

LASSEN COUNTY ENVIRONMENTAL HEALTH DEPARTMENT

1445 Paul Bunyan Road, Susanville, CA 96130

Phone: (530) 251-8528 Fax: (530) 251-2668

CALIFORNIA HOMEMADE FOOD ACT REGISTRATION / PERMITTING FORM

CFO Business Name:		Date:
CFO Physical Address:	CFO City:	CFO ZIP:
Owner Name:	Owner Phone:	Owner Cell:
Mailing Address (if different):	Mailing City:	Mailing ZIP:
Email Address:		
Website:		

1. Categories:

"Class A" (Direct Sales Only)

"Class B" (Direct & Indirect Sales)

2. Prohibited Items:

Initial if you agree to abide by the following: _____

Foods containing **cream, custard, or meat fillings** are **potentially hazardous** and are **NOT ALLOWED**. Only foods that are defined as "non-potentially hazardous" are approved for preparation by a Cottage Food Operation (CFO). These are food items that do not require refrigeration to keep them safe from bacterial growth that could be a cause of food-borne illness.

3. "Class A" Self Certification Checklist:

Checklist completed ("Class A" CFOs Only)

4. Product Labeling: Initial if you agree to abide by the following: _____

For a detailed description, see the CDPH document "[Labeling Requirements for Cottage Food Products](#)." All cottage food products must be properly labeled in compliance with the Federal, Food, Drug, and Cosmetic Act (21 U.S.C. Sec. 343 et seq.) The label must include:

- The words "Made in a Home Kitchen" or "Repackaged in a Home Kitchen", whichever is applicable, in 12-point type
- The name commonly used to describe the food product
- The name, city, state and zip code of the cottage food operation which produced the cottage food product. If the firm is not listed in the current telephone directory then a street address must also be declared.
- The registration or permit number of the cottage food operation which produced the cottage food product and the name of the county where the registration or permit was issued.
- The ingredients of the food product, in descending order of predominance by weight, if the product contains two or more ingredients.
- The net quantity (count, weight, or volume) of the food product. It must be stated in both English (pound) units and metric units (grams).
- A declaration on the label in plain language if the food contains any of the eight major food allergens such as milk, eggs, fish, shellfish, tree nuts, wheat, peanuts, and soybeans. There are two approved methods prescribed by federal law for declaring the food sources of allergens in packaged foods: 1) in a separate summary statement immediately following or adjacent to the ingredient list, or 2) within the ingredient list.
- If the label makes approved nutrient content claims or health claims, the label must contain a "Nutrition Facts" statement on the information panel.
 - The use of the following eleven terms are considered nutrient content claims (nutritional value of a food): free, low, reduced, fewer, high, less, more, lean, extra lean, good source, and light. Specific requirements have been established for the use of these terms. Please refer to the [Cottage Food Labeling Guideline](#) for more details.
 - A health claim is a statement or message on the label that describes the relationship between a food component and a disease or health-related condition (e.g., sodium and hypertension, calcium and osteoporosis). Please refer to the [Cottage Food Labeling Guideline](#) for more details.
- Labels must be legible and in English (accurately translated information in another language may accompany it).
- Labels, wrappers, inks, adhesives, paper, and packaging materials that come into contact with the cottage food product by touching the product or penetrating the packaging must be food-grade (safe for food contact) and not contaminate the food.
- Labels should be **pre-approved by Lassen County Environmental Health before printing**. The Environmental Health Specialist reviewing the application will discuss label creation with you.

Example:

<p style="text-align: center;">MADE IN A HOME KITCHEN Permit #: 12345 Issued in county: County name</p> <p style="text-align: center;">Chocolate Chip Cookies With Walnuts Sally Baker 123 Cottage Food Lane Anywhere, CA 90XXX</p> <p>Ingredients: Enriched flour (Wheat flour, niacin, reduced iron, thiamine, mononitrate, riboflavin and folic acid), butter (milk, salt), chocolate chips (sugar, chocolate liquor, cocoa butter, butterfat (milk), walnuts, sugar, eggs, salt, artificial vanilla extract, baking soda.</p> <p>Contains: Wheat, eggs, milk, soy, walnuts</p> <p style="text-align: center;">Net Wt. 3 oz. (85.049g)</p>
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Note: For the "Issued in County" – Identify the jurisdiction (Lassen County) where you are obtaining approval.

5. Water Source:

Please identify the water source to be used in Cottage Food Facility (Check one box)

<input type="checkbox"/> Name of Public Water System or Community Services District:
<input type="checkbox"/> If you use a <u>Private Water Supply</u> (requires testing), identify the source (well, spring, other):
<p><u>Private Water Supply: Initial Water Quality Results</u> Check boxes below if initial water testing has been completed. All testing must be done at a State Certified Laboratory. Submit lab results with the application. <i>(Certain geographical areas may require additional testing. Contact Lassen County regarding requirements)</i></p>
<input type="checkbox"/> Bacteriological Test (every 6 months*): *Testing is ONLY required during months in operation. If bacterial test is positive, retesting and quarterly testing will be required until water no longer tests positive. High nitrate/nitrite level may require additional testing as well. Check only the boxes of dates in operation- if year round check both. <input type="checkbox"/> (Jan-June) <input type="checkbox"/> (July-December)
<input type="checkbox"/> Nitrate Test (once upon start up):
<input type="checkbox"/> Nitrite (once upon start up):

6. Disposal of Waste:

Please check what type of treatment is used to dispose of waste

Public Sewer Service

Private Septic System

- In the event of septic system failure or plumbing problem, you are required to notify the Lassen County Environmental Health immediately.

7. Food Processor Course: Initial if you agree to abide by the following: _____

Within 90 days of being approved to operate by the Environmental Health Division, please provide proof of completion of the required California Department of Public Health (CDPH) food processor course*. Proof of completion may be faxed to our Department at (530) 251-2668.

* See CDPH Website for more information: <http://www.cdph.ca.gov/programs/Pages/fdbCottageFood.aspx>

8. Employee: Initial if you agree to abide by the following: _____

I understand that I may not have more than one full-time equivalent cottage food employee, not including a family member or household member of the cottage food operator, working within the registered or permitted area of a private home where the cottage food operator resides and where cottage food products are prepared or packaged for direct, indirect, or direct and indirect sale to consumers.

9. Gross Annual Sales: Initial if you agree to abide by the following: _____

I understand that I will lose my CFO status and will need to become permitted in a commercial facility if my CFO business exceeds the following gross annual sales figures for the calendar years in the following table:

Calendar Year	Gross Annual Sales
In 2013.....	\$35,000
In 2014.....	\$45,000
In 2015 and in subsequent years.....	\$50,000

10. Delivery Limitations: Initial if you agree to abide by the following: _____

I understand that I may accept orders and payments via the internet, mail or phone. However, all "Class A" & "Class B" CFO products must be delivered directly (in person) to the customer. The CFO products may not be delivered via US Mail, UPS, FedEx or using any other indirect delivery method as this is regulated/subject to CDPH registration and state and federal requirements.

11. Owner's Statement:

I, _____, agree to grant access to the local health department to conduct an inspection of my cottage food operation (mark one):

- “Class A”:** In the event of a consumer complaint or reported food-borne illness
- “Class B”:** For regular annual facility inspections and in the event of a consumer complaint or food-borne illness

I, _____, agree to notify the Lassen County Environmental Health prior to modifying my food list, type of operation, and/or method of selling, distributing, or otherwise providing my CFO products to the consumer or retailers, regardless of whether the product is sold, consigned, or given away.

Owner's Signature *Print Name* *Date*

OFFICE USE ONLY
CFO # _____

Approved By: _____ Date: _____
 Environmental Health Specialist