



2024 Derry Homegrown Farm & Artisan Market Application

**Town of Derry
Department of Public Health
14 Manning St, Derry, NH 03038
Tel: (603) 845-5519 Fax: (603) 432-6130
Email: courtneybogaert@derrynh.org**

Submit application to the Department of Public Health by May 22, 2024

Business Name: _____ Contact Name: _____
Cell Number: _____ Email Address: _____
Mailing address: _____
Name of Person(s) in Charge of Food Booth: _____

Complete list of products/food items being sold
Additional items added during season shall be reported to Health Department

PLEASE NOTE:

- Required paperwork:
 - Copy of food-service license, along with the most recent food-service inspection report
 - Copy of commissary food-service license with contact information of owner (for *TCS foods)
 - Certificate of Good Standing with the Secretary of State of NH office (aka business license)
- Vendor shall adhere to the 2024 DERRY FARMERS MARKET VENDOR REQUIREMENTS.

APPLICANT SIGNATURE: _____

TITLE: _____ DATE: _____

Date Received: _____

*Temperature Control for Safety