



Application Form for Participation in the Farmers Market 2025

According to regulation 5 and the second schedule of the S.L. 117.31 and its amendments

For use by the Office Only:

Date of receipt of the application: Application number:

Type of application: Farmer Herdsman Producer

Cooperative/Organisation/Association/Representative Groups.

Date of notification to an applicant:

Fill in where it counts for you:

Name of Applicant

I.D. number:

Address:

Telephone: Mobile:

Email:

Vehicle registration number.....

Vehicle dimensions.....

Preferred location:

First Preference: Ta' Qali Cottonera

Second preference: Ta' Qali Cottonera

Preference of days¹: Tuesday and/or Saturday

Indicate if occasionally operated in farmers market: Yes No .

If yes indicate in which market: _____ and mark which days, you are currently operated: Tuesday and/or Saturday

Mark during which months you want to sell from your post:

January	<input type="checkbox"/>	May	<input type="checkbox"/>	September	<input type="checkbox"/>
February	<input type="checkbox"/>	June	<input type="checkbox"/>	October	<input type="checkbox"/>
March	<input type="checkbox"/>	July	<input type="checkbox"/>	November	<input type="checkbox"/>
April	<input type="checkbox"/>	August	<input type="checkbox"/>	December	<input type="checkbox"/>

In case you wish to operate both on Tuesdays and Saturdays, mark both.

Herdsman:

(Products coming directly from the livestock sectors)

Herdsman Full-time

Herdsman Part-time

Farm registration number:

Enter the list of products you want to sell from the Farmers Market:

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Cooperative/Organisation/Association/Representative Groups:

Registration number

Enter the list of products you want to sell from the Farmers Market:

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Producer:

Registration number

Enter the list of products you want to sell from the Farmers Market:

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Details of the substitute:

Name and surname

I.D number.....

Address

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Telephone..... *Mobile*

Details of Assistant:

Name.....

Name.....

Surname

Surname

I.D number.....

I.D number.....

Address

Address

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Name

Name

Surname

Surname

I.D number.....

I.D number.....

Address

Address

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Name

Name.....

Surname

Surname

I.D number.....

I.D number.....

Address

Address

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Name

Name

Surname

Surname

I.D number.....

I.D number.....

Address

Address

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Documents required on application for each category:

- Photocopy of ID card of applicant
- Photocopy of ID card of substitute
- Photocopy of ID card of assistants
- Police conduct Certificate of applicant (issued not more than one month before the call date).
- Food handling Certificate (known as Food handling) of applicant.
- Food handling Certificate (known as Food handling) of substitute.
- Food Management Certificate (known as Food handling) of assistants.
- VAT tax registration number
- Employment History from Jobsplus of applicant.
- Passport photo of applicant.
- Passport photo of Substitute.
- Passport photo of assistants.

Farmer:

- Copies of plans IACS.
- (If agricultural land is not registered in the applicant's name, an affidavit by a Notary Public is required).
- Organic farming registration Certificate (MCCAA)
 - Crop Plan

Herdsman:

- Farm registration certificate.

In the case of sales of other products such as:

Cheeselets:

- Approval of the dairy establishment by the Veterinary Regulation Directorate (VRD).

Eggs:

- Poultry keeping licence from the Veterinary Regulation Directorate (VRD).

Honey:

- Licence from the Veterinary Regulation Directorate (VRD).

Producer:

- Certificate of registration

Cooperative/Organisation/Association/Representative Groups:

- Registration certificate
- Foundation contract/Statute
- Details of Board Members
- Legal representative details
- Contact person details.

General Data Protection Regulation (GDPR):

The Agency shall process the personal data contained herein in accordance with applicable legislation, in particular Regulation [EU] 2016/679 ('GDPR'), as well as the Data Protection Act, among others.

If the applicant breaches these conditions, the Agency has the right to pass on any information contained to any third party legally entitled.

Declaration:

I, the undersigned, declare that the information provided is correct and valid, and I understand that I will be informed whether or not my application is accepted following an assessment by the Evaluation Board appointed by the Malta Food Agency in accordance with the call criteria and with Legislation L.S. 117.31 and its amendments. Where there are missing documents or an incomplete application, the Evaluation Board reserves the right to eliminate the application.

Any changes made to the information provided, the applicant shall inform the Agency immediately by coming personally to the Market Regulation office or contacting the officials responsible for guidance.

Applicant's Signature

Date

I.D Number.