



OFFICE OF ENVIRONMENTAL HEALTH
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Farmer's Market Food Vendor Evaluation

Required for vendors offering food products at Farmer's Markets in Talbot County

Vendor Name: _____

Farm Name (if applicable): _____

Address: _____

Phone: _____ Email Address: _____

Market Location: _____

Dates of Operation: _____ to _____

Hours of Operation: _____

*List all food products offered (including **all** agricultural products, honey and fresh herbs):

_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

If you hold a license issued by the Maryland Department of Health Food or Milk Control or the Maryland Department of Agriculture, please submit a copy of your license with this form.

If offering meats, poultry or eggs, how are you going to maintain proper product temperatures throughout operation period?

Do you intend on offering samples of your product? Yes* No

*If you are going to offer samples of your farm product, a Seasonal Farmer's Market Sampling License must be obtained by this department. If you are offering samples of non-farm products, a Temporary Food Service License must be obtained by this department

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Comments:

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