

Alabama WIC Vendor Renewal Application Packet



**ALABAMA DEPARTMENT OF PUBLIC HEALTH
BUREAU OF FAMILY HEALTH SERVICES
DIVISION OF WIC**



VENDOR CRITERIA FOR PARTICIPATION in the ALABAMA WIC PROGRAM

The following criteria for participation must be met to become an authorized Alabama WIC Vendor. Vendor applicants and authorized vendors shall comply with the criteria for participation at all times.

1. **Square Footage of Retail Space** – The store must have a minimum of 3,000 square feet of continuous retail space exclusively devoted to food sales. Square footage areas that are not continuous retail food sales areas open to the public and are used for other purposes that are irrelevant to the purpose of the Alabama WIC Program will not be considered as part of the minimum square footage requirement. Retail space does not include office space, storage areas, or restrooms.
2. **Retail Grocery Requirements** – The store must be a business whose primary purpose is to be a retail grocer. Retail grocery does not include the following: gas stations, specialty stores, liquor stores, home delivery groceries, bait shops, etc. All vendors must have a recognized grocery department in a stationary location that is a separate and distinct area. The store, on any given day of operation, shall offer for sale and normally display a variety of different types of staple foods in addition to the Alabama WIC Program approved foods. The store must be open for business to customers at least eight hours per day and six days per week.
3. **Food Sales** – At least 60 percent of a vendor's total sales must be in staple foods with the exception of vendors whose square footage exceeds 10,000 square feet. This requirement allows a WIC participant to purchase a variety of foods for home preparation and consumption and as recommended by the United States Department of Agriculture (USDA) MyPlate dietary guidance.

Staple food groups include meat, poultry, fish, breads, cereal, vegetables, fruit, and dairy products. A portion of the vendor's total staple foods must include perishable foods that are either frozen staple food items; or fresh, un-refrigerated or refrigerated staple food items that will spoil or suffer significant deterioration in quality within two to three weeks.

Staple foods **do not** include accessory foods such as coffee, tea, cocoa, soda, non-carbonated drinks such as sports drinks, punches, and flavored waters, candy, chips, condiments, spices, hot foods, or foods ready to go or made to take out, like prepared sandwiches or salads.

4. **Health Department Food Permit** – The store must have a current Health Department Food Permit issued by the Alabama Department of Public Health or a state inspection certificate, as approved by the Alabama WIC Program.
5. **Minimum Stock of WIC Approved Foods** – The store must have and maintain the minimum required stock of WIC approved foods. (See Minimum Inventory Requirements Sheet) Items outside the manufacturer's expiration date will not be counted as part of the minimum required stock. Vendors cannot use another store's brand items as part of the minimum stock requirements.

6. **Competitive Prices** – The store's prices for WIC approved foods must be competitive with other stores of similar size in the state. These prices shall not exceed the maximum price as set by the Department.
7. **SNAP Authorization** – The store shall be an authorized USDA Supplemental Nutrition Assistance Program (SNAP) retailer.
8. **Disqualification from SNAP or WIC** – The owner, co-owner, corporate official, or manager must not currently be disqualified from SNAP or the WIC Program in any state and/or may not currently be paying a SNAP civil money penalty unless due to inadequate participant access.
9. **Business Integrity** – Unless it is necessary to ensure adequate participant access, the Alabama WIC Program will not authorize a vendor applicant if during the last six years, the vendor applicant or any of the vendor applicant's current owners, officers, or managers have been convicted of or have had a civil judgment entered against them for any activity indicating a lack of business integrity: Activities indicating a lack of business integrity include, but not limited to, fraud, antitrust violations, embezzlement, theft, forgery, bribery, falsification or destruction of records, making false statements, receiving stolen property, making false claims, or obstruction of justice.
10. **50 Percent Criterion** – Annual food sales revenue from the sale of food items derived from WIC transactions and/or the redemption of WIC food instruments must be less than 50 percent. If after authorization sales data indicates more than 50 percent of the store's food sales revenue is from the sale of food items derived from WIC transactions and/or the redemption of WIC food instruments, the vendor agreement will be immediately terminated, and the vendor disqualified from participating in the Alabama WIC Program.
11. **Infant Formula Supplier** – The vendor shall purchase formula solely from entities approved by the Department. The Department maintains a list of approved entities and it is available on the Department's website. The Department does not allow vendors to purchase contract infant formula from other WIC Program vendors.
12. **Electronic Benefits Transfer (EBT) Capability** - The WIC vendor demonstrates their cash register system or payment device can accurately and securely obtain WIC food balances associated with an EBT card, maintain the necessary files such as the Approved Product List (APL), and claim file and successfully complete WIC EBT purchases. EBT in the WIC Program is known as eWIC.

**ALABAMA WIC PROGRAM
MINIMUM INVENTORY REQUIREMENTS
EFFECTIVE JANUARY 01, 2026 – SEPTEMBER 30, 2026**

Note: Minimum stock criteria may be verified by invoices if product shortage exists.

FOOD ITEM	DETAILS	MINIMUM REQUIREMENTS	
	The Alabama WIC Approved Food Brochure contains more detailed information for each food category. AL WIC supplies Food Brochures upon request.	Store Type 1 – 3 3+ registers	Store Type 4 1 - 2 registers
INFANT FORMULA Enfamil Infant (Milk Based)	12.5 oz. Powder	18 Cans	12 Cans
Enfamil Gentlelease	12.4 oz. Powder	12 Cans	6 Cans
Enfamil AR	12.9 oz. Powder	6 Cans	6 Cans
Enfamil ProSobee (Soy Based)	12.9 oz. Powder	6 Cans	Must supply upon request.
DRY INFANT CEREAL	8 oz. Container; Gerber or Earth's Best Organic Rice, Whole Wheat, Oatmeal, Gluten Free, Organic, or Multigrain. Not allowed: Cereal with Fruit or other additives, DHA, Probiotic or cereal puffs.	10 Containers - 2 varieties	6 Containers
INFANT FRUITS & VEGETABLES	Any 1st and 2nd stage fruits and vegetables of these sizes, container sizes, and brands: Beech-Nut 4 oz. jar: Classics, Naturals, and Organics. Gerber 2 oz. 2-packs, 4 oz. 2-packs, and 4 oz. jars (including Organic). Happy Baby: 4 oz. jars and 3.5 oz. – 4 oz. pouches Plum Organics: 3.5 oz. – 4 oz. pouches Earth's Best: 3.5 oz. pouches	64 Containers. May be any combination of approved products and flavors.	32 Containers. May be any combination of approved products and flavors.
MILK, Whole	Whole Milk including Lactose Free / Lactose Reduced Not allowed: 2% milk, buttermilk, Chocolate or flavored milk, acidophilus treated, condensed, chocolate drink, or organic.	4 Gallons	2 Gallons
MILK, Fat Free or 1% Low Fat	Fat Free or 1% Low Fat including Lactose Free / Lactose Reduced / Calcium Enriched Not allowed: 2% milk, buttermilk, Chocolate or flavored milk, acidophilus treated, condensed, chocolate drink, or organic.	10 Gallons	4 Gallons
YOGURT, Whole milk, Low Fat or Non-Fat (including Greek)	16 oz. (1 lb.) or 32 oz. (2 lb.) Packages See the Alabama WIC Approved Foods Brochure for the approved products, flavors, and combinations allowed.	12 Containers. May be any combination of approved products and flavors.	Must supply upon request.
EGGS	Any size white eggs (small - jumbo) in 6 count, 12 count, or 18 count cartons. Not allowed: brown, hard boiled, organic, specialty eggs such as cage free, grain fed hen, omega 3, or low cholesterol.	6 Dozen	4 Dozen

***See Alabama WIC Approved Foods Brochure for Additional Details and Pictures**

**ALABAMA WIC PROGRAM
MINIMUM INVENTORY REQUIREMENTS
EFFECTIVE JANUARY 01, 2026 – SEPTEMBER 30, 2026**

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FOOD ITEM	DETAILS	MINIMUM REQUIREMENTS	
	The Alabama WIC Approved Food Brochure contains more detailed information for each food category. AL WIC supplies Food Brochures upon request.	Store Type 1 – 3 3+ registers	Store Type 4 1 - 2 registers
CHEESE Least Expensive Brand	8 oz. or 16 oz. Package. Domestic only. Block, sliced, mozzarella string, or shredded of the following varieties: Cheddar, Colby, Monterey Jack, Mozzarella, Muenster, Processed American, Provolone, and Swiss. Any combination of the approved types. Not allowed: cheese food, spread, product, imitation, cubes, sticks, crumbles, cheese from deli, peppers, cream cheese or other added ingredients.	12 Packages. May be any combination of approved products.	6 Packages. May be any combination of approved products.
FISH	Any size container of Light Tuna or Pink Salmon packed in water. Includes foil pouches. Not allowed: Packed in oil. White, albacore or yellow fin tuna. Sockeye or red salmon. Fresh or frozen fish. Lunch packs, kits or tuna salad.	30 Containers. May be any combination of approved products.	15 Containers. May be any combination of approved products.
64 oz. or 128 oz. JUICE	All brands must be 100% juice and must have 72 mg (80%) Vitamin C per 8 fl. oz. or 120% Vitamin C (when mg not listed on the label). See the Alabama WIC Approved Foods Brochure for the approved products and flavors.	10 - 64 oz. Containers or equivalent.	8 – 64 oz. Containers or equivalent.
CEREAL 8.9 to 36 oz. Boxes or Bags only.	See the Alabama WIC Approved Foods Brochure for approved cereals and whole grain classification.	18 Boxes. Must stock 6 different varieties and 4 of the varieties must be whole grain.	9 Boxes. Must stock 3 different varieties and 2 of the varieties must be whole grain.

***See Alabama WIC Approved Foods Brochure for Additional Details and Pictures**

**ALABAMA WIC PROGRAM
MINIMUM INVENTORY REQUIREMENTS
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Note: Minimum stock criteria may be verified by invoices if product shortage exists.

FOOD ITEM	DETAILS	MINIMUM REQUIREMENTS	
	The Alabama WIC Approved Food Brochure contains more detailed information for each food category. AL WIC supplies Food Brochures upon request.	Store Type 1 – 3 3+ registers	Store Type 4 1 - 2 registers
PEANUT BUTTER OR NUT/SEED BUTTER	16 – 18 oz. Container. Any brand. May be chunky, creamy, crunchy, or low sodium. Wowbutter and Sunbutter are the only approved Nut/Seed butter brands. Not allowed: whipped, spreads, omega 3, reduced fat, organic, combinations with jelly, honey, etc.	8 Containers	6 Containers
WHOLE GRAIN CHOICES	12-24 oz. Package. All 100% Whole Wheat and 100% Whole Grain Breads are allowed. Specific brands and types of whole wheat and corn tortillas. See the Alabama WIC Approved Foods Brochure for details. Whole Wheat/Whole Grain pasta – any package size/any brand. Brown Rice – any package size/any brand. Oatmeal – Quick-cooking, rolled, old fashioned, steel-cut; any package size, canisters, boxes, or bags.	12 Packages. Must stock 3 different varieties of whole grain choices.	6 Packages. Must stock 2 different varieties of whole grain choices.
FRESH OR FROZEN FRUITS AND VEGETABLES	See Alabama WIC Approved Foods Brochure for information on approved fresh and frozen fruits and vegetables.	Must stock 4 varieties of fresh or frozen fruits and 4 varieties of fresh or frozen vegetables.	Must stock 3 varieties of fresh or frozen fruits and 3 varieties of fresh or frozen vegetables.

***See Alabama WIC Approved Foods Brochure for Additional Details and Pictures**

**ALABAMA WIC PROGRAM
MINIMUM INVENTORY REQUIREMENTS**

The items listed below are not part of the required minimum stock; however, as an Alabama authorized WIC vendor, if a customer requests an item below, you are required to supply the item(s) upon request.

FOOD ITEM	DETAILS	
ENFAMIL REGULINE	12.4 oz. Powder	SUPPLY UPON REQUEST
INFANT MEAT	2.5 oz. Container; Gerber or Beech-Nut plain meat with broth or gravy. Not allowed: meat sticks, pouches with meats.	SUPPLY UPON REQUEST
SPECIAL MILK	Soy Milk or Plant-Based Milk Alternatives: half gallon or 96 oz. Lactose free: half gallons or 96 oz. Whole Milk: 1 quart. Evaporated (Canned Milk): 12 oz. Can. Carnation and Pet brands only. Dry Milk (Powdered): 9.6 oz., 25.6 oz., or 39.5 oz. container. Ultra High Temperature: 32 oz. container. See the Alabama WIC Approved Foods Brochure for approved brands. Not allowed: buttermilk, flavored, acidophilus treated, condensed, organic, chocolate drink, and 2% milk.	SUPPLY UPON REQUEST
CANNED PEAS OR BEANS	15 -16 oz. Canned peas/beans. Any brand and must be a mature legume. See the Alabama WIC Approved Foods Brochure for approved legumes. Not allowed: vegetables, organic, added fats, meats, seasonings, oils, sauces, or creamed style.	SUPPLY UPON REQUEST
DRY PEAS OR BEANS	16 oz. Bag. Any brand. Not allowed: added flavorings or organic.	SUPPLY UPON REQUEST

***See Alabama WIC Approved Foods Brochure for Additional Details and Pictures**



ALABAMA DEPARTMENT OF PUBLIC HEALTH WIC VENDOR RENEWAL APPLICATION

Return Completed Applications to: Alabama Department of Public Health Bureau of Family Health Services WIC Division, Suite 1300 The RSA Tower P. O. Box 303017 Montgomery, AL 36130-3017		FOR WIC USE ONLY <table border="1"><tr><td>Reviewed</td><td>Date</td><td>Initial</td></tr><tr><td>Store Inspection</td><td colspan="2"></td></tr><tr><td>Store Type</td><td colspan="2"></td></tr><tr><td>% of Staple Foods</td><td colspan="2"></td></tr></table> Hardship (circle) YES / NO		Reviewed	Date	Initial	Store Inspection			Store Type			% of Staple Foods		
Reviewed	Date	Initial													
Store Inspection															
Store Type															
% of Staple Foods															
Note: A vendor application must be completed for <u>each</u> store owned, including each entity of a chain operation. Only <u>complete</u> applications will be processed.															
STORE INFORMATION															
1. Store Name:		WIC Vendor Number: _____													
		Cost Plus Store: Yes <input type="checkbox"/> No <input type="checkbox"/>													
2. Physical Location of Store:															
City:	State:	Zip:	County:												
3. Mailing Address (if different from physical location):															
City:	State:	Zip:													
4. Store Phone Number: () -		Store Fax Number: () -													
Email Address:															
LICENSING INFORMATION															
HAS ANY OF YOUR LICENSING INFORMATION CHANGED SINCE YOUR LAST APPLICATION? IF NO, GO TO THE OWNERSHIP INFORMATION SECTION. IF YES, COMPLETE THE SECTION BELOW.															
5. Federal Tax Identification Number: _____															
6. SNAP Authorization Number: _____															
7. Alabama Department of Public Health Food Permit Number: _____															
OWNERSHIP INFORMATION															
HAVE THERE BEEN ANY CHANGES IN OWNERSHIP SINCE YOUR LAST APPLICATION? IF NO, GO TO THE BUSINESS INTEGRITY INFORMATION SECTION. IF YES, COMPLETE THE SECTION BELOW.															
8. Select the legal structure of this business from the selections below: The name of the corporation or LLC must be included, or the Application will not be Processed.															
<input type="checkbox"/> Corporation Name: _____															
<input type="checkbox"/> Individual (Sole Proprietorship): _____															
<input type="checkbox"/> Limited Liability Company (LLC) Name: _____															
<input type="checkbox"/> Partnership: _____															



ALABAMA DEPARTMENT OF PUBLIC HEALTH WIC VENDOR RENEWAL APPLICATION

9. List the name(s) of the owner(s), partner(s), or corporate officer(s) of the store named in this Alabama WIC Vendor application along with percentage of ownership (**Percentage of ownership must equal 100%**): (Attach Additional Sheets if Necessary)

Name:	Title:		
Address:	Email:		
City:	State:	Zip:	Phone: (Work) _____ (Cell) _____

Percentage of Ownership: _____

Name:	Title:		
Address:	Email:		
City:	State:	Zip:	Phone: (Work) _____ (Cell) _____

Percentage of Ownership: _____ **Total Percentage of Ownership:** _____

10. List other stores in which the owner(s) have ownership or interest. Note if the stores are currently authorized to accept WIC food instruments in any state. (Attach Additional Sheets if Necessary)

Store Name:	Location (including state):	WIC Authorized (Y/N)
Store Name:	Location (including state):	WIC Authorized (Y/N)
Store Name:	Location (including state):	WIC Authorized (Y/N)

BUSINESS INTEGRITY

11. Has any current owner or officer been disqualified or assessed civil money penalties from SNAP in any state? Yes No If yes, provide the dates and state:

From _____ To _____ State: _____

12. Has any current owner or officer been disqualified from any WIC program? Yes No If yes, provide the dates and state: From _____ To _____ State: _____

13. During the last six years, have you (the applicant) or any of your current owners, officers, agents, or managers been convicted of or had a civil judgment entered against them for any activity indicating a lack of business integrity? Yes No (If yes, name and title): _____

If yes, provide the dates and state: From _____ To _____ State: _____

14. List the name of the person with primary on-site responsibility for daily operations:

Name: _____ Title: _____ Contact Number: _____
E-Mail Address: _____

15. Provide primary contact person's name, number, and email address for WIC issues, if different than above:

Name: _____ Title: _____ Contact Number: _____
E-Mail Address: _____



ALABAMA DEPARTMENT OF PUBLIC HEALTH WIC VENDOR RENEWAL APPLICATION

STORE OPERATIONS

16. Square Feet of Retail Space: _____

17. Number of manned cash registers: _____ Number of self-checkout registers: _____
Total of cash registers: _____

18. Do the registers have scanners? Yes No

19. If YES, do the scanners identify WIC foods? Yes No

20. Is your Point of Sale (POS) system programmed to accept all forms of payment including eWIC, SNAP, debit, credit, and cash? Yes _____ No _____
If **yes**, answer questions 21 and 22. If **no**, move to question 23.

Note: If you answered "No" on question number 20, go to question number 23.

21. What is the name of the POS provider (The company that maintains your system)? _____
Name of person who is your Point of Contact for your POS provider: _____
Phone number for your POS provider (including area code): _____

22. Is your POS system eWIC certified in Alabama? Yes _____ No _____

23. Provide source of internet connection (dial-up, DSL, cable, fiber, satellite, high speed): _____
Do you have a three-prong power outlet and analog telephone line or digit/cable internet service with a jack within 5 feet of where the register/current POS terminal is installed? Yes _____ No _____

24. Days and hours of store operation:

DAY	FROM	TO	CHECK (✓) IF OPEN 24 HOURS
Monday	A.M.	P.M.	
Tuesday	A.M.	P.M.	
Wednesday	A.M.	P.M.	
Thursday	A.M.	P.M.	
Friday	A.M.	P.M.	
Saturday	A.M.	P.M.	
Sunday	A.M.	P.M.	

25. Provide Name and Address of Primary Source of Formula.

Name: _____ Address: _____

26. Provide Name and Address of Primary Food Wholesaler(s) or Distributor(s) Where WIC Foods Are Purchased.

Name: _____ Address: _____



ALABAMA DEPARTMENT OF PUBLIC HEALTH WIC VENDOR RENEWAL APPLICATION

SALES INFORMATION

27. Gross Total Sales Figures

CHECK APPROPRIATE BOX – GIVE YEARLY (NOT MONTHLY) AMOUNT: If giving estimated sales, multiply the monthly amount by 12. Please make sure your food sales and non-food sales equal your gross sales.

Estimated - New stores without a full year of actual sales.

Actual - Indicate tax year for the amount provided: _____

Food Sales \$ + **Non-Food Sales \$** = **Gross Sales \$**

Note: If store has less than 10,000 square feet of retail space, you must complete this question. If store has more than 10,000 square feet of retail space, go to question number 29.

28. Staple Food Sales

Staple foods **do not include** any prepared foods or accessory foods such as candy, condiments, spices, tea, coffee or carbonated and non-carbonated drinks. Staple foods **include, but are not limited to**, the following: Eggs, dairy products, bread, cereal, fresh fruits and vegetables, rice, pasta, fish, meat, and poultry.

CHECK APPROPRIATE BOX – GIVE YEARLY (NOT MONTHLY) AMOUNT: If giving estimated sales, multiply the monthly amount by 12.

Estimated - New stores without full year of actual sales.

Actual - Indicate tax year for the amount provided: _____

Staple Food Sales \$

29. Is it expected that more than 50% of your annual revenue from the sale of food items will be derived from the redemption of WIC food instruments? Yes No

Note: The Alabama WIC Program does not approve stores that anticipate more than 50% of annual revenue from the sale of food items derived from the redemption of eWIC food instruments. If the answer to question 29 is no, and it is determined after store approval that sales data indicates more than 50% of the store's revenue is derived from the redemption of eWIC food instruments, **the vendor agreement will be terminated.**

30. Do you currently own a WIC authorized store where the WIC sales are above 50 percent of the total annual food sales? Yes No

31. What is the estimated percent of annual food sales for the following types of payment?

Percentages must equal 100% (all numbers must be whole numbers; no decimals.)

WIC % SNAP (Food Stamps) %

Cash % Credit/Debit Cards %

32. Do you have inventory invoices available for food items purchased and currently stocked in your store?

Yes No

33. How many months of inventory invoices are available (0-72 months)? Months not Years

34. Does the store currently have the minimum stock requirement of WIC approved foods? (See Minimum Stock Requirement Sheet included with this application.)

Yes No



ALABAMA DEPARTMENT OF PUBLIC HEALTH WIC VENDOR RENEWAL APPLICATION

Certification and Acknowledgement

- This application is NOT a vendor agreement. Authorization will not be determined until all completed application materials have been received and evaluated by the Alabama WIC Program.
- Completion of this application does not imply or guarantee authorization to participate in the WIC Program or to process eWIC transactions.
- The Department will require reimbursement for any eWIC transactions processed by the Vendor prior to authorization, completion of required vendor training, and a valid vendor agreement.
- The store must meet and maintain Alabama WIC approved foods in the quantities and varieties as specified in the "Minimum Stock Requirements" enclosed in the application packet at pre-authorization and throughout the Alabama WIC Vendor Agreement period.
- Authorized WIC representatives will conduct a pre-authorization site visit and must be provided access to all areas of the store to verify information provided on the application and verify stocking requirements.
- Make available, upon request, all records pertinent to this application, including but is not limited to, records regarding sales, invoices and/or inventory as well as copies of income and sales tax related forms.
- Upon review of the information presented in the application and a preauthorization site visit, any applicant expected to derive more than 50 percent of their annual revenue from the sale of food items derived from WIC transactions will not be authorized to participate as an Alabama WIC Vendor.
- The Alabama WIC program may not authorize a vendor applicant that is currently disqualified from the SNAP program.
- Provide WIC approved supplemental food items at prices that are competitive with other stores of similar size in the State. These prices shall not exceed the maximum price as set by the Department.
- Upon authorization, a vendor representative will be required to attend a training session regarding WIC policies and procedures. The individual attending the training session will be required to subsequently train all store employees on WIC policies and procedures.

ANTI-DISCRIMINATION CLAUSE

Vendor will comply with Titles VI of the Civil Rights Act of 1964, Title IX of the Education Amendments of 1972, the Age Discrimination Act of 1975, Title II and Title III of the Americans with Disabilities Act (ADA) of 2022 as amended by the ADA Amendment Act of 2008, and all applicable Federal and State laws, rules and regulations implementing the foregoing statutes with respect to nondiscrimination on the basis of race, color, national origin, age, sex, or disability, as defined in the above laws and regulations. Sub-Recipient shall not discriminate against any otherwise qualified disabled applicant for, or recipient of aid, benefits, or services or any employee or person on the basis of physical or mental disability in accordance with Section 504 of the Rehabilitation Act of 1973 or the Americans With Disabilities Act of 2022.



ALABAMA DEPARTMENT OF PUBLIC HEALTH WIC VENDOR RENEWAL APPLICATION

By signing below, I certify that all statements in this application are true and correct and understand that false information provided to the WIC Program in connection with this application for authorization will result in denial of this application. I acknowledge understanding of all the information on this page and hereby attest that I am either the **Owner** or a **Corporate Officer**, and as such have the authority to contract on behalf of the vendor identified in this application.

SIGNATURE SECTION:

Name: (Print) _____ Title: (Print) _____

Only the **Owner** or a **Corporate Officer** can sign the application.

Signature: _____ Date: _____

Contact Phone Number: _____

This institution is an equal opportunity provider.