

**Application To Rent Space On the Market**

1. Name \_\_\_\_\_

Address \_\_\_\_\_ Phone \_\_\_\_\_

2. Name of Business \_\_\_\_\_

3. State number of years experience in produce business \_\_\_\_\_

4. Amount of space applied for \_\_\_\_\_

5. Do you want space rented in your name or name of business? \_\_\_\_\_

6. Are you applying for space retail sales or wholesale? \_\_\_\_\_

7. Have you ever been convicted of a crime? \_\_\_\_\_  
If so, state the nature of the crime(s), the county and state where court located and the type of sentence you received \_\_\_\_\_

8. Are you aware that if you are selected as a tenant to occupy space on this market you must operate the business yourself? You may not turn it over to someone else to run. \_\_\_\_\_

9. Do you understand that if you sell your business under which you operate at the market, you immediately notify the market of such sale, you must clean out the space you rent from the market and return the space to the market? \_\_\_\_\_  
Do you agree to abide by the rule? \_\_\_\_\_

10. Do you understand there will be no subleasing of any kind allowed and all space must be returned to the market for said market to reassign to another tenant if you decide not to operate on space rented to you? \_\_\_\_\_  
Do you agree to abide by the rule? \_\_\_\_\_

11. Do you understand that Jefferson County Truck Growers Association will check your personal as well as your business credit? \_\_\_\_\_  
Do you give your permission hereby for the association to do so? \_\_\_\_\_

12. Do you understand that if selected as a tenant you will be required to carry public liability insurance in an amount of not less than \$100,000.00 for injury to or death of one person or as a result of one occurrence and not less than \$300,000.00 for injury to or death of more than one person a result of one occurrence and for damage to property in the amount of \$25,000.00 and that these policies shall list this market as an additional insured? \_\_\_\_\_

13. Do you agree to abide by the rules and regulations and By-Laws now in effect and any future rules, regulations and By-law that may be put into effect by the association? \_\_\_\_\_

By signing this application I agree to abide by all present and future rules, regulations and by-laws of this association. I understand that if accepted as a tenant I will occupy and pay rent on the space. I further agree to purchase and keep in effect required insurance on any space I rent for the length of time I may occupy the space. I understand that I will be screened (both credit and experience as a produce dealer) on a uniform basis with all other applicants by a Block and Bay Committee and the final decision for acceptable tenants will be made by the Board of Directors.

\_\_\_\_\_  
Date Name of Business

By:

**Credit Information**

Name \_\_\_\_\_ Phone \_\_\_\_\_

Address \_\_\_\_\_

Date of Birth \_\_\_\_\_ Social Security # \_\_\_\_\_

Married \_\_\_\_\_ Name of Spouse \_\_\_\_\_

Is spouse employed \_\_\_\_\_ Name of employer \_\_\_\_\_

Employers Address \_\_\_\_\_ Phone \_\_\_\_\_

Your previous address(If less than three years) \_\_\_\_\_

Nearest relative not living with you \_\_\_\_\_

Address \_\_\_\_\_ Phone \_\_\_\_\_

Name of your business \_\_\_\_\_ Address \_\_\_\_\_

Years in business \_\_\_\_\_ Phone \_\_\_\_\_

Do you have income other than this business? \_\_\_\_\_

If so, State all other sources of income \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**Bank Accounts**

Name of Bank Account No. Type of Account

---

---

---

List all indebtedness to others

---

---

---

I hereby authorize Jefferson County Truck Growers Association to obtain the above information from my credit references.

Signature \_\_\_\_\_ Date \_\_\_\_\_