

Register for a new account

First Name Last Name

eMail Selected Password

Business/Farm name Address

City County State Zip

Phone Business Web Site User Type

Returning vendors should already have an account, and can just create a password using the “Forgot password?” function.

You will use your email address to login, not your previous FMNP username.

New Vendors will create an account by clicking “Sign up”

Farmers Market Nutrition Program

Don't have an account? [Sign Up](#)

Enter your Password

[Forgot password?](#)

Send a password reset email

[Try to login again](#)

Reset your Password

Application for 2022

One user can apply for any number of FMNP entities if applicable

Market Application for Market Managers & Leads

"Authorized farmers' market" means a farmers' market site authorized by the department for the exchange of vouchers for eligible foods.

[See Rules](#)

[Market Assurance Statement](#)

Vendor or Farmstand Application

"Certified vendor" means an individual who has met all FMNP/SFMNP conditions as outlined by the department and who is guaranteed payment on all vouchers accepted, provided compliance is maintained by that individual regarding all FMNP/SFMNP rules and procedures as outlined in the [vendor certification handbook](#).

[See Rules](#)

[Vendor Application](#)

The above information is [part of your user profile](#). You can update this on your [User Profile Page](#)

Use the above profile information as my contact information on the public directory

Vendor Name [?](#)

Physical Address (if different)

Farmer 1

502 E 9th St

City

State (only Iowa and bordering counties allowed)

Zip

Des Moines

IA

50319

FMNP Certification Number

Phone

8888

000-000-0000

Email

Cell Phone

farmer1@gmail.com

000-000-0000

Last year Trained

Next Year for Training

If needed, select **Training** location [?](#)

Training Webinar from Home 03/09/22

Markets you will attend

First Market

Name of Market

Day of Week for this market [?](#)

Hometown Market

Sunday

Your start date at this market

Your end date at this market

05/01/2022



10/01/2022



Add another market I will attend

Complete all required fields. Some may be prefilled.

If you intend to accept FMNP checks at multiple markets, click “Add another market [...]”

Please answer all of the following questions

I am at least 18 years of age, reside and grow produce in Iowa or a county adjacent to Iowa.

What percentage of the total fresh fruits, vegetables and/or herbs that you take to each market do you personally grow?

I have a moveable or permanent farmstand I would like to authorize aside for this market vendor application. [?](#)

No officers or owners of this operation have had a conviction or civil judgment related to business integrity entered against them in the last six years

No Food Assistance disqualification or civil monetary penalty imposed within the last 12 months of the date of the application

How many FMNP vendor sign stickers are you requesting (one per sign)?

By checking this checkbox and typing my name, this vendor application and vendor/department agreement shall be binding between the vendor and the Iowa Department of Agriculture and Land Stewardship through the end of the year signed.

Farmer Smith

Scroll down and review the questions.

If you are requesting authorization for a farmstand, check the second box.

Finally, type your name into the signature box, check the last box, and click "sign and submit".

You will be notified if you have missed any required questions.

Farmers Market Nutrition Program

Application has been submitted

Vendor Application

Name	Business	email	Address	City/State/Zip	Phone	Web
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If your application was successfully submitted, you will see a green notification at the top of the screen. If you requested a farmstand you will be redirected to a Farmstand application.