

MARKET LOCATION PROFILE

This form should be completed annually for each market location—a physical site—where one or market days occur.

0. Your Name/Email:		Today's Date:	
1. Market Organization:			
2. Market Name: <i>If different than Market Organization.</i>			
3. Market Physical Address: <i>If there is not one set street address, please choose the nearest one. Also, complete #4 below.</i>		Street(s): City: Zip: County:	
4. Market Coordinates (if there is not at one set address, choose a spot in the middle of the market) <i>You can find market coordinates (which appear as two long numbers with a comma in between) on google maps on phone or computer by finding the location and double clicking and/or dropping a pin. The first number is latitude and the second is longitude.</i> Latitude: _____ Longitude: _____			
5. Circle the months the market operates at this location: Jan Feb Mar Apr May Jun Jul Aug Sept Oct Nov Dec			
6. How many total WEEKS does a market operate at this location in a year?		7. How many total DAYS does a market operate at this location in a year?	
8. Total number of years market has operated <i>(at this site and any other if moved):</i> _____			
9. On what TYPE OF PROPERTY does the market operate? <i>1) Check all types of property that apply, then 2) Circle the one type of property that you would consider the primary type.</i>		<input type="checkbox"/> Parking lot <input type="checkbox"/> Park <input type="checkbox"/> Plaza, or square <input type="checkbox"/> Street (closed to traffic) <input type="checkbox"/> Sidewalk (along a street open to traffic) <input type="checkbox"/> Open air pavilion (primarily used for the market) <input type="checkbox"/> Open air pavilion (primarily used for something other than the market) <input type="checkbox"/> Building (primarily used for the market) <input type="checkbox"/> Building (primarily used for something other than the market) <input type="checkbox"/> Lawn/Grass/Gravel area (not otherwise used for parking)	



This template was created by Farmers Market Coalition, the national entity supporting farmers markets in the U.S. Edit or adapt the template as needed and share with us at info@farmersmarketcoalition.org. Find more resources at farmersmarketcoalition.org and farmersmarketevaluation.org.

10. **Does the market require ANNUAL PERMISSION from the property owner to operate at this location?**
- ☐ Yes- verbal permission granted ☐ Other:
☐ Yes- written resolution, contract, or permit approval granted
☐ No
☐ Don't Know
-

11. **The OWNER of this property is:**
- ☐ The market/the Market Organization
☐ Local government (city, village, township, county)
☐ State or federal government
☐ Tribal government
☐ Private business
☐ Nonprofit
☐ School or school district
☐ Religious institution (church, mosque, temple, et al)
☐ Hospital or healthcare organization
☐ University or college
☐ Don't know
☐ Other:
-

12. **What is the ANNUAL COST to use this location?**

This includes any permits, fees, and rent paid to the property owner. Do not include utilities.

13. **Select which INFRASTRUCTURE AND AMENITIES are available at this market location?**
Select all that apply.
- | | |
|---|--|
| <input type="checkbox"/> Bathroom for customers | <input type="checkbox"/> Handwashing for customers |
| <input type="checkbox"/> Bathroom for vendors/staff | <input type="checkbox"/> Handwashing for vendors/staff |
| <input type="checkbox"/> Bicycle Parking | <input type="checkbox"/> Potable water for vendors |
| <input type="checkbox"/> Bus stop (within 5 minute walk) | <input type="checkbox"/> Recycling for customers and vendors |
| <input type="checkbox"/> Composting for customers and vendors | <input type="checkbox"/> Seating for customers |
| <input type="checkbox"/> Dedicated wifi | <input type="checkbox"/> Shade/shelter for customers |
| <input type="checkbox"/> Drinking water for customers | <input type="checkbox"/> Tables for customers |
| <input type="checkbox"/> Electricity for vendors | <input type="checkbox"/> Telephone line |
| <input type="checkbox"/> Free Parking | |
-

14. **In addition to cash, what currencies does your market accept?**
Select all that apply.
- ☐ Credit cards
☐ Individual vendors process
☐ At a central market terminal
☐ SNAP-EBT
☐ Individual vendors authorized
☐ At a central market terminal
☐ SNAP-EBT Incentives
☐ Produce Prescription Program(s)
☐ Senior FMNP (Farmers Market Nutrition Program)
☐ WIC FMNP (Farmers Market Nutrition Program)
☐ Power of Produce Program(s)
☐ Market- or community-specific food assistance/nutrition programs
☐ Other (specify):

15. **Select the response(s) that best describes the vendor fee structure.**

Select all that apply.

- ☐ Application fee
- ☐ Membership fee
- ☐ Flat fee (annual)
- ☐ Flat fee (daily))

- ☐ Percent of sales
- ☐ No fees charged
- ☐ Other (specify)

16. **Annual vendor fee:**

Some markets charge different types of vendors different fees. Please list an average annual fee for a single stall (producer/farmer/vendor). Skip if not applicable.

17. **Daily vendor fee:**

Please list an average daily fee for a single stall (producer/farmer/vendor). Skip if not applicable.

18. **For markets that charge percentage of sales, what percentage is charged?**

Please note if different types of vendors are charged different percentages (e.g. farmers vs. prepared food). Skip if not applicable.