



Scripps Ranch Farmers Market

c/o Bev & Mike Cassity, Market Managers

11455 Roxboro Court

San Diego, CA 92131

Phone: (858) 586-7933 Email: SRFarmersMarket@aol.com

www.SRFM.org

Artisan Application

Name: _____ Current CA Resale Permit #: _____

Business Name: _____

Business Address: _____

Street: _____

City: _____ Zip: _____

Mailing Address: (If other than Business Address)

Street: _____

City: _____ Zip: _____

Telephone: _____ Fax: _____ Email: _____

Date you wish to begin: _____ Each vendor space is equivalent to a parallel parking space in length. How many spaces do you wish to _____

Will you be using any additional equipment, i.e., a generator. If so, please describe below:

Describe the product(s) you would like to sell:

I have read and agree to follow all the rules put forth by the Market.

Signed _____ Date _____

Please include-

Copy of your Current CA Resale Permit

Photos or brochures on your product(s)

Please return this application and items listed to the address above.

Thank You!