



LAKE MILLS ARTISAN'S/FARMERS' MARKET  
2017 WINTER MARKET VENDOR APPLICATION FORM

Saturday, December 9, 2017

9am-3pm (set-up can begin at 6:30am)

Lake Mills Middle School (Cafeteria & Gymnasium) - 318 College Street



Unloading is at Front Entrance; **Vehicles Must be Moved Immediately to Designated Lots After Unloading**

PLEASE PRINT CLEARLY:

Vendor Name(s): \_\_\_\_\_ Business Name: \_\_\_\_\_  
Mailing Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
Cell Phone: ( ) - License Plate: \_\_\_\_\_ E-mail Address: \_\_\_\_\_

ALL items you wish to vend must be listed and described in order to be sold: (Attach additional sheets if needed)

\_\_\_\_\_  
\_\_\_\_\_

Each "booth" will consist of a 10x10 area. **Vendors must provide their own tables, chairs, racks, etc.** All chairs and table legs need padding to protect the gymnasium floors. Availability of double booth spaces is very limited. Allocation will be determined by the Winter Market Committee. Booths are \$45; if you need 2 booths, the cost is \$90. **Additional \$15 late fee is required if application is received after November 1, 2017.** Locations will be assigned by the Artisan/Farmers' Market Manager and Committee.

Each application will be reviewed and juried in by the Lake Mills Artisan/Farmers' Market Committee. Vendors are limited to items that are grown or created by the vendor. Retail/resale products are not allowed. **Please note: We deposit your check upon receipt; this is not a guarantee of acceptance.** Should the jury decline your application or a second booth, we will send a refund check to you.

**Applications: Three ELECTRONIC photos of your work are required for the jurying process.** These photos should accurately reflect the diversity of your work, and will be used by the jury to choose our Winter Market participants, so please provide clear photos. **Photos must be sent electronically** to [director@lakemillsmainstreet.org](mailto:director@lakemillsmainstreet.org) and not with your application. **Deadline for electronic photos, application and Seller's Permit is November 1, 2017.** An additional \$15 late fee is required if any application-related information (e.g. photos, seller's permit) is received after November 1, 2017. Notification of acceptance will be sent electronically by Monday, November 20, 2017.

**Electricity/WIFI** – regretfully, there is no electricity or WIFI available for vendor use.

**Documents to include:**

Along with photos of your work, vendors selling or processing any kind of food or beverage (does not include raw produce) must adhere to Jefferson County Health Department Guidelines and regulations. Some vendors will need **food permits**. Note: Please contact the Jefferson County Health Department at 920-262-8094 for permit information. **All vendors must enclose a copy of their Wisconsin Temporary Event Operator and Seller Information – Form S-240 (R.5-14) per Wisconsin State guidelines (see attached document).** **No vendor will be confirmed for the Winter Market without a copy of this permit.**

**I, the artist/vendor, have read, understand and agree to abide by the Lake Mills Winter Market rules and regulations.** I agree to a production inspection by the Artisan/Farmers' Market Committee or appropriate staff. To the fullest extent permitted by law, I agree to defend, pay on behalf of, indemnify and hold harmless the elected and appointed officials, employees and volunteers and others working on behalf of the Lake Mills Main Street Program and/or the Lake Mills Public School District, against any and all claims, demands, suits, or loss, including all costs connected therewith, and for any damages which may be asserted, claimed or recovered against or from the Lake Mills Public School District and/or the Lake Mills Main Street Program., by reason of personal injury, including bodily injury or death and/or property damage, including the loss of use thereof, which arises or is in any way connected or associated with the Farmers' Market. **All returning applicants are required to submit a new application, seller's permit and photos each year.**

Applicant's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Please return your application form, with a check \* payable to The Lake Mills Main Street Program (LMMSPP) to reserve your space(s). Mail to: Lake Mills Main Street Program, 200e Water Street, Lake Mills, WI 53551

Questions can be directed to the Market Manager at 920.397.9582 or by email at [lakemillsfm@gmail.com](mailto:lakemillsfm@gmail.com)

\*Checks returned Non-Sufficient Funds (NSF) will be assessed a \$25 returned check fee by the Lake Mills Main Street Program.

# Wisconsin Temporary Event Operator and Seller Information

Information on this form is required under sec. 73.03(38), Wis. Stats.

*Instructions on reverse side.*

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**PART A: Event Information: To be completed by the operator of the temporary event**

1. Name of Temporary Event LAKE MILLS WINTER MARKET
2. Date(s) of Temporary Event DECEMBER 9, 2017
3. Location of Temporary Event (e.g., Venue, City) LAKE MILLS MIDDLE SCHOOL

**PART B: Operator Information: To be completed by the operator of the temporary event**

1. Name and Address ED GRUNDEN  
200E WATER STREET - LAKE MILLS - WI - 53551
2. Daytime Telephone Number ( 920 ) 397-9582
3. Email Address lakemillsfm@gmail.com
4. Wisconsin Tax Account Number           -          -          -  
If blank, check appropriate box:  
 No Taxable Sales       Exempt under Occasional Sales Rule       Exempt Nonprofit Organization  
 Other – Explain: \_\_\_\_\_

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**PART C: Seller Information: To be completed by seller and given to event operator on or before the first day of event.**

**THIS IS NOT AN APPLICATION FOR A WISCONSIN TAX ACCOUNT – SEE INSTRUCTIONS**

1. Legal Name \_\_\_\_\_
2. Business Name \_\_\_\_\_
3. Address (Street or Route) \_\_\_\_\_
4. City, State and Zip Code \_\_\_\_\_
5. Home Telephone Number (      ) \_\_\_\_\_  
Business Telephone Number (      ) \_\_\_\_\_
6. Wisconsin Tax Account Number           -          -          -
7. Social Security Number X X X - X X - X X X
8. Federal Identification Number (FEIN) X X - X X X X X X X
9. Check one box indicating the type of activity you intend to engage in at this event:  
 Selling Taxable Merchandise or Service       Display Only  
 Selling Exempt Merchandise or Service       Exempt under Occasional Sales Rule  
 Direct Sellers, Company Name \_\_\_\_\_       Nonprofit Organization

*I declare that the information on this form is true and correct to the best of my knowledge and belief and that I am authorized to sign this form.*

Print Name: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Information about temporary events, including forms, instructions and Common Questions can be found on the Department of Revenue's website at [revenue.wi.gov/html/temevent.html](http://revenue.wi.gov/html/temevent.html). If you have additional questions, please contact the Department of Revenue by email at [DORBusinessTax@revenue.wi.gov](mailto:DORBusinessTax@revenue.wi.gov) or telephone at (608) 266-2776. See reverse side for submission instructions.

**\*\* Do not email event reports to maintain confidentiality of seller information \*\***