Vendor Interest Form

1	Vendor Name:					_		
2	Web Address:					_		
3	Office Address:					_		
						-		
4	Distribution Center:					- -		
5	Contact Information:					_		
	Primary Contact							
	Name					_		
	Email							
	Billing							
	Name							
	Phone							
	Email							
_								
6	Products available for sale: 1							
			//			'		
	2							
	4							
	5							
	(Use additional pa	ges or back of f	orm for addi	tional items)				
7	Certifications held:				Certifica	ntion Nur	mber	
	USDA Organic							
	Certified Naturally Grown							
	American Grass-fed (AGA)							
	Animal Welfare Approved							
	Other:			0 D	CO			
						YES	<u>NO</u>	N/A
8	Value Added (Processed) goods:							
	Is your kitchen inspected and cer	ified for produc	ction?					
9	Vendor has Liability Insurance Co	verage:						
LO	Products have Virginia Department of Agriculture approved labeling? *							
	*(If required for your category)							