



Application for a Cottage Food Permit

Business Name: _____

Name of Operator: _____

Mailing Address: _____
(Street) (City) (State) (Zip Code)

Address where food will be prepared: _____
(Street) (City) (State) (Zip Code)

Phone Number: _____ Email: _____

Certified Food Protection Manager

Name: _____

Certificate #: _____

Expiration date: _____

Specific list of items that will be prepared:

Allowable Products - Please circle or list all of the items you will be making and selling:
Dried Herb: _____
Dry herb blend: _____
Dry tea blend intended for end-use only: _____
Jam / Jelly / Preserves / Fruit Pie:
Apple Apricot Grape Peach Plum Quince Orange Nectarine Tangerine Blackberry Raspberry Blueberry Boysenberry
Cherry Cranberry Strawberry Red Currants
Combination of the above: _____
Fruit Butter: Apple Apricot Grape Peach Plum Quince Prune
Breads / Cookies / Cakes / Pastries:

Below is a list of items that are not allowed.

- Meat, poultry, fish, seafood, or shell fish;
Dairy, except as an ingredient in a non-potentially hazardous baked good* or candy, such as caramel
Eggs, except as an ingredient in a non-potentially hazardous baked good or in dry noodles;
Pumpkin pies, sweet potato pies, cheesecakes, custard pies, crème pies, and pastries with potentially hazardous fillings or toppings;
Garlic in oil or oil infused with garlic; except if the garlic oil is acidified (as with salad dressing).
Canned foods**, except the following, which may be canned only in Mason-style jars with new lids:
o Fruit jams, fruit jellies, fruit preserves, and fruit butters,
o Syrups

- Whole or cut fruit canned in syrup
- Acidified fruit or vegetables
- Condiments such as prepared mustard, horseradish, or ketchup that do not contain ingredients prohibited on this list and which are properly acidified
- Sprouts;
- Cut leafy greens, except for leafy greens that are dehydrated, acidified, or blanched and frozen;
- Cut or pureed fresh tomato or melon;
- Dehydrated tomato or melon;
- Frozen cut melon;
- Wild-harvested, non-cultivated mushrooms;
- Alcoholic beverages; or
- Kombucha

*A State-certified local public health department that regulates the service of food by a cottage food operation may require a cottage food operation to submit a recipe for any baked good containing cheese, at the cottage food operator's expense, to a commercial laboratory to verify that it is non-potentially hazardous before allowing the cottage food operation to sell the baked good as a cottage food.

**All canned foods must be acidified to a final equilibrium pH of 4.6 and must be preserved in air -tight, vacuum-sealed containers that are heat processed sufficiently to enable storing the food at normal home temperatures. A State-certified local public health department that regulates the service of food by a cottage food operation may require a cottage food operation to submit a canned food that contains tomatoes, at the cottage food operator 's expense, to a commercial laboratory to verify that the final product has an equilibrium pH of 4.6 or below.

The following product(s) have been test by a commercial laboratory and deemed “not potentially hazardous” with a pH below 4.6. Attach a copy of laboratory results.

Product Labeling – All cottage foods must be labeled with the following information:

- The name and address of the cottage food operation
- The common or usual name of the food product
- All ingredients including colors, artificial flavors, preservatives. All listed in decreasing order of prominence of weight.
- Statement “THIS PRODUCT WAS PRODUCED IN A HOME KITCHEN NOT SUBJECT TO PUBLIC HEALTH INSPECTION THAT MAY ALSO PROCESS COMMON FOOD ALLERGENS”.
- The date the product was processed.
- Allergen labeling as specified in federal labeling requirements.

Note: Attach copies of all product labels with this application

Owner’s Statement

I, _____, agree to grant access to the local health department, to conduct an inspection of my cottage food operation’s primary domestic residence in the event of a consumer or food borne illness outbreak.

Signature of Owner

Signature: _____

Date: _____

office use only below this line

Permit Number: _____ Date Issued: _____

Sanitarian Signature: _____