

CROP PLAN

Prescott Farmers Market

Farm Name: _____

Date of Submission: _____

Physical Address(es): _____

Location A _____

Location B _____

Location C _____

Crop:	Location:	Planting Date:	Harvest Date:	Number of Rows *Add approx. row length in ft
Ex: Sun Gold Tomatoes	A / B	March	Jun-Oct	2 rows *80ft

Crop:	Location:	Planting Date:	Harvest Date:	Number of Rows *Add approx. row length in ft

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