

Instruction Sheet for Farmers' Market Vendor Audit Form

At the beginning of the market season, the ODA Food Safety Division (FSD) requests that vendors under their *jurisdiction fill out the top bolded box section of the "Vendor Audit Form." FSD staff will use these forms to record observations during the Audit Visits concerning safe food handling practices. Following the visit, FSD staff will provide a copy for the vendor.

** See Product Types listed on the "Vendor Audit Form"*

1. **"Farmers' Market Name"**: List the Market name as it appears in the "2010 Guide to Farmers' Markets." Please also include (a) your name and (b) cell phone number, or provide your business card for the ODA Inspector.
2. **"Street/City/Zip"**: List the Market location.
3. **"Vendor Name"**: Name as it appears on the booth.
4. **"Licensed Vendor Street Address", "Vendor City and Zip", "Vendor Phone", "Vendor Email"**: List the physical address of the licensed facility (not the mailing/business address, if different). Please provide an email address if available.
5. **"AG-L#"**: This refers to the ODA license number. Please attach a copy of the ODA license to the form. Vendors should also have it available on-site.

AT THE BOTTOM OF THE FORM, CIRCLE THE MONTHS THAT THE VENDOR PARTICIPATES AT MARKET – PLEASE ALSO NOTE IF THE VENDOR DOES NOT PARTICIPATE ON EACH DAY OF THE MARKET (EX. SATURDAY ONLY FOR A SATURDAY/WEDNESDAY MARKET.)

ODA appreciates your time and your help in filling out the audit forms before we arrive. Your support will make our audit visits run smoothly. We look forward to working with you to make your market safe and enjoyable.

If you have questions, please do not hesitate to contact us.