APPLICATION TO FORM A FARMERS' MARKET - TEMPLATE

Please note: The intention of this document is to provide a basic template as a starting point for council staff to develop a Farmers' Market application form. Content should be updated in line with internal council policies and procedures. To access the full resource kit please visit http://rdanorthernrivers.org.au/food-futures-council-resources/

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Application process where a Development Application is required

Where council requires a Farmers' Market application to be submitted with a Development Application (DA), you will be required to follow the regular DA process and attach the following additional information:

> Ballina Shire Council Market Policy

APPENDIX 1

Information to be Submitted with any Development Application for a Market.

Applications lodged with Council for consent to conduct a market must be accompanied by the following:

A plan, drawn to scale, showing the area of land the market will occupy, together with a

The plan should also illustrate:

- The size and number of stalls
- The width of access ways
- Provision for the free movement of emergency vehicles or crowds
- Access for servicing of waste receptacles and waste water holding tanks, where applicable,
- Access for stallholders
- Car parking
- Details of the type of stalls proposed.
- Details of waste disposal and amenities.
- d) Frequency and duration of the market.
- Emergency Evacuation Plan.
- Risk Management Plan.
- g) Waste Management Plan.
- h)
- Details of signage.
 Details of amplified sound or music.
- Water supply points and availability of potable water. Toilet facilities and numbers for each sex.
- j) k)
- Electricity distribution points.

 Arrangements made to facilitate food stall registration. m)
- Traffic Management Plan.
- Information on how funds from the market will be allocated.

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Policy No. M01

Application process where a Development Application is not required

Applicant checklist

Before submitting this form, please ensure that you have read the Farmers' Market Guidelines (Council to insert hyperlink to where guidelines can be found).

The purpose of this form is to ensure that council has all the information required to assess your application as efficiently as possible. It must be demonstrated that there is adequate commitment and capacity within the group to plan and establish the farmers' market and provide for its ongoing operation. A Plan of Management is a good tool to demonstrate these requirements and long-term planning. If your application is approved, this document will be the basis for your farmers' market Plan of Management.

Before you submit this form, ensure that you have filled in all sections of the form and attached:

- Appendix A A proposed site map outlining the layout of the market
- Appendix B A copy of your (or your auspicing group's) Certificate of Currency for Public Liability Cover of at least \$10,000,000
- Appendix C The market charter / operating guidelines (if applicable)
- Appendix D A list of stallholders including farm name, stall name, product to be offered for sale (if confirmed)
- Appendix E A letter of support from your auspicing group (if applicable)
- Appendix F Other letters of support for your project (optional)

For assistance with your application, please contact (insert name, department, contact number)

Part 1 Applicant details

Applicant Name				
(Organisation)				
Organisation				
website				
Organisation ABN				
Proposed Farmers'				
Market name				
Contact person				
name				
Postal address	Street Address:			
Postal address	Suburb/Town:	State	::	Postcode:
Phone numbers	Business hours:	After	hours:	
Email address				
Applicant signature			Date:	/

Part 2 Market organisation structure

The preferred operational structure for a farmers' market is an Incorporated Community Association. If you are incorporated, please fill in details below. If you are a private enterprise, individual or an organisation that is not incorporated, please proceed to Part 3.

	Yes			Incorporation number:
Is the group Incorporated?	No	□ Please	e indicate below contact (details of the group that is auspicing the project.
Is the group being auspiced by an existing Incorporated Group for the purposes of the project?	Yes		Fill in contact details belo	bw and attach a letter of support from the be able to suggest an appropriate auspice.
Auspicing group name				
Contact person name				
	Stree	t address:		

Postal address	Suburb:	State	:	Postcode:
Phone numbers	Business hours:	After	hours:	
Contact person Signature			Date:	/

Part 3 Market model

What is the proposed business / funding model for the market? Have you applied for / do you	No 🗆
expect to receive grant funding support?	Yes □- please provide details (timeline, amount, funding body):
What are the proposed hours of operation and access?	
How is the Farmers' Market organisation structured? Include brief details on roles, meetings and decision making processes.	
Do you or any of the members of the Farmers' Market organisation have previous experience running Farmers' Markets and if so, are they able to provide support to your group?	No □ Yes □- please provide details:

Does the Farmers' Market organisation include members with skills needed for running the market? (Tick boxes as appropriate)	Engaging farmers and stallholders Managing volunteers Council liaison Community Development Organisation management Publicity & Promotion Fundraising	
If any of these skills do not exist within the group, how do you intend to obtain them?		
What is the conflict-resolution process for the group?		
If circumstances change and the Farmers' Market becomes unviable, what is the group's exit strategy?		

Part 4 Site details

Where is the proposed site?	Number and Street:			
where is the proposed site.	Suburb:	State:	Postcode:	
What is the land currently used for, eg passive recreation, sporting groups, car park etc.?				

Are there any existing structures or services on the site? E.g. Community Hall, Power, Water, Toilets	No □ Yes □ Please provide details:
How will you ensure the site remains tidy and well-maintained?	
How will you control dogs on the site?	
How will you ensure vandalism of the site is prevented?	
Accessibility	
How far is the site from public transport, bicycle tracks and footpaths?	
How close are the nearest toilets for public use?	
Is the site accessible for a range of user groups, including disabled access if required by participants?	Yes No
Does the site have provision for	Power Water Parking (vendor and shopper)

Is it an all-weather site?		
Location		
How far is the site from the retail centre? Close proximity can be considered beneficial for the increased retail options for consumers.		
Size		
Is the site of adequate land size to accommodate the Farmers' Market and associated infrastructure? Consider the number of stalls, pedestrian movement, waste management and signage/parking. Is there adequate additional	Yes No	
land to expand if your market is successful and grows?		
Waste management		
How will you manage organic wast and recyclables?	e	
How will you manage materials that are not recyclable?	at	

How will you minimise noise and odour?	
Will your market be plastic bag free?	

Part 4 Farmers' market details

What is the purpose(s) of the proposed Farmers' Market? (tick as many as applicable)	Promoting locally produced food Community building Place making Improved access to healthy food Supporting farmers to retail their product Fundraising Town / Urban Renewal Other (please specify):		
What is the benefit of this project to the greater community?			
Is this project proposed to link to any existing community activities?			
How has the surrounding community been consulted about the project and what were the outcomes? (Explain the methods and scope of consultation used and the key community issues raised for and against the proposed Farmers' Market.)			

Part 5 Lodgement details

You can lodge the completed form with any supporting material as follows:

By Email: (Insert email address)

By Mail: (insert address)

Or for further information or assistance with your application, please contact:

Insert title, name and contact details of responsible staff member

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Approval to Issue: Yes No

Date Approved: / /

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Signature: PUBLIC HEALTH OFFICER