

# Starting your Contra Costa County Cottage Food Operation (CFO) Checklist

CFO PERMIT/REGISTRATION FEES (SHOWN ON 2nd PAGE) INCLUDE THE \$45.00 NON-REFUNDABLE APPLICATION FEE

*Please allow at least 15 working days from the time of submittal of your completed application packet for review.*

***Approval is required from Environmental Health prior to starting your CFO business.***

**SEE APPROVED COTTAGE FOODS LIST ATTACHED.**

It is highly recommended you have a solid business plan in place prior to submitting for permits from various agencies. Please consider contacting the Contra Costa Small Business Development Center  
925-602-6806 or [www.contracostasbdc.org](http://www.contracostasbdc.org) for guidance.

## **Step 1.**

**Obtain and complete ALL 9 required items listed below and submit packet to Contra Costa Environmental Health via email to [cfo@cchealth.org](mailto:cfo@cchealth.org), mail or bring in person to 2120 Diamond Blvd, Suite 100, Concord, CA 94520:**

1. Fees paid in full at the time of submission\*
2. Photocopy of your current CA Driver's License (same address as CFO documents or include copy of DMV Change of Address Request)
3. Copy of stamped rec'd Home Occupation Permit Application submitted to your City Planning & Zoning Dept (go to your city for application).
4. EH Consumer Protection Services Application – 1 page
5. EH California Homemade Food Act AB1616 (Gatto) Registration/Permitting Form – 5 pages
6. EH Cottage Food Operations Self Certification Checklist (CFOs – Class A/B) – 2 pages
7. Copy of current Food Handler Course Certification (on line courses are available) - Completed within 3 months.  
<http://www.cdph.ca.gov/programs/Documents/fdbCFOtrain.pdf>. Copy of certification may be faxed to CCEH 608-5502 or emailed to [CFO@cchealth.org](mailto:CFO@cchealth.org) and be sure to state the name of your CFO.
8. Copies of all product labels using required California Department of Public Health format/wording (*if stating the use of organic ingredients, must attach a copy of the USDA certification for each item (see Sample Label below) including Registration/Permit #.*)
9. Numbered List of all products submitted, if over 3 items. \*

**\*An additional fee of \$199.00 per hour will be charged after the 3<sup>rd</sup> hour of initial review and \$199.00 per hour for additional label submittals.**

### **MADE IN A HOME KITCHEN**

Class A Registration or Class B Permit #12345  
Issued in: Contra Costa County

Chocolate Chip Cookies With Walnuts  
Sally Baker  
123 Cottage Food Lane  
Yourtown, CA 90000

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.

Net Wt. 3 oz. (85.049g)

Contains: Wheat, eggs, milk, soy, walnuts

## Fees:

**All fees are subject to change without notice.**

Renewal payments received after February 28 will have \$150.00 late fee added.

- **New Class A – Direct Sales Packet Review \$498.00**

*Includes review, application fee (\$45.00 non-refundable), 1st year registration*

*\*Subsequent years with no changes \$109.00 – due annually **Mar 1 – Feb 28***

- **New Class B – Indirect/Direct Sales Packet Review \$796.00**

*Includes review, application fee (\$45.00 non-refundable), 1st year registration, travel, inspection*

*\*Subsequent years with no changes \$348.00 – due annually **Mar 1 – Feb 28***

**Contra Costa Environmental Health must be notified if there are any changes to the labels, place of residence or products being made prior to selling products. A packet review charge will apply**

## California Department of Public Health information and updates:

For **approved food listing** and program updates regarding the new California CFO AB1616 Gatto bill, please visit the California Department of Public Health: <http://www.cdph.ca.gov/programs/Pages/fdbCottageFood.aspx>

## Step 2.

### After submittal:

When completed application and payment are received, all applications are date stamped, reviewed by the Inspector and CFO Supervisor. You will be contacted via e-mail, and/or phone with the Permit/Registration # and to be advised of any changes, or additional documentation and approval or denial. It is your responsibility to return calls and e-mails in a timely manner for a turnaround time of approximately 15 working days. Keep in mind there are other applications on review ahead of yours.

## Step 3.

### After final approval by inspector:

You will be sent your registration / permit number to be printed on all labels and the Class A Registration or Class B Permit. ***Do not make, prepare or sell food, including business transactions, prior to receiving your final Environmental Health approval.***

***If you are interested in trying to sell your products at Farmer's Markets or Temporary Food Events, you must contact the Market Manager or Temporary Food Event Coordinator to be accepted and approved by them, pay all appropriate fees and be added to their vendor list. You must show proof of Contra Costa Environmental Health CFO registration/permit.***

Should you have additional questions after reviewing the websites above, feel free to call your lead inspector: Matt Villaber or program clerk, Diana Abbott 925-608-5500. Email address: CFO@cchealth.org



TOMÁS J. ARAGÓN, MD, DrPH  
Director and State Public Health Officer

State of California—Health and Human Services Agency  
California Department of Public Health



GAVIN NEWSOM  
Governor

## APPROVED COTTAGE FOODS – JUNE 23, 2022

Cottage Food Operations are allowed to produce certain categories of non-potentially hazardous foods. These are foods that do not support the rapid growth of microorganisms or toxins that could make people sick when the food is held outside time and temperature control. The California Department of Public Health (CDPH) is responsible for maintaining the Approved Cottage Foods List and may add or delete food categories. Notice of any change, the reason for the change, and the nature of the change is posted on our [Cottage Food Operations](#) webpage. Changes become effective 30 days after the notice has been posted. Questions about the Approved Cottage Foods List may be submitted to [FDBRetail@cdph.ca.gov](mailto:FDBRetail@cdph.ca.gov).

### 1. BAKED GOODS WITHOUT CREAM, CUSTARD, OR MEAT FILLINGS.

#### Examples:

**Bagels \* Baklava \* Biscuits \* Bread \* Brownies \* Buns \* Cake \* Churros \* Coconut Macaroons \* Cookies \* Crackers \* Cupcakes \* Donuts** (fried or baked) \* **Empanadas** (fruit only) \* **Flatbreads \* Fruit, Nut, or Seed Bars \* Macarons** (with approved buttercream) \* **Muffins \* Pastries \* Pies** (fruit only) \* **Pizzelles \* Quick Breads \* Samosas** (fruit only) \* **Tamales** (fruit only) \* **Tarts \* Tortilla \* Torts \* Waffles** (fried or baked) \* **Waffle Cones**

### 2. CANDY AND CONFECTIONS. Examples:

**Brittles \* Candied Apples \* Candied Popcorn** (balls, caramel, chocolate) \* **Caramels \* Cotton Candy \* Chocolate-Covered Non-Perishables** (including: marshmallows, nuts, candy, dried fruit, potato chips, or any combination) \* **Edible Dessert Sprinkles** (including: sanding and crystalized sugars, non-pareils, confetti, sequins, dragees, sugar-shapes, sugar-strands (jimmies), comfits, mini-chocolates, and pralines) \* **Freeze-Dried Candies \* Fudge \* Ground Chocolate \* Hard Candy \* Marshmallow Bars \* Marshmallows** (without eggs) \* **Popcorn Balls \* Salted Caramels \* Spiced Sugar \* Toffee**

### 3. EXTRACTS CONTAINING AT LEAST 70 PROOF OR 35% FOOD-GRADE FOR HUMAN CONSUMPTION ETHANOL/ALCOHOL.

Only those listed or combinations of those listed are allowed.

**Apple \* Apricot \* Blackberry \* Blueberry \* Cherry \* Chocolate \* Clove \* Cinnamon \* Cranberry \* Grapefruit \* Lemon \* Lime \* Orange \* Peach \* Pear \* Pineapple \* Pomegranate \* Raspberry \* Strawberry \* and Vanilla**

4. **DRIED, DEHYDRATED, AND FREEZE-DRIED FOODS.** Examples:  
Baking Mixes \* Bean Soup Mixes \* Cereals \* Coffee (roasted or freeze-dried) \*  
Fruit \* Fruit Powders \* Fruit Roll-Ups \* Grain Mixes \* Granola \* Ground  
Chocolate \* Herbs and Herb Butters \* Hot Chocolate Mix \* Mole Paste \*  
Pasta \* Popcorn \* Potato Chips \* Seasoning Salt \* Spice Mix or Rubs \* Tea \*  
Trail Mixes \* Vegetables \* Vegetable Chips \* Vegetable Soup Mixes
5. **FROSTINGS, ICINGS, FONDANTS, AND GUM PASTES THAT DO NOT  
CONTAIN EGGS†, CREAM, OR CREAM CHEESE.** Examples:  
Buttercream *made with butter* (traditional, vegan and chocolate) \* Chocolate  
Frosting with commercially manufactured Balsamic Vinegar \* Fondant  
(regular and chocolate) \* Flat Icing \* Gum Paste (pasteurized eggs only) \*  
Edible Images \* Sugar Glazes \* Vegan Gum Paste  
†Frostings and Icings made with meringue powder, powdered eggs, or  
pasteurized eggs are allowed.
6. **HONEY AND SORGHUM SYRUPS.**  
Only pure; no additional ingredients are allowed.
7. **FRUIT BUTTERS, JAMS, JELLIES THAT COMPLY WITH [PART 150 OF TITLE  
21 OF THE CODE OF FEDERAL REGULATIONS \(CFR\)](#).**  
(Only those fruits listed in the CFR are allowed. Additional fruits or vegetables will  
not be approved).
8. **NUTS, NUT MIXES, AND NUT BUTTERS.**
9. **POWDERED DRINK MIXES MADE FROM MANUFACTURED INGREDIENTS.**  
Drink mixes cannot be labeled with “protein” because the amount cannot be  
determined.
10. **VINEGARS AND MUSTARDS.** Examples:  
Mustards (plain without eggs) \* Vinegars \* Fruit-Infused Vinegars (only high-  
acid fruits such as: apple, blackberry, blueberry, cherry, crabapple, cranberry,  
grape, gooseberry, grapefruit, huckleberry, kumquat, lemon, lime, loganberry,  
nectarine, orange, peach, plum, pineapple, pomegranate, quince, raspberry,  
strawberry, tomatillo, youngberry)



**CONTRA COSTA**  
**ENVIRONMENTAL HEALTH DIVISION**  
2120 DIAMOND BOULEVARD, SUITE 100  
CONCORD, CA 94520  
(925) 608-5500 (925) 608-5502 FAX  
[www.cchealth.org/eh](http://www.cchealth.org/eh)



## CONSUMER PROTECTION SERVICES APPLICATION

**APPLICATION FEE IS NON-REFUNDABLE (SERVICE FEES ARE ADDITIONAL REFER TO FEE SCHEDULE)**

OWNER NAME (As it appears on Driver's License or Federal Tax I.D.):		OWNERS DRIVER'S LICENSE #:	OWNERS SOCIAL SECURITY #:
LIST ADDITIONAL PARTNERS:			
OWNER ADDRESS:		FEDERAL TAX ID # (If Corporation):	
CITY/STATE/ZIP CODE:	PHONE #:	FAX #:	
OWNER MAILING ADDRESS (If different from above):		EMAIL ADDRESS:	
IN CARE OF: (Billing office or person in charge):		CITY/STATE/ZIP CODE:	
COTTAGE FOOD OPERATION NAME / DBA:			COTTAGE FOOD OPERATION PHONE #:
COTTAGE FOOD OPERATION ADDRESS:		CITY/STATE/ZIP CODE:	

### COTTAGE FOOD OPERATION TYPE:

(Please Check Box)

☐ **Class A** - \$498.00

☐ **Class B** - \$796.00

### REQUIRED ITEMS:

1. Fees paid in full.
2. EH Consumer Protection Services Application.
3. Copy of current CA Driver's License.
4. Copy of received & date stamped City/County Planning /Zoning Dept. Home Occupation Permit Application (go to your city Planning and Zoning Dept).
5. California Homemade Act Registration/Permitting Form.
6. EH Cottage Food Operations Self Certification Checklist.
7. Copy of current Food Handler Course Certification (on line courses are available) - Certification copy may be emailed to [CFO@cchealth.org](mailto:CFO@cchealth.org) showing name of CFO.
8. Copies of all product labels including Registration/Permit #.
9. Numbered List of all products submitted, if over 3 items.
10. Submit complete packet to CCEH via email to [cfo@cchealth.org](mailto:cfo@cchealth.org), mail or bring in person.

The undersigned hereby applies for a Permit to Operate and agrees to operate in accordance with all applicable state and local regulations, laws, and such inspection procedures needed to ensure compliance. Payment of the required fee and late penalties, if any, to secure a valid permit is required before commencing or continuing operations. Failure to do so may result in a misdemeanor citation, infractions, permit suspension/revocation proceedings, and/or closure. Notify Contra Costa Environmental Health of any changes in the type of business activity, name, billing address, or ownership by calling the number above.

**PERMITS ARE NOT TRANSFERABLE.**

APPLICANT NAME: (Please print) \_\_\_\_\_

Signature of Applicant: \_\_\_\_\_ Date: \_\_\_\_\_

### FOR OFFICE USE ONLY

FA #:	PR #	P/E:	REHS:	SUPERVISOR: <b>VC</b>	RECEIVED BY:	DATE RECEIVED:
AMOUNT DUE: \$		AMOUNT PAID: \$		CHECK #:	CASH CREDIT CARD: MC <input type="checkbox"/> VISA <input type="checkbox"/>	RECEIPT #: XR

WHITE - ENVIRONMENTAL HEALTH



# Environmental Health Division

2120 Diamond Boulevard, Suite **100**, Concord, CA 94520  
(925) 6**08-5500** FAX (925) 6**08-5502** ([www.cchealth.org/eh](http://www.cchealth.org/eh))



\$45.00 APPLICATION FEE (Included in Registration/Permit Fee) IS NON-REFUNDABLE  
(SERVICE FEES ARE ADDITIONAL. REFER TO FEE SCHEDULE.)

## CALIFORNIA HOMEMADE FOOD ACT AB 1616 (GATTO) 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.

\*Please note: Cannabis-infused edibles are not an approved Cottage Food product.

### 3. "Class A/B" Self Certification Checklist:

- ☐ Checklist completed

## 4. Products:

Please check ALL of the items you will be preparing and/or selling. Approved Food Products List (June 10, 2021):

**1. BAKED GOODS WITHOUT CREAM, CUSTARD, OR MEAT FILLINGS.** Examples: Bagels \* Baklava \* Biscuits \* Bread \* Brownies \* Buns \* Cake \* Churros \* Coconut Macaroons \* Cookies \* Crackers \* Cupcakes \* Donuts (fried or baked) \* Empanadas (fruit only) \* Flatbreads \* Fruit, Nut, or Seed Bars \* Macarons (with approved Buttercream) \* Muffins \* Pastries \* Pies (fruit only) \* Pizelles \* Quick Breads \* Samosas (fruit only) \* Tamales (fruit only) \* Tarts \* Tortillas \* Torts \* Waffles (fried or baked) \* Waffle Cones

**2. CANDY AND CONFECTIONS.** Examples: Brittles \* Candied Apples \* Candied Popcorn (balls, caramel, chocolate) \* Carmels \* Cotton Candy \* Chocolate-Covered Non-Perishables including: marshmallows, nuts, candy, dried fruit, potato chips, or any combination \* Edible Dessert Sprinkles including: sanding and crystalized sugars, non-pareils, confetti, sequins, dragees, sugar-shapes, sugar-strands (jimmies), comfits, mini-chocolates, and pralines \* Freeze-Died Candies \* Fudge \* Ground Chocolate \* Hard Candy \* Marshmallow Bars \* Marshmallows that do not contain eggs \* Popcorn Balls \* Salted Caramels \* Spiced Sugars \* Toffee

**3. VANILLA EXTRACT CONTAINING AT LEAST 70 PROOF VODKA OR BOURBON**

**4. DRIED, DEHYDRATED AND FREEZE-DRIED FOODS.** Examples: Baking Mixes \* Bean Soup Mixes \* Cereals \* Coffee (roasted or freeze-dried) \* Fruit \* Fruit Powders \* Fruit Roll-Ups \* Grain Mixes \* Granola \* Ground Chocolate \* Herbs and Herb Blends \* Hot Chocolate Mix \* Mole Paste \* Pasta \* Popcorn \* Potato Chips \* Seasoning Salt \* Spice Mix or Rubs \* Tea \* Trail Mixes \* Vegetables \* Vegetable Chips \* Vegetable Soup Mixes

**5. FROSTINGS, ICINGS, FONDANTS, AND GUM PASTES THAT DO NOT CONTAIN EGGS†, CREAM, OR CREAM CHEESE.** Examples: Buttercream -traditional, vegan, and chocolate \* Fondant -regular and chocolate \* Flat Icing \* Gum Paste with pasteurized eggs \* Edible Images \* Sugar Glazes \* Vegan Gum Paste †Frostings and Icings made with meringue powder, powder eggs, or pasturized eggs are allowed

**6. HONEY AND SORGHUM SYRUPS**

**7. FRUIT BUTTERS, JAMS, JELLIES, AND PRESERVES THAT COMPLY WITH Part 150 of Title 21 of the Code of Federal Regulations**  
(Please see explanation at bottom of the document.).

**8. NUTS, NUT MIXES, AND NUT BUTTERS.**

**9. PROTEIN POWDER SHAKE MIXES MADE FROM MANUFACTURED INGREDIENTS.**

**10. VINEGARS AND MUSTARDS.** Examples: Mustards without eggs \* Vinegars \* Fruit-Infused Vinegars using only high-acid fruit such as: apple, blackberry, blueberry, cherry, crabapple, cranberry, grape, gooseberry, grapefruit, huckleberry, kumquat, lemon, lime, loganberry, nectarine, orange, peach, plum, pineapple, pomegranate, quince, raspberry, strawberry, tomatillo, youngberry,

**Fruit Butters, jams, jellies, and preserves:** Cottage Food Operations that wish to produce fruit butters, jams, jellies, and preserves must meet the legally established standards set forth in 21 CFR Part 150. The purpose of the regulation is to maintain the integrity of the food and ensure consumers know what product they are receiving. The regulation establishes labeling requirements and limits the ingredients that may be used when producing these foods. Cottage Food Operations cannot use any ingredient not listed in 21 CFR Part 150, including low-acid ingredients such as peppers to create pepper jelly. Use of a low-acid ingredient may cause the formation of the botulism toxin in the product if proper controls are not used.

[fdinfo@cdph.ca.gov](mailto:fdinfo@cdph.ca.gov) Email this address to submit a request for a food item not listed above. No guarantee for approval.

\*\*These items must comply with standards described in Part 150 of Title 21 of the Code of Federal Regulations <http://www.accessdata.fda.gov/scripts/cdrh/cfdocs/cfCFR/CFRSearch.cfm?CFRPart=150>

Food descriptions:

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## 5. 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” 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. (A contact phone number or email address is optional but may be helpful for consumers to contact your business.
- The registration or permit number of the cottage food operation which produced the cottage food product and in the case of “Class B” CFOs, the name of the county where the 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.

### Examples

<p style="text-align: center;"><b>MADE IN A HOME KITCHEN</b>  <b>Class A Registration #12345</b>  <b>Issued in:</b> Contra Costa County</p> <p style="text-align: center;"><b>Chocolate Chip Cookies With Walnuts</b>          Sally Baker          123 Cottage Food Lane          Yourtown, CA 90000</p> <p><b>Ingredients:</b> 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><b>Contains:</b> Wheat, eggs, milk, soy, walnuts</p> <p style="text-align: right;"><b>Net Wt. 3 oz. (85.049g)</b></p>	<p style="text-align: center;"><b>MADE IN A HOME KITCHEN</b>  <b>Class B Permit #12345</b>  <b>Issued in:</b> Contra Costa County</p> <p style="text-align: center;"><b>Chocolate Chip Cookies With Walnuts</b>          Sally Baker          123 Cottage Food Lane          Yourtown, CA 90000</p> <p><b>Ingredients:</b> 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><b>Contains:</b> Wheat, eggs, milk, soy, walnuts</p> <p style="text-align: right;"><b>Net Wt. 3 oz. (85.049g)</b></p>
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## 6. Water Source:

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

☐

Name of Public Water System or Community Services District:



<input type="checkbox"/> If you use a <u>Private Water Supply</u> **, identify the source (well, spring, surface, etc.): Pittsburg,
<b><u>Private Water Supply: Initial Water Quality Results</u></b> Check boxes below if initial water testing has been completed. All testing must be done at a State Certified Laboratory. Then either attach lab results or provide name of lab, date & results in space provided next to type of test. * (Testing Frequencies for Transient Non-Community Water Systems after initial testing)
<input type="checkbox"/> Bacteriological Test ( <i>quarterly</i> *):
<input type="checkbox"/> Nitrate Test ( <i>yearly</i> *):
<input type="checkbox"/> Nitrite ( <i>every 3 years</i> *):

\*\*Additional information may be required if food is prepared from a home with a private water supply – Check with local jurisdiction

## 7. **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 Contra Costa Environmental Health Division immediately at **(925) 608-5500**.

## 8. **Food Processor Course:** Initial if you agree to abide by the following: \_\_\_\_\_

**Within 3 months** 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\*.

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

## 9. **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.

## 10. **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
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2015 and in subsequent years.....\$50,000

**11. 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.

**12. Owner's Statement:**

I, \_\_\_\_\_, agree to grant access to Contra Costa Environmental Health Division 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 Contra Costa Environmental Health Division 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.

_____ <i>Owner's Signature</i>	_____ <i>Print Name</i>	_____ <i>Date</i>
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## COTTAGE FOOD OPERATIONS (CFOs – Class A/B) SELF CERTIFICATION CHECKLIST

*The following requirements are outlined in the Cottage Food Operations (CFO) regulations and are provided as minimum standards of health and safety for the preparation of approved cottage foods in the home.*

CFO Business Name:		CFO Owner Name:	
CFO Physical Address:		CFO City:	CFO ZIP:
Phone:	<b>FA</b>	<b>PR</b>	<b>PE</b>

Above bold boxes for office use only.

### Facility Requirements:

Yes No

1. The CFO is located in a private dwelling where the CFO operator currently resides	<input type="checkbox"/>	<input type="checkbox"/>
2. All CFO food preparation will take place in the private kitchen within that home.	<input type="checkbox"/>	<input type="checkbox"/>
3. Additional storage used for the CFO will be within the home.	<input type="checkbox"/>	<input type="checkbox"/>
a. If YES, is the room used exclusively for storage?	<input type="checkbox"/>	<input type="checkbox"/>
b. Specify the room(s) that will be used for storage? _____		
4. Sleeping quarters are excluded from areas used for CFO food preparation or storage.	<input type="checkbox"/>	<input type="checkbox"/>

### Zoning Requirements:

Yes No

5. I have complied with the applicable zoning requirements for the CFO.	<input type="checkbox"/>	<input type="checkbox"/>
6. I have attached documentation from the Planning office (If required)	<input type="checkbox"/>	<input type="checkbox"/>

### Employee and Training Requirements:

Yes No

7. Have all persons preparing or packaging CFO products completed the CDPH food processor course?	<input type="checkbox"/>	<input type="checkbox"/>
a. If YES, copies of certificates are attached.	<input type="checkbox"/>	<input type="checkbox"/>
b. If NO, complete course within 3 months of CFO registration.	<input type="checkbox"/>	<input type="checkbox"/>
8. The CFO has no more than 1 full-time equivalent employee? (Immediate family or household members are not included.)	<input type="checkbox"/>	<input type="checkbox"/>

**Sanitation Requirements:**

Yes No

- |   |                          |                          |
|---|--------------------------|--------------------------|
| 9. Kitchen equipment and utensils used to produce CFO products are clean and maintained in a good state of repair.  | <input type="checkbox"/> | <input type="checkbox"/> |
| 10. All food contact surfaces, equipment, and utensils used for the preparation, packaging, or handling of any CFO products shall be washed, rinsed, and sanitized before each use. | <input type="checkbox"/> | <input type="checkbox"/> |
| 11. All food preparation and food and equipment storage areas shall be maintained free of rodents and insects.  | <input type="checkbox"/> | <input type="checkbox"/> |

**Food Preparation Requirements (includes packaging and handling):**

Yes No

- |  |                          |                          |
|--|--------------------------|--------------------------|
| 12. Hand washing is required immediately prior to handling foods and after engaging in any activity that contaminates the hands such as after using the toilet, coughing or sneezing, eating or smoking. | <input type="checkbox"/> | <input type="checkbox"/> |
| 13. Warm water, hand soap and clean towels are available for hand washing.   | <input type="checkbox"/> | <input type="checkbox"/> |
| 14. All food ingredients used in the CFO products are from an approved source.   | <input type="checkbox"/> | <input type="checkbox"/> |
| 15. Potable water shall be used for hand washing, ware washing and as an ingredient.   | <input type="checkbox"/> | <input type="checkbox"/> |
| 16. Is your water source a private water supply (well, spring, surface)?   | <input type="checkbox"/> | <input type="checkbox"/> |
| a. If YES, have you completed testing for bacteria, nitrate & nitrite?   | <input type="checkbox"/> | <input type="checkbox"/> |
| 17. Is your water source a public water system or community services district?   | <input type="checkbox"/> | <input type="checkbox"/> |
| a. If YES, what is the name of the system or district?   | _____                    |                          |

*During the preparation, packaging or handling of CFO products:*

Yes No

- |  |                          |                          |
|--|--------------------------|--------------------------|
| 18. Domestic activities such as family meal preparation, dishwashing, clothes washing or ironing, kitchen cleaning or guest entertainment are excluded from the kitchen. | <input type="checkbox"/> | <input type="checkbox"/> |
| 19. Infants, small children (younger than 12 yr. old), or pets are excluded from the kitchen.  | <input type="checkbox"/> | <input type="checkbox"/> |
| 20. Smoking is excluded.   | <input type="checkbox"/> | <input type="checkbox"/> |
| 21. Any person with a contagious illness shall refrain from work in the CFO.   | <input type="checkbox"/> | <input type="checkbox"/> |

**Labeling Requirements:**

Yes No

- |  |                          |                          |
|--|--------------------------|--------------------------|
| 22. A copy of all labels have been submitted to this Department for review and approval. | <input type="checkbox"/> | <input type="checkbox"/> |
| 23. I have attached all sample labels.   | <input type="checkbox"/> | <input type="checkbox"/> |

By signing below you are certifying that you meet the requirements of the California Homemade Food Act, AB 1616 (Gatto), as it pertains to a "Class A/B" Cottage Food Operation. Prior to making any changes, I acknowledge that I must notify \_\_\_\_\_ Contra Costa Environmental Health Division of any intended changes to the above statement.

Cottage Food Operator Checklist completed and submitted by:

\_\_\_\_\_  
*Owner's Signature*\_\_\_\_\_  
*Print Name*\_\_\_\_\_  
*Date*



Contra Costa Environmental Health  
 2120 Diamond Blvd, Suite 100  
 Concord, CA 94520  
 Phone: (925) 608-5500  
 Fax: (925) 608-5502  
[www.cchealth.org/eh/](http://www.cchealth.org/eh/)

## **CREDIT CARD PAYMENTS**

<b>SITE ADDRESS:</b>
<b>FACILITY NAME/EVENT NAME:</b>
<b>CARD HOLDER MAILING ADDRESS:</b>
<b>REASON/PURPOSE FOR PAYMENT:</b>

**CHECK ONE:      MASTERCARD      VISA      DISCOVER**

(NOTE: \$30.00 MINIMUM ON CREDIT CARD PAYMENTS)

<b>NAME OF PAYOR:</b>	<b>PHONE #:</b> (      )
<b>CREDIT CARD #:</b> <b>3 DIGIT CODE ON BACK OF CARD:</b> -                      -                      -	<b>EXP. DATE:</b> /
<b>AMOUNT PAID #:</b>	<b>AMOUNT DUE:</b>

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Print Name

\_\_\_\_\_  
Date

<b>OFFICE USE ONLY</b>		
<b>PAYMENT INFO RECEIVED:</b> <input type="checkbox"/> <b>PHONE</b> <input type="checkbox"/> <b>FAX</b> <input type="checkbox"/> <b>E-MAIL</b> <input type="checkbox"/> <b>Walk-in</b>		
<b>RECEIPT #:</b>	<b>FA #:</b>	<b>AR #:</b>
<b>INFORMATION TAKEN BY:</b>		<b>DATE:</b>
<b>PROCESSED BY:</b>		<b>DATE:</b>