



KAUAI GROWN APPLICATION

When applying for the Kauai Grown Program, please complete each section as it applies to your category or categories of business. When you have completed the application, please sign and send it to the following:

**Kauai County Farm Bureau
Attn: Kauai Grown Program
P.O. Box 3895
Lihue, HI 96766-6895**

An inspection may be scheduled to verify your information and/or additional information may be requested as part of the review process. Thereafter, you will be notified of your acceptance or non-acceptance into the Program. If you have any questions or concerns, please e-mail the Kauai County Farm Bureau/Kauai Grown Program at info@kauaigrown.org.

This application is for the following categories of businesses:

1. **Kauai Growers** - Farmers, Ranchers, Nursery Owners, etc.
2. **Value-added Manufacturers** using at least 50% of Kauai grown ingredients/products
3. **Retailers** selling and/or featuring Kauai Grown products
4. **Restaurants/Chefs** using Kauai Grown products as ingredients on their menu

BASIC INFORMATION (This section must be completed by all applicants.)

Name of Business:			
Contact: (Please Print)		Relation to Business:	
Mailing Address:	City:	State:	Zip:
Physical Address:	City:	State:	Zip:
Bus Phone:	Cell Phone:	Fax:	
E-mail:		Website:	
Type of Business:		Name of Liability Insurance: (Minimum \$1 M or more) (Please attach)	

PARTICIPANT CATEGORIES (Complete all categories that apply to your business)

A – Kauai Grower	B – Value-added Manufacturer	C - Retailer	D – Restaurant/Chef
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Category A – Kauai Grower (Attach additional information, if necessary)

Physical location of production lands:		
Describe Kauai Grown Product(s) (check if annual or seasonal production)	Annual:	Seasonal:
1)		
2)		
3)		
4)		
5)		

Point of Sale: (Describe where and when product(s) is/are sold)	
Farm:	Wholesale:
Farmer's Market:	Retail Outlet(s):
Restaurant/Caterer:	Coops:
Others:	

Category B – Value-added Manufacturer (Attach additional information, if necessary)

If you grow your own products on Kauai to make your value-added products complete Category A

Describe Value-added Product(s)	% Kauai Grown	Kauai Grown Source(s)	Other Source(s)
1)			
2)			
3)			
4)			
5)			
6)			

Location of manufacturing plant:	Location of certified kitchen:
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Point of Sale: (Describe where and when product(s) is/are sold)	
Farm:	Wholesale:
Farmer's Market:	Retail Outlet(s):
Restaurant/Caterer:	Coops:
Others:	

Category C - Retailer (Attach additional information, if necessary)

Product(s):	Name of Retail Outlet(s):	Location of Outlet(s):	Farmer(s)/Producer(s):
1)			
2)			
3)			
4)			
5)			
6)			

Category D – Restaurant/Caterer (Attach additional information, if necessary)

Product(s) Used:	Name of Restaurant/Caterer:	Location of :Restaurant/Caterer:	Farmer/Producer:
1)			
2)			
3)			
4)			
5)			
6)			

Additional Information (Please provide this information as it will be published on the website and used in other media.)

Please provide a brief description of your business (not more than 50 word(s):

Describe your preferred method to contact your business:

Kauai Grown Program Promotional Materials

Quantity	Type	Quantity to Order	Cost/Item	Amount Ordered
2 rolls (Free)	Kauai Grown Labels (500 per roll) (Part of program benefit)		\$7.50 /	
1,000 (Free)	Kauai Grown Label – digital labels (Substitute for free labels)		TBD	
1 banner (Free)	Kauai Grown Banner (2' X 3' or 1' X 4') (Part of program benefit)		\$45.00 / (approx)	
1 Table Runner	Kauai Grown Table Runner (Free if not opting for 1 banner)			
1 sheet (Free)	Information Sheet (8 ½:" X 11") (Part of program benefit)			
	Retail Producer Cards		TBD	
	Retail Shelf Talkers		TBD	
1 Web page (Free)	Web page on the Kauai Grown website (Part of program benefit)			
Provided (Free)	Directory member listing			
As needed (Free)	PR and Advertisement (Part of program benefit)			
	Participation in Kauai Grown sponsored events (Country Store, Garden Fair, Holiday Fair)			
	Custom Kauai Grown Banner		TBD	
	Custom information cards		TBD	

Please enclose/attach your annual dues with the Kauai Grown Program application for a new membership and/or membership renewal. (For 2015 renewals, this is a one-time reapplication due to the changes in the Program.)

For Kauai Growers - \$50.00/annual fee

For Value-added Manufacturers, Retailers, Restaurants/Caterers - \$75.00/annual fee

Kauai Grown Agreement

The goals and objectives of the Kauai Grown Program as administered by the Kauai County Farm Bureau are 1) to clearly identify Kauai Grown produce/products to the consumer, 2) to promote the benefits of purchasing and using the freshest quality produce/products grown on Kauai, 3) to provide the Kauai Grown members with the means to sustain their business models, and 4) to ensure that the Kauai grown produce/products meet all Federal, State, County health and safety rules and requirements for consumer consumption.

To meet these objectives, as a member of the Kauai Grown Program, the Applicant agrees to the following:

For Participating Local Growers:

- 1) Guarantee that products for sale meet County, State, and Federal health and safety rules, regulations, ordinances, and/or laws as they relate to human consumption or usage. All clearances/certificates issued or required by the fore mentioned agencies shall be available for inspection at the time of sales.
- 2) Products for sale shall be cleaned, washed and ready for human consumption.
- 3) All products for sale meet minimal grade requirements such as free from bruising, decay, rot spots, soft spots, mechanical damage, etc.
- 4) All guidelines have been followed regarding the use of fertilizers, pesticides, or other herbicides to assure food safety for the consumer.
- 5) Only produce/products grown on Kauai and approved under the application shall use the Kauai Grown label.
- 6) Products labeled as "organic" shall have the appropriate certification.

For Value-added Manufacturers:

- 1) Guarantee the quality of the product as meeting County, State, and Federal health and safety rules, regulations, ordinances, and/or laws as they relate to human consumption or usage. All clearances/certificates issued or required by the fore mentioned agencies shall be available for inspection at the time of sales.
- 2) All ingredients are clearly identified on the product(s).
- 3) Utilize at least 50% or more of Kauai Grown produce/products as specified under this application.
- 4) Products are made in a commercial kitchen or in a facility following and approved under the Department of Health (DOH) requirements.
- 5) Use of the Kauai Grown label on only approved items under under this agreement between the Applicant and the Kauai Grown Program.

For Retailers/Retail Outlets:

- 1) Provide a dedicated section or shelf space for Kauai Grown produce/products.
- 2) Only properly labeled Kauai Grown products be displayed in designated sections.
- 3) Promote cooperation between retailers and the Kauai Grown producers.

For Restaurants/Chefs:

- 1) Promote the usage of Kauai Grown labeled produce/products at their place of business.
- 2) Use Kauai Grown product items as much as possible.
- 3) Promote cooperation with Kauai Grown producers to meet supply issues.

The Applicant understands and shall provide the most accurate information on this application. The Applicant shall immediately provide to the Kauai Grown Program any changes to the agreement. The Applicant agrees to abide by the "Kauai Grown Program" guidelines, and any and all procedures implemented by the Kauai Grown Program which is herein incorporated by reference.

The Applicant understands and agrees that the Kauai County Farm Bureau/Kauai Grown Program has the right to terminate this signed agreement and be held harmless, if for any reason the Applicant has not provided accurate information on the application; does not follow "Kauai Grown Program" guidelines; cause harm, injury or damage due to the Applicant's improper or inappropriate conduct as a member of the Kauai County Farm Bureau and/or Kauai Grown Program; or fails to comply with any and all County, State of Hawaii and Federal rules, regulations, ordinances or laws relating to the health and safety of consumers.

Under this agreement the Kauai County Farm Bureau and the Kauai Grown Program assumes no risks. The Applicant by acceptance under this agreement agrees to release all of the Kauai County Farm Bureau and the Kauai Grown Program members of any and all liabilities, damages, injury or loss to any person(s) or property(ies) which may arise from the actions, inaction or activities of the Applicant under this agreement.

_____ Date: _____
Signature of authorized representative

Print name of authorized representative

(For the Kauai Grown Program use only)

Date Application received: _____

Committee Review Date: _____

Status of Review:

Date of Status Notice: _____

Annual Fee Received: Chk #: _____ **Chk Amount:** _____ **Chk Date:** _____

Comments: