



City of Alexandria, Virginia
General Services Department
Produce Vendor Certificate

Copy of Health Department Permit attached.

I, _____, do hereby certify on

_____, 20____ that products described as: _____

are grown or produced by me and/or members of my household at my farm, home, or garden

located at _____ (Address).

I understand that if I provide false information on this application that I will lose my license to sell at the Alexandria Farmer's Market and I may be charged with fraudulently averting City of Alexandria taxation.

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Signed _____

Address _____

State of _____

County/City of _____

Subscribed and sworn before me this _____ day of _____, 20____.

_____ My commission expires _____.

Notary Public