BOROUGH OF ORADELL FARMERS MARKET

VENDOR REGISTRATION FORM

Fee: \$100.00	Borough of Ora	Borough of Oradell	
To be payable to:		355 Kinderkamack Road	
The Borough of Oradell	Oradell, NJ 076	Oradell, NJ 07649	
health@oradell.org	Attn: Health De	ept Farmers Market	
Name of Business:	Email Address:		
Mailing Address:	City:	State:	
Onsite Operator:	Phone:		
Description of items to be sold:			
Will you be selling any edible items, whether hot	or cold, prepared or packaged, etc?	_YESNO	
Note: If you answered "YES" to the above question and return to the Borough of Oradell's Health Department of \$100. If you have any questions about 8106. You must submit your documents to the Borough and the submit your documents	partment, along with a check payable to the licensing, you may contact the Oradell Bo	he Borough of Oradell in the	
Did you complete a Hold Harmless? YES	Did you include Certifica	te of Insurance? YES	
Please attach a copy of a Certificate of Insurance insured & certificate holder. Must show evidence	•	ough of Oradell as an additiona	
Please return this vendor registration form, paymo	ent, Hold Harmless and Certificate of Inst	urance to the below address:	
	The Borough of Oradell 355 Kinderkamack Road Oradell NI 07649		

Attn: Health Dept – Farmers Market

YOU WILL NOT BE ABLE TO PARTICIPATE AS A VENDOR AT THE FARMERS MARKET UNLESS YOU PROVIDE ALL INFORMATION ATLEAST 2 WEEKS PRIOR TO START.

REFUNDS WILL NOT BE ISSUED DUE TO INCOMPLIANCE