

Oriskany Farmers Market

Organizational Guidelines

- The market will be hosted in Trinkaus Park at 420 Utica Street starting the first Wednesday of June through the last Wednesday of September.
- Normal hours of operation are 2:00 p.m. to 7:00 p.m. After Labor Day, the market will close at 6:00 p.m.
- In the case of severe weather, the village will announce a market closure by noon of the day in question.
- Vendor applications should be submitted through the online form, by email to market@oriskany.org or by mail to PO Box 284, Oriskany, NY 13424.
- Booth rentals are \$100 for the full season (\$75 for returning vendors), \$50 for a half season, or \$10 per week (must register one week in advance). Double booths available for cost + 25%.
- Vendors may begin set-up at 12:00 noon. Please refrain from packing up until 30 minutes before market closing.
- Vendor vehicles should be parked by 2:00 p.m. and remain stationary until closing.
- Vendors will have assigned stall locations measuring 13'x13'. (Late arrivals may be asked to use an alternate location for the safety of market patrons.)
- Tents must be in good repair. No tarps or improvised tents.
- Vendors shall refrain from smoking near patrons, volunteers, & other vendors.
- Clean up should be completed by dark when the park closes.
 - All tents, tables, debris, and litter must be removed.
- The Village of Oriskany, the Oriskany Museum, and the Oriskany Farmers Market are not responsible for damage to goods or personal property.
- Participants should offer locally grown products, handicrafts, artisan-made goods, prepared foods, or customized items.
- All items sold must be licensed in accordance with Article 14 of the Agriculture and Market Law, NYS Department of Agriculture and Markets, Village ordinance, the NYS Department of Taxation, and/or the Oneida County Department of Health, where applicable. All vendors are individually responsible and liable for complying with federal, state, county, and local regulations.
- Vendors who are absent for two consecutive weeks may have their booth location moved.

For questions, please email market@oriskany.org

Oriskany Farmers Market Vendor Application

Name: _____

Address: _____

Phone Number: _____

E-Mail Address: _____

Business Name (if applicable): _____

NYS Sales Tax ID # (or reason for exemption) : _____

Items to be sold: _____

Full Season: _____ Half Season: _____ Single Day: _____

Please make checks payable to Oriskany Farmers Market

Date(s) for Single Day Permit: _____

Please attach copies of applicable sales tax license, home kitchen certificate, etc.

I understand that my application is not complete until approved by the Oriskany Farmers Market and the Village of Oriskany. I agree to comply with the regulations set forth by both entities. **I accept responsibility for any sales tax requirements for my products.** I certify that my application is true and complete. Lack of compliance may result in revocation of permit, in which case no refund will be issued.

Signature: _____ Date: _____

Please deliver or mail to Oriskany Farmers Market % Oriskany Museum, PO Box 284, Oriskany, NY 13424

Payment Type: Cash \$ _____ Check # _____ Date Received: _____