe food handling course?	☐ Yes ☐ No
Are you aware of the requirements of trading from a temporary food premises?	☐ Yes ☐ No

6. Declaration	

As an approved stallholder I have read and agree to abide by the Limestone Coast Food Group Farmers & Makers Market Charter and the Terms and Conditions as determined by the Market Management Committee. I understand that if I am found to be trading outside of this charter and any other terms & conditions, the Market Manager may advise me of points of contravention for me to address. Failure to address and correct these issues may result in my application to trade being revoked.

Applicants Signature		Date	

Please email this completed form, together with any supporting documentation, to the LCFG Market Manager at market@limestonecoastfood.com.au

Or post to PO Box 85 Robe SA 5276