

ASPETUCK HEALTH DISTRICT

180 Bayberry Lane, Westport, CT 06880-2855 Telephone: (203) 227-9571 Fax: (203) 221-7199

No Fee Required

Application For Farmers Selling fresh, raw, uncut or farm processed fruits, vegetables and meat.

Name:		Farm Name:	
Mail Addres	s:		
Town, State,	Zip:		
Farm Addre	ss:		
Telephone:	()	Fax: ()	
		Details of Event:	
Name of Ev	vent:		
Date(s) of E	e(s) of Event: Hours of Operation		
Location of			
List product			
-			
E-Mail Addr	ess:		_
Station, Depa	artment of Agriculture and	d/or Consumer Protection Department	ble Connecticut Agricultural Experiment nent licenses/approvals. The application ness days prior to the start of the Market.
		For Office Use Only	
		For Office Use Only	
		T	1
Date Applic	cation Approved:	Date Permit Issued:	Date Mailed/Delivered
Ву:			Ву:

Notes/Conditions: