



Arizona Farmers Market Nutrition Program (AZFMNP) Crop Plan

Grower Name: _____ Farm Name: _____ Stamp #: _____

Current Phone Number: _____

- Please list the street address where you will be growing produce in “Location A” below. If you grow produce in a second location, please identify that street address in “Location B” below. Use the
- “Location” column to list the corresponding location (A, B, or A/B) for each crop. **Print clearly and legibly.**
- List your specific produce crop (for example: watermelon, cantaloupe, and honeydew instead of melons).
- Use the “Approximate Amount” column to indicate the approximate amount of produce you plan to harvest this Farmers’ Market season. Amounts may be listed in acres, feet, rows, number of trees, square feet, etc.
- For existing trees and other crops that were planted before this cycle, fill in at least the year planted for the approximate plant date.
- AZFMNP eligible foods include only Arizona-grown, fresh fruits and vegetables grown by an FMNP Approved Grower. Do **NOT** include items on this form that you sell that are **NOT FMNP eligible**, such as Nuts (any kind), dry beans, honey, eggs, etc.

Location A Street Address: _____

Location B Street Address: _____

FMNP Approved Fruit or Vegetable Crop	Location (A or B)	Approximate Plant Date	Approximate Harvest Date	Approximate Amount

_____ **Grower Signature**

_____ **Date**

