

**GROWER AGREEMENT  
WOMEN, INFANTS AND CHILDREN  
FARMERS MARKET NUTRITION PROGRAM (WIC FMNP) AND  
SENIOR FARMERS MARKET NUTRITION PROGRAM (SFMNP)**

1. THIS AGREEMENT, entered into by and between the Washington State **DEPARTMENT OF HEALTH**, referred to as “**DOH**” and the owner listed below, referred to as the “**Grower**”.

Farm Name: \_\_\_\_\_

Owner's Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Email: \_\_\_\_\_ Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

2. **Period of Performance: June 1, 2009 through November 15, 2009.** Either the Grower or DOH may terminate this agreement as described below. DOH has no obligation to renew this agreement with the Grower. This agreement is not valid until DOH receives a signed copy from the Grower.

**IT IS, THEREFORE, MUTUALLY AGREED THAT:**

3. **DOH shall:**

- a. Assure payment to participating Growers for properly redeemed WIC FMNP checks (administered by DOH in accordance with 7 CFR 248).
- b. Coordinate with the Department of Social and Health Services (DSHS) to assure DSHS provides payment to participating Growers for properly redeemed SFMNP checks (which is administered by DSHS).
- c. Train the farmers market manager on FMNP requirements.
- d. Provide technical assistance on the WIC/FMNP to participating Growers who call the WIC program at 1-800-841-1410. Direct Growers to contact DSHS at 1-800-422-3263 for technical assistance with the SFMNP.
- e. Monitor participating Growers to make sure they follow FMNP program rules.
- f. Sanction participating Growers for violating program requirements.

4. **The Grower agrees to:**

- a. Participate in the WIC FMNP and Senior FMNP.
- b. Grow a portion of produce sold at authorized FMNP markets.
- c. Follow WIC FMNP rules in this agreement and in 7 CFR 248, WAC 246-780.
- d. Obtain training from the market manager on WIC FMNP/SFMNP procedures.
- e. Train all persons working in the Grower's stall using the information in the DOH Grower Packet.
- f. Be held accountable for the actions of any person working in the Grower's stall in providing food, services and related activities.
- g. Accept WIC FMNP/SFMNP checks only for eligible, locally grown, unprocessed (except for washing) fresh fruits, vegetables and cut herbs.
- h. Accept checks only at WIC FMNP/SFMNP authorized farmers' markets.

- i. Display the “WIC/Senior Farmers Market Checks Welcome Here” sign each market day in a place where WIC clients and seniors can see it.
  - j. Provide WIC FMNP/SFMNP customers with the full amount of product for the value of each check.
  - k. Not give cash back on purchases for an amount less than the value of the WIC FMNP/SFMNP check(s).
  - l. Not charge sales tax on WIC FMNP/SFMNP purchases.
  - m. Accept WIC FMNP/SFMNP checks only within the valid program dates of June 1st through October 31st.
  - n. Cash all WIC FMNP/SFMNP checks by November 15<sup>th</sup>. (Growers are encouraged to cash checks weekly.)
  - o. Assure all WIC FMNP/SFMNP checks are stamped with the farmers market number where the checks were accepted and Grower ID number before cashing or depositing at any bank.
  - p. Sell produce to WIC FMNP/SFMNP customers that is the same quality and the same price or less than what is sold to other customers.
  - q. Treat WIC FMNP/SFMNP customers with the same courtesies as other customers and comply with applicable state and federal regulations pertaining to Civil Rights and Non-discrimination (Chapter 49.60 RCW; 42 USC, section 12101 et seq.).
  - r. Reimburse the DOH or DSHS for any WIC FMNP/SFMNP checks transacted in violation of this agreement.
  - s. Cooperate with staff representing DOH or DSHS in monitoring for compliance with program requirements and provide information that DOH or DSHS may require.
  - t. Not seek payment from WIC FMNP/SFMNP customers for checks not paid by DOH or DSHS.
  - u. Not use WIC FMNP/SFMNP checks to buy foods from other growers, pay market fees, or other business costs.
  - v. Notify DOH if Grower is no longer in business before the end of November 15<sup>th</sup>.
5. **Disqualification/Sanctions:** The Grower may be subject to sanctions for any FMNP abuse or violation of program requirements. A Grower who commits fraud or abuse is liable for prosecution under applicable federal, state or local laws.
6. **Notification of Action:** When DOH denies an application to participate in the WIC FMNP/SFMNP, the denial shall be in writing. The notice shall state the basis for denial. When DOH proposes to take an adverse action against the Grower with whom the DOH has an agreement, DOH shall give the respective Grower a written notice. The notice shall: (1) State the cause for the action; (2) State the effective date of the action; (3) State the procedure for requesting an appeal; and (4) Be provided to the Grower not less than fifteen (15) calendar days in advance of the effective date of the action.
7. **Appeal:** When the action being appealed is a disqualification, the Grower shall cease accepting and redeeming WIC FMNP/SFMNP check(s) effective on the date specified in the notice. Payments shall not be made for any WIC FMNP/SFMNP checks redeemed by the Grower during a period of disqualification.
8. **Termination:** Any party listed in the agreement may terminate this agreement by providing a thirty (30) day advance written notification.

IN WITNESS WHEREOF, the undersigned have affixed their signatures in execution thereof:

\_\_\_\_\_ Date

Grower’s Signature

\_\_\_\_\_ Date

Department of Health Signature

The Washington State Attorney General has approved this agreement, as to form.