



KINGS' SHOPS FARMERS MARKET

Thank you for your interest in the Kings' Shops Farmer's Market, operated by Palani Makai Partners, LLC. Please complete this application in its entirety. Please note that failure to fill out all applicable information may delay the processing of, or result in the denial of your application.

The Kings' Shops Farmer's Market is independently operated by Palani Makai Partners, LLC under a contracted agreement with Kings' Shops. As such, Palani Makai Partners, LLC reserves discretionary rights over all products sold at the market. Due to the unique nature and location of the Market, some uses may be deemed inappropriate for the market setting.

Each concept will be reviewed and evaluated based on the following criteria: 1) is the product locally grown/produced?; 2) is there an existing vendor with this use? (including merchants existing in the Shopping Center); and 3) does the use fit into the Farmer's Market concept?

PERSONAL INFORMATION

Applicant Name		Social Security Number	
Home Street Address	City	State	Zip Code
Home Phone	Mobile Phone		
E-Mail Address	Alternate E-Mail (If Applicable)		

COMPANY INFORMATION

Company Name		Trade Name (DBA):	
Business Street Address	City	State	Zip Code
Business Phone	Business E-Mail Address		
Business Facsimile	Federal Employer Identification Number (FEIN)	Number of Years in Business	
Business Structure (Check only one) <input type="checkbox"/> Sole Proprietor <input type="checkbox"/> Partnership <input type="checkbox"/> Corporation <input type="checkbox"/> Limited Liability Corporation <input type="checkbox"/> Franchise			
State of Incorporation		Business Website (If Applicable)	
Current Locations (If Applicable)	Desired Start Date	#of required tables	
Please list your products to be sold:			

I certify that all the information listed on this application is true to the best of my knowledge. I have received, reviewed and agree to abide by the Kings' Shops Farmer's Market Rules and Regulations and Set-up/Take-Down Guidelines. By signing below, I acknowledge that I will be held fully responsible for any falsification or misrepresentation of this information. If approved, I agree to sell only locally-grown produce or foods, and understand that any deviation from the product listings above shall result in a \$100 fine, and/or immediate eviction from the market. Further, I understand that until approved in writing, my participation in the Farmer's Market is considered to be pending.

Applicant Signature

Date

APPLICANT – DO NOT WRITE IN THIS BOX

APPLICATION REVIEWED BY: _____

DATE: _____

Approved Rejected: _____

Conditionally Approved: _____