



# County of San Diego

DEPARTMENT OF ENVIRONMENTAL HEALTH  
FOOD AND HOUSING DIVISION

P.O. BOX 129261, SAN DIEGO, CA 92112-9261  
Phone: (858) 505-6900 | Fax: (858) 999-8920 | [www.sdcdeh.org](http://www.sdcdeh.org)



## CLASS B COTTAGE FOOD OPERATION APPLICATION PACKET

Thank you for your interest in starting your own Cottage Food Operation. We have designed this packet to streamline the application process, so as to maintain permit fees as low as possible and to save time in the permitting process. Please complete all applicable forms in this packet and submit the completed forms to our main office either over the counter, by mail, or via email at [fhdcottagefood@sdcounty.ca.gov](mailto:fhdcottagefood@sdcounty.ca.gov). Once we receive your packet, it will be reviewed and you will be notified within ten (10) business days of the status of your submittal. Should you have any questions regarding the information in this packet, or any general questions regarding our Cottage Food Program, you can contact our Specialist on Duty directly at 858-505-6900, or stop by our main office Monday-Friday between the hours of 8:00am-4:00pm.

All Cottage Food Operation products must comply with Section 114365.5 of the California Retail Food Code and must be approved by the California Department of Public Health (CDPH) for sale by a Cottage Food Operation. For a list of the allowed products, you may visit our website at [www.sdcdeh.org](http://www.sdcdeh.org). If you have a product that you would like to submit to CDPH for review, you may email them at [fdbinfo@cdph.ca.gov](mailto:fdbinfo@cdph.ca.gov).

Along with the completed application packet, you will also need to submit Sample Labels for review to DEH-FHD for the Cottage Food Products you intend to prepare in your home kitchen. Cottage Food Operators are only required to submit labels for no more than ten (10) products for review including at least one product from each category of food to be prepared. Any product labels above the initial ten (10) that are submitted for review will be subject to the current DEH-FHD hourly rate. *(Label Samples must be submitted in either a Microsoft Word Document or PDF format and must reflect the final size, layout and color of the labels that will appear on your products)*

Best wishes on your new business venture.

*"Environmental and public health through leadership, partnership and science"*



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### FEES ASSOCIATED WITH COTTAGE FOOD OPERATIONS

The following is intended to explain cottage food operation fees for services you may request or be charged. The Food and Housing Division of the Department of Environment Health (DEH) is funded entirely by permit fees and is mandated to operate at full cost recovery.

Type of Service	Fee	Type of Service	Fee
Class A Initial Registration	\$201.00	Submittal of Additional Labels for Review	\$153.00/Hr
Class A Renewal	\$81.00	Complaint Investigation & Follow-up of Official Notice	\$153.00/Hr
Class B Initial Permit (includes home inspection)	\$458.00	Administrative Office Hearing	\$612.00
Class B Renewal (includes home inspection)	\$316.00	Suspension/Revocation Hearing	\$918.00

#### **Follow-up of Official Notice**

If you are issued an Official Notice of Violation for non-compliance of state and/or local codes and do not comply within the stated time on the notice, you are subject to the following:

- A re-inspection fee for a follow-up visit. The fee must be paid at one of the offices listed below.
- Continued non-compliance will result in an Administrative Office Hearing and/or Suspension/Revocation Hearing.

#### **Administrative Office and Suspension/Revocation Hearings**

Administrative Office Hearings or Suspension/Revocation Hearings, as applicable, may be conducted for repeat major violations. If you have been issued a notice to appear at a Suspension/Revocation Hearing or an Administrative Office Hearing, you are required to do the following:

- Contact the District Supervisor to confirm the time and date of the hearing. Pay the corresponding fee prior to or at the time of the hearing.
- Attend the hearing and be prepared to provide reasons why you have not complied with the notice(s) of violation or the reasons why you cannot be in compliance.

Be advised that failure to appear will not result in the termination of the hearing. The hearing will be conducted in absentia and your permit may be modified, suspended, or revoked. For additional information, contact the Food and Housing Duty Desk at 858-505-6900.

#### **Department of Environmental Health Office Locations**

##### **Main Office**

5500 Overland Avenue, Ste. 170  
San Diego, CA 92123  
(858) 505-6900  
Office hours 8:00am - 4:30pm

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## COTTAGE FOOD OPERATION APPLICATION SUBMITTAL REQUIREMENTS

In order to be an approved Cottage Food Operator within San Diego County, interested parties must obtain approval from the Department of Environmental Health and their local city/county Building Department.

The items listed below must be submitted for review to the Department of Environmental Health, Food and Housing Division (DEH-FHD). Please ensure all required information is submitted in order to reduce delays in the approval of your application. You will be notified of the status of your application within ten (10) business days after receipt of your complete application packet.

### Application Items Required:

- Completed Cottage Food Operation Registration Form
- Completed Self-Inspection Checklist (*This is to be completed for Class A applicants only*)
- Completed Health Permit Application (*This is to be completed for Class B applicants only*)
- Completed Cottage Food Operation Addendum Information
- Completed Cottage Food Operation List of Products Form
- Well Water Testing Results (*This is only for Cottage Food Operators whose water is supplied by a private well*)
- Food Handler Training Certificate (*Required to be submitted within 90 days of approval*)
- If you live within an Incorporated City, submit a copy of your Business License from the city where your Cottage Food Operation is located. The address on the Business License must match your primary residence.  
*Please reference the [City Zoning list](#) located on the DEH-FHD website for individual city contact information. The following Cities require approval from DEH-FHD prior to issuing a Business License: Encinitas, Escondido, Imperial Beach, Lemon Grove, National City, Oceanside, San Marcos, and Vista. For operations in any of these cities, you do not need to submit a business license with your application packet.*
- If you live within an Unincorporated part of San Diego County, your Cottage Food Operation (CFO) Registration form must be stamped by San Diego County Planning and Development Services (PDS). *San Diego County PDS is located at 5510 Overland Ave. San Diego, CA 92123. Prior to submitting your application to DEH-FHD, please take your completed Cottage Food Operation Registration Form to PDS and obtain the required stamp, approving the use of your home to establish your CFO business.*



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## COTTAGE FOOD OPERATION LABEL SUBMITTAL REQUIREMENTS

Along with the completed application packet, you will also need to submit Sample Labels for review to DEH-FHD for the Cottage Food Products you intend to prepare in your home kitchen. Cottage Food Operators are required to submit labels for no more than ten (10) products for review including at least one product from each category of food to be prepared. Any product labels above the initial ten (10) that are submitted for review will be subject to the current DEH-FHD hourly rate. *(Label Samples must be submitted in either a Microsoft Word Document or PDF format and must reflect the final size, layout and color of the labels that will appear on your products)*

The following is the information that must be included on your product labels to meet the requirements established by the California Department of Public Health (CDPH). Please see the Labeling Requirement Document available on our website for sample label layouts and additional details on the required information for your product labels.

- Name of the Cottage Food Operation which produced the food
- Full physical address of Cottage Food Operation *(If your business is listed in a major phone directory, just the City, State and Zip Code of your operation may be printed on your labels)*
- Common name of the product
- List of product ingredients in descending order by weight *(all sub ingredients must also be listed following each listed ingredient used)*
- Allergen declaration of any of the major allergens allowed to be used as ingredients in Cottage Food Products
- The net weight of your food product stated in both ounces and grams *(a place holder may be used to indicate where this will go on your label if the final weight has not been determined)*
- The words "Made in a Home Kitchen", or where applicable, "Repackaged in a Home Kitchen", printed in at least 12 point font *(if an uncommon font is used, a word document sample may be requested to verify font size)*
- Registration Number (Class A) or Permit Number (Class B) as issued by this department *(a place holder may be used until actual registration or permit number is issued – the number will be 17 digits long)*
- Name of the county issuing the Cottage Food Registration (Class A) or Cottage Food Permit (Class B)
- Nutritional Fact Panel *(only required when using the following terms: free, low, reduced, fewer, high, less, more, lean, extra lean, good source, light)*
- The minimum size of all text (except for "Made in a Home Kitchen") must be larger than 1/16" when measured at a lowercase "o"



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### FOOD HANDLER TRAINING PROGRAM FOR COTTAGE FOOD OPERATORS

A person who prepares or packages cottage food products must complete food handler training or certification. The food handler training must be completed within three months of being registered or permitted. There are three options for training.

#### FOOD SAFETY MANAGER CERTIFICATION (FSM CERT)

There are six approved exams that meet the state-required food safety certification requirement: Please contact them directly for course locations and information. Food safety manager certificates are **valid for five years**.

[https://www.sandiegocounty.gov/content/dam/sdc/deh/fhd/food/pdf/publications\\_fhsm860.pdf](https://www.sandiegocounty.gov/content/dam/sdc/deh/fhd/food/pdf/publications_fhsm860.pdf)

#### FOOD PROCESSOR COURSE

The food processor courses are approved by California Department of Public Health. You can access a list of state approved food processor training courses through the California Department of Public Health Cottage Food website. The food processor certificates are **valid for three years**.

<https://www.cdph.ca.gov/Programs/CEH/DFDCS/CDPH%20Document%20Library/FDB/FoodSafetyProgram/CottageFood/CFOperatorTraining.pdf>

#### FOOD HANDLER COURSE

The Food Handler Courses are taught by food handler training schools that are authorized by the County of San Diego. The County monitors the training schools for course content and consistency. Please contact the food handler schools directly for course locations and information. Food handler cards are **valid for three years**.

[https://www.sandiegocounty.gov/content/dam/sdc/deh/fhd/food/pdf/publications\\_fhschools860.pdf](https://www.sandiegocounty.gov/content/dam/sdc/deh/fhd/food/pdf/publications_fhschools860.pdf)

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### COTTAGE FOOD OPERATION (CFO) – ZONING REQUIREMENTS

Department of Environmental Health – Food and Housing Division (DEH-FHD) permits and registers Cottage Food Operations (CFOs) that comply with all of the requirements of AB1616. The Cottage Food Operator is responsible for complying with any other requirements in the city where the business is located. Below you will find additional requirement information for the different cities in San Diego County. Unless noted that **DEH-FHD to permit first**, all city requirements are to be met prior to applying with DEH-FHD. Any city permits, licenses or registrations must be submitted with your application to DEH-FHD.

Location of CFO	Requirements	Phone Number
<b>Unincorporated County of San Diego</b>	A business license is not required at this time. Stamp approval from the County of San Diego Planning and Development Services - Building Division is required. Building permits are required for addition of commercial equipment or a major kitchen remodel	<b>(858) 565-5920</b>
<b>Carlsbad</b>	Business License	<b>(760) 602-2495</b>
<b>Chula Vista</b>	Home Occupation Permit & Business License	<b>(619) 585-5621</b>
<b>Coronado</b>	Home Occupation Permit & Business License	<b>(619) 522-7320 - <a href="#">website</a></b>
<b>Del Mar</b>	Business License with Home Occupation	<b>(858)755-9313 ext. 1184 - Les Middleton</b>
<b>El Cajon</b>	Business License	<b>(619) 441-1668 - <a href="mailto:businesslicense@cityofelcajon.us">businesslicense@cityofelcajon.us</a></b>
<b>Encinitas</b>	Business Registration <b>** DEH-FHD to permit first</b>	<b>(760) 633-2708</b>
<b>Escondido</b>	Home Occupation Permit & Business License <b>** DEH-FHD to permit first</b>	<b>(760) 839-4306 - Paul Bingham</b>
<b>Imperial Beach</b>	Business License with Home Occupation <b>** DEH-FHD to permit first</b>	<b>(619) 628-1423 - Kristine Wiesmann</b>
<b>La Mesa</b>	Home Occupation Permit & Business License	<b>(619) 667-1118 - Jolene Cayas</b>
<b>Lemon Grove</b>	Home Occupation Permit <b>** DEH-FHD to permit first</b>	<b>(619) 825-3805 - Patty Peterson</b>
<b>National City</b>	Home Occupation Permit & Business License <b>** DEH-FHD to permit first</b>	<b>(619) 336-4341 - Adella Salazar</b>
<b>Oceanside</b>	Home Occupation Permit & Business License <b>** DEH-FHD to permit first</b>	<b>(760) 435-3881 - Christy Hernandez</b>
<b>Poway</b>	Home Occupation Permit & Business License	<b>(858) 668-4405 - Lisa Albright</b>
<b>San Diego</b>	Business Tax Certificate	<b>(619) 615-1500</b>
<b>San Marcos</b>	Business License <b>** DEH-FHD to permit first</b>	<b>(760) 744-1050 ext. 3101 - Shauna Vuoti</b>
<b>Santee</b>	Home Occupation Permit <b>** DEH-FHD to permit first</b>	<b>(619) 258-4100 ext. 146 - Tanya Espinola</b>
<b>Solana Beach</b>	Home Occupation Permit & Business License	<b>(858) 720-2442 - Patricia Bluman</b>
<b>Vista</b>	Home Occupation Permit <b>** DEH-FHD to permit first</b>	<b>(760) 643-5394 - Chris Winters</b>

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### POTABLE WATER REQUIREMENTS FOR A COTTAGE FOOD OPERATION

An approved source of potable water is required for all cottage food operations. If the water will be provided by a regulated water district or small water system where water quality analysis is performed on a routine basis to ensure the water supply meets minimum bacterial and chemical standards, no further action is necessary.

If the water for the cottage food operation will be obtained from a private water well, the water source must meet the primary water quality standards for a transient, non-community water system. Analytical data results will be required to be submitted to the Department of Environmental Health prior to approval of a Class A or Class B operation. In addition, on an annual basis, Class A and Class B operations must demonstrate at permit renewal that the water system meets the bacterial water standard. The analysis must be performed for the constituents listed below and must be completed by a California state certified laboratory. Should the water supply not meet the minimum "potable" water quality standards required by law, the cottage food operation will not be approved until proof of a complying water supply is submitted.

#### **Initial Analysis (Class A and B Operations)**

The initial analysis shall consist of a total coliform bacteria test which shows the absence of coliform bacteria. In addition, an inorganic chemicals test is required to demonstrate all required constituents tested are at or below the maximum contaminant levels (MCL) shown in the following table.

Inorganic Chemicals	MCL
Aluminum	1.0 mg/L
Antimony	0.006 mg/L
Arsenic	0.010 mg/L
Barium	1.0 mg/L
Beryllium	0.004 mg/L
Cadmium	0.005 mg/L
Chromium (Total)	0.05 mg/L
Cyanide	0.15 mg/L
Fluoride	2.0 mg/L
Mercury	0.002 mg/L
Nickel	0.1 mg/L
Nitrate (as N)	10.0 mg/L
Nitrite (as N)	1.0 mg/L
Perchlorate	0.006 mg/L
Selenium	0.05 mg/L
Thallium	0.002 mg/L

#### **Annual Analysis (Class A and Class B Operations)**

The annual analysis shall consist of a total coliform bacteria test which shows the absence of coliform bacteria.

# STATE APPROVED LABORATORIES FOR WATER QUALITY ANALYSIS

Below is a listing of state approved laboratories for drinking water and/or wastewater analysis. The following list is provided for information only. The County of San Diego does not endorse the businesses listed.

A more comprehensive listing can be found at <http://www.cdph.ca.gov/certlic/labs/Pages/ELAP.aspx>.

## **Analytical Chemical Labs, Inc.**

1123 West Morena Blvd.  
San Diego, CA 92110  
(619) 276-1558  
(FOT: 101-103,108,109)

## **Associated Laboratories**

806 N. Batavia  
Orange, CA 92868  
(714) 771-6900  
(714) 538-1209 (fax)  
www.associatedlabs.com  
(FOT: 101-105, 107-111,113)

## **ATS Laboratories**

104 South 8th Street  
Brawley, CA 92227  
(760) 344-2532  
(FOT: 101,102,107,108)

## **Clarkson Lab & Supply, Inc.**

350 Trousdale Drive  
Chula Vista, CA 91910  
(619) 425-1993  
(619) 425-7917 (fax)  
www.clarksonlab.com  
(FOT: 101,102,108,109)

## **Clinical Laboratory of San Bernardino**

21881 Barton Road  
Grand Terrace, CA 92313  
(909) 825-7693  
(909) 825-7696 (fax)  
www.clinical-lab.com  
(FOT: 101-110,112)

## **D-Tek Analytical Laboratories**

2722 Loker Avenue W, Suite B  
Carlsbad, CA 92010  
(760) 930-2555  
(760) 930-2510 (fax)  
www.dteklabs.com  
(FOT: 101-103,107-109,111)

## **Enviromatrix Analytical, Inc.**

4340 Viewridge Ave., Ste. A  
San Diego, CA 92123  
(858) 560-7717  
(858) 560-7763 (fax)  
www.enviromatrixinc.com  
(FOT: 101-103,107-111)

## **IEH Environmental Engineering Laboratory**

3538 Hancock St.  
San Diego, CA 92110  
(619) 298-6131  
(619) 298-6141 (fax)  
www.ieheel.com  
(FOT: 101,102,106-109,113)

## **Motile Laboratory Services**

537 Vine Street  
Oceanside, CA 92054  
(760) 840-0577  
(FOT: 107)

## **MWH Laboratories**

750 Royal Oaks Dr., Ste. 100  
Monrovia, CA 91016-3629  
(626) 386-1100  
(626) 386-1101 (fax)  
www.mwhlabs.com  
(FOT: 101-106,110)

## **TestAmerica**

1014 East Cooley Drive, Ste A-F  
Colton, CA 92324  
(909) 370-4667  
(909) 370-1046 (fax)  
www.testamericainc.com  
(FOT: 101,104-105,107-108)

## **Western Solutions, Inc.**

2433 Impala Drive  
Carlsbad, CA 92008  
(760) 795-6900  
(760) 931-1580 (fax)  
www.westonsolutions.com  
(FOT: 107,113)

## **Fields of Testing (FOT):**

101 – Microbiology of Drinking Water  
102 – Inorganic Chemistry of Drinking Water  
103 – Toxic Chemical Elements of Drinking Water  
104 – Volatile Organic Chemistry of Drinking Water  
105 – Semi-volatile Organic Chemistry of Drinking Water  
106 – Radiochemistry of Drinking Water

107 - Microbiology of Wastewater  
108 - Inorganic Chemistry of Wastewater  
109 - Toxic Chemical Elements of Wastewater  
110 - Volatile Organic Chemistry of Wastewater  
111 - Semi-volatile Organic Chemistry of Wastewater  
112 - Radiochemistry of Wastewater  
113 – Whole Effluent Toxicity of Wastewater



## COTTAGE FOOD OPERATION LABELING REQUIREMENTS

Assembly Bill (AB) 1616, the Homemade Food Act, commonly referred to as the Cottage Food Operation (CFO) Law, allows individuals to prepare and/or package certain non-potentially hazardous foods from within their home kitchens and sell directly and indirectly to the public. All CFO products must be properly labeled for sale to the public. Cottage Food Operators are required to meet the labeling guidelines defined in Section 114365.2 of the California Health and Safety Code. The following information is provided to assist Cottage Food Operators properly complete their product labels. Labels submitted for review must have all of the required information to be approved.

**The following information must be present on all CFO product labels. Please see the accompanying pages for specific label samples.**

1. The common or descriptive name of the product.
2. The business name of Cottage Food Operation.
3. The physical address of Cottage Food Operation. The address shall include the Street Number, Street Name, City, State and Zip Code. If the CFO business is listed in a major telephone directory with the name of the business and complete physical address, then just the City, State and Zip Code of the Cottage Food Operation needs to be provided on the labels.
4. A consumer notification indicating that the product was not made in a commercial facility. The wording "Made in a Home Kitchen" or "Repackaged in a Home Kitchen" shall be used as applicable. **Both must be printed in no less than 12 point font.**
5. A complete list of product ingredients. If the product contains two or more ingredients, the ingredients must be listed in descending order of predominance by weight. Sub-ingredients of a food that is an ingredient in a CFO product must also be listed following the name of the ingredient.
6. An Allergen Declaration written in plain language must be present on the label if the food being prepared contains any of the major food allergens: milk, eggs, tree nuts (e.g., almonds, pecans, walnuts), wheat, peanuts, or soybeans.
7. The Net Quantity (weight or volume) of the food product in the package or container. This information must be stated in BOTH English Units (pound) and Metric Units (grams).
8. The Registration Number (for Class A operations) or Permit Number (for Class B operations) must be provided. This number is issued by this department after approval of the application. *Note: For label submittal purposes, a placeholder may be used. (ex - DEH2017-FCFO-XXXXXX)*
9. Name of the County issuing the Cottage Food Registration or Permit. (For Class A Operations: Registration Issued by San Diego County; For Class B Operations: Permit Issued by San Diego County).

**IMPORTANT:** A Nutrition Facts Panel must be incorporated into the label if the food label makes any nutrient content health claims. *Using the following eleven terms are considered a nutrient content health claim (nutritional value of a food): free, low, reduced, fewer, high, less, more, lean, extra lean, good source, and light.*

*\*The smallest acceptable letter size for the label text (excluding the consumer notification) is 1/16<sup>th</sup> of an inch in height measured at a lower case "o".*

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### LABELING REQUIREMENTS - CLASS A REGISTRATION

All proposed Cottage Food Operations (CFOs) shall submit labels for review for the corresponding products that are going to be produced. Cottage Food Operators are required to submit labels for no more than ten (10) products for review including at least one product from each category of food to be prepared. Any product labels above the initial ten (10) that are submitted for review will be subject to the current DEH-FHD hourly rate. These labels must contain specific information as required by the California Department of Public Health (CDPH). Labels submitted for DEH review must contain all required information to be approved.

CLASS A LABEL REQUIREMENTS (SINGLE LABEL)
<b>Product Name</b> - This is the common name of product.
<b>Business Name</b> - This is the registered name of the Cottage Food Operation.
<b>Business Address</b> - This is the physical address of Cottage Food Operation which needs to include: Street Number, Street Name, City, State, Zip Code.
<b>Alternative Business Address</b> - If the CFO is listed in a major phone directory showing the name of the business and the physical address, then just the City, State and Zip Code may be printed on the label.
<b>Consumer Notification</b> - All labels must contain the wording "Made in a Home Kitchen" or "Repackaged in a Home Kitchen". <i>*This is the exact wording that must be used and must be printed in at least 12 point font.</i>
<b>List of Product Ingredients</b> - If the product contains <u>two or more ingredients</u> , the ingredients must be listed in descending order of predominance by weight. Sub-ingredients of a food listed as an ingredient must also be listed following the name of the ingredient.
<b>Allergen Declaration</b> - If the food contains any of the major food allergens: milk, eggs, tree nuts (e.g., almonds, pecans, walnuts), wheat, peanuts, or soybeans (or soy based products), a declaration of the allergens present must be provided.
<b>Net Quantity</b> - Refers to the quantity (weight or volume) of food in a package or container. Information must be stated in BOTH English Units (pound) and Metric Units (grams).
<b>Registration Number</b> - This number will be issued following approval of the submitted CFO application. For label submittal purposes, the following placeholder may be used: <i>DEH2017-FCFO-XXXXXX</i> .
<b>Name of Issuing County</b> - The following must be on each Class A label: <i>Registration Issued by San Diego County.</i>

CHOCOLATE  
CHIP COOKIES

MADE IN A HOME  
KITCHEN

Beachside

Bakers




5500 Overland Ave. San Diego, CA 92123

Nt. Weight: 6 oz 170.1 g

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), walnuts, sugar, eggs, salt, artificial vanilla extract (water, alcohol, vanilla extractives), and baking soda.

Contains: Wheat, eggs, milk, walnuts

Registration Issued by San Diego County  
DEH2017-FCFO-999999

**CLASS A CFO Label Sample**  
**Uses the wording "Registration Issued By"**

*\*The smallest acceptable letter size for the label text is 1/16<sup>th</sup> of an inch in height measured at a lower case "o", with the exception of "Made in a Home Kitchen" or "Repackaged in a Home Kitchen" which is required to be at least 12 point font.*

**IMPORTANT:** A Nutrition Facts Panel must be incorporated into the label if the food label makes any nutrient content health claims. Using the following eleven terms are considered a nutrient content health claim (nutritional value of a food): **free, low, reduced, fewer, high, less, more, lean, extra lean, good source, and light.**

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### LABELING REQUIREMENTS - CLASS B PERMIT

All proposed Cottage Food Operations (CFOs) shall submit labels for review for the corresponding products that are going to be produced. Cottage Food Operators are required to submit labels for no more than ten (10) products for review including at least one product from each category of food to be prepared. Any product labels above the initial ten (10) that are submitted for review will be subject to the current DEH-FHD hourly rate. These labels must contain specific information as required by the California Department of Public Health (CDPH). Labels submitted for DEH review must contain all required information to be approved.

CLASS B LABEL REQUIREMENTS (SINGLE LABEL)
<b>Product Name</b> - This is the common name of product.
<b>Business Name</b> - This is the registered name of the Cottage Food Operation.
<b>Business Address</b> - This is the physical address of Cottage Food Operation which needs to include: Street Number, Street Name, City, State, Zip Code.
<b>Alternative Business Address</b> - If the CFO is listed in a major phone directory showing the name of the business and the physical address, then just the City, State and Zip Code may be printed on the label.
<b>Consumer Notification</b> - All labels must contain the wording "Made in a Home Kitchen" or "Repackaged in a Home Kitchen". <i>*This is the exact wording that must be used and must be printed in at least 12 point font.</i>
<b>List of Product Ingredients</b> - If the product contains <u>two or more ingredients</u> , the ingredients must be listed in descending order of predominance by weight. Sub-ingredients of a food listed as an ingredient must also be listed following the name of the ingredient.
<b>Allergen Declaration</b> - If the food contains any of the major food allergens: milk, eggs, tree nuts (e.g., almonds, pecans, walnuts), wheat, peanuts, or soybeans (or soy based products), a declaration of the allergens present must be provided.
<b>Net Quantity</b> - Refers to the quantity (weight or volume) of food in a package or container. Information must be stated in BOTH English Units (pound) and Metric Units (grams).
<b>Permit Number</b> - This number will be issued following approval of the submitted CFO application. For label submittal purposes, the following placeholder may be used: <i>DEH2017-FCFO-XXXXXX</i> .
<b>Name of Issuing County</b> - The following must be on each Class B label: <i>Permit Issued by San Diego County.</i>



**CLASS B CFO Label Sample**  
Uses the wording "Permit Issued By"

*\*The smallest acceptable letter size for the label text is 1/16<sup>th</sup> of an inch in height measured at a lower case "o", with the exception of "Made in a Home Kitchen" or "Repackaged in a Home Kitchen" which is required to be at least 12 point font.*

**IMPORTANT:** A Nutrition Facts Panel must be incorporated into the label if the food label makes any nutrient content health claims. Using the following eleven terms are considered a nutrient content health claim (nutritional value of a food): **free, low, reduced, fewer, high, less, more, lean, extra lean, good source, and light.**

*"Environmental and public health through leadership, partnership and science"*



# County of San Diego

## DEPARTMENT OF ENVIRONMENTAL HEALTH FOOD AND HOUSING DIVISION

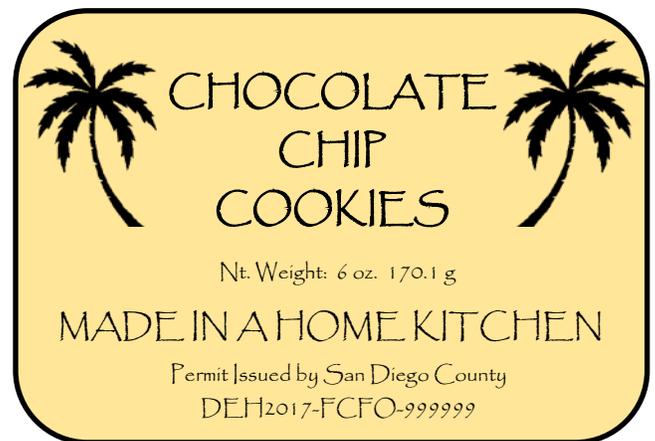


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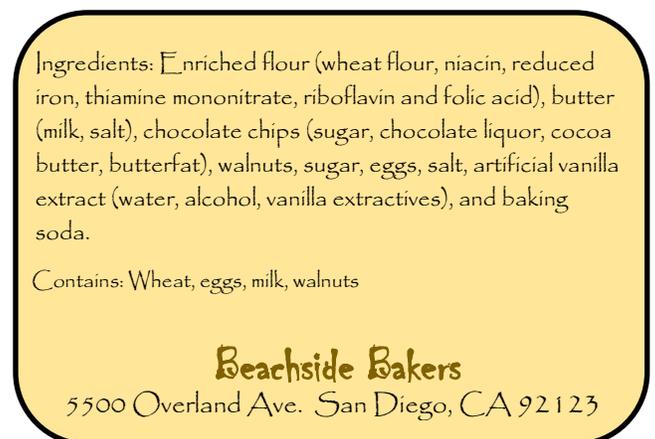
### LABELING REQUIREMENTS – SPLIT LABEL

All proposed Cottage Food Operations (CFOs) shall submit labels for review for the corresponding products that are going to be produced. Cottage Food Operators are required to submit labels for no more than ten (10) products for review including at least one product from each category of food to be prepared. Any product labels above the initial ten (10) that are submitted for review will be subject to the current DEH-FHD hourly rate. These labels must contain specific information as required by the California Department of Public Health (CDPH). Labels submitted for DEH review must contain all required information to be approved. If desired, information may be distributed by using a *Principal Display Panel* and an *Information Panel*.

PRINCIPAL DISPLAY PANEL REQUIREMENTS
<b>Product Name</b> - This is the common name of product.
<b>Consumer Notification</b> - All labels must contain the wording "Made in a Home Kitchen" or "Repackaged in a Home Kitchen". <i>*This is the exact wording that must be used and must be printed in at least 12 point font.</i>
<b>Net Quantity</b> - Refers to the quantity (weight or volume) of food in a package or container. Information must be stated in BOTH English Units (pound) and Metric Units (grams).
<b>Registration Number</b> - This number will be issued following approval of the submitted CFO application. For label submittal purposes, the following placeholder may be used: DEH2017-FCFO-XXXXXX.
<b>Name of Issuing County</b> - The following must be on each label: <i>Registration/Permit Issued by San Diego County.</i>
INFORMATION PANEL REQUIREMENTS
<b>Business Name</b> - This is the registered name of the Cottage Food Operation.
<b>Business Address</b> - This is the physical address of Cottage Food Operation which needs to include: Street Number, Street Name, City, State, Zip Code.
<b>Alternative Business Address</b> - If the CFO is listed in a major phone directory showing the name of the business and the physical address, then just the City, State and Zip Code may be printed on the label.
<b>List of Product Ingredients</b> - If the product contains <u>two or more ingredients</u> , the ingredients must be listed in descending order of predominance by weight. Sub-ingredients of a food listed as an ingredient must also be listed following the name of the ingredient.
<b>Allergen Declaration</b> - If the food contains any of the major food allergens: milk, eggs, tree nuts (e.g., almonds, pecans, walnuts), wheat, peanuts, or soybeans (or soy based products), a declaration of the allergens present must be provided.



**Principal Display Panel**



**Information Panel**

**IMPORTANT:** A Nutrition Facts Panel must be incorporated into the label if the food label makes any nutrient content health claims. Using the following eleven terms are considered a nutrient content health claim (nutritional value of a food): *free, low, reduced, fewer, high, less, more, lean, extra lean, good source, and light.*

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**County of San Diego**  
 DEPARTMENT OF ENVIRONMENTAL HEALTH  
 FOOD AND HOUSING DIVISION  
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### Single Label Samples

CHOCOLATE  
CHIP COOKIES

MADE IN A HOME  
KITCHEN

Beachside  
Bakers

5500 Overland Ave. San Diego, Ca 92123

Nt. Weight: 6 oz 170.1 g

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), walnuts, sugar, eggs, salt, artificial vanilla extract (water, alcohol, vanilla extractives), and baking soda.

Contains: Wheat, eggs, milk, walnuts

Registration Issued by San Diego County  
DEH2017-FCFO-999999

**CLASS A CFO Label Sample**  
 Uses the wording "Registration Issued By"

5500 Overland Ave. San Diego, Ca 92123

Beachside  
Bakers

CHOCOLATE  
CHIP COOKIES

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), walnuts, sugar, eggs, salt, artificial vanilla extract (water, alcohol, vanilla extractives), and baking soda.

Contains: Wheat, eggs, milk, walnuts

Nt. Weight: 6 oz 170.1 g

MADE IN A HOME KITCHEN

Permit Issued by San Diego County DEH2017-FCFO-999999

**CLASS B CFO Label Sample**  
 Uses the wording "Permit Issued By"

### Split Label Sample

CHOCOLATE  
CHIP  
COOKIES

Nt. Weight: 6 oz. 170.1 g

MADE IN A HOME KITCHEN

Permit Issued by San Diego County  
DEH2017-FCFO-999999

**Principal Display Panel**

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), walnuts, sugar, eggs, salt, artificial vanilla extract (water, alcohol, vanilla extractives), and baking soda.

Contains: Wheat, eggs, milk, walnuts

Beachside Bakers  
5500 Overland Ave. San Diego, Ca 92123

**Information Panel**



# County of San Diego

## DEPARTMENT OF ENVIRONMENTAL HEALTH FOOD AND HOUSING DIVISION

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### COTTAGE FOOD OPERATION REGISTRATION

#### Cottage Food Operation (CFO) Contact Information

CFO Name _____	Assessor's Parcel No. _____
CFO Address _____	City _____ Zip _____
CFO Owner's Name _____	Phone _____
Mailing Address _____	City _____ Zip _____
E-Mail Address _____	@ _____

#### CATEGORIES:

- Class A: Direct Sales only** (self-certification checklist is required)       **Class B: Direct and Indirect Sales** (permit application is required)

<b>Office Use Only:</b>
Registration #: _____ Date: _____
Approved By: _____

#### PROHIBITED ITEMS:

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. If making buttercream frosting, icing, fondant and/or gum paste, it shall not contain eggs, cream or cream cheese

**PRODUCTS THAT WILL BE PREPARED AT YOUR CFO:** (Please check the items you will be preparing or selling)  
*This list is subject to change based on the current approved food list provided by the California Department of Public Health*

- |   |   |  |  |
|---|---|--|--|
| <input type="checkbox"/> Baked Goods                | <input type="checkbox"/> Dried Pasta                            | <input type="checkbox"/> Marshmallows                    | <input type="checkbox"/> Tortillas                     |
| <input type="checkbox"/> Candy/Confections          | <input type="checkbox"/> Dried Soup Mixes                       | <input type="checkbox"/> Mustard                         | <input type="checkbox"/> Vinegar                       |
| <input type="checkbox"/> Churros                    | <input type="checkbox"/> Dry Baking Mixes                       | <input type="checkbox"/> Popcorn/Popcorn Balls           | <input type="checkbox"/> Waffle Cones                  |
| <input type="checkbox"/> Candied Apples             | <input type="checkbox"/> Fruit Butters                          | <input type="checkbox"/> Pizzelles                       | <input type="checkbox"/> Jams/Jellies/Preserves        |
| <input type="checkbox"/> Chocolate Covered Food     | <input type="checkbox"/> Fruit Tamales/Pies/<br>Fruit Empanadas | <input type="checkbox"/> Nuts/ Nut Mixes/<br>Nut Butters | <input type="checkbox"/> Dried Tea/<br>Roasted Coffee  |
| <input type="checkbox"/> Dried Fruit/<br>Vegetables | <input type="checkbox"/> Granola/Cereals/<br>Trail Mix          | <input type="checkbox"/> Sweet Sorghum<br>Syrup & Honey  | <input type="checkbox"/> Vegetable and Potato<br>Chips |
| <input type="checkbox"/> Dried Mole                 | <input type="checkbox"/> Herb / Spice Blends                    | <input type="checkbox"/> Salt Seasoning                  | <input type="checkbox"/> Cotton Candy                  |

Other (please specify) \_\_\_\_\_

## COTTAGE FOOD OPERATION REGISTRATION

**POTABLE WATER SOURCE: Check the water source you will use in your Cottage Operation**

**City Water District** (please indicate water district below)

**Private Well\***

**WASTEWATER DISPOSAL: Indicate the type of system you will use to dispose of wastewater**

**Public Sewer** (please indicate sewer district below)

**Private Septic System\***

**FOR CLASS "A" & "B" OPERATIONS**

- Be advised the additional wastewater flows from your cottage food operation may have an impact on your septic system
- If the site is served by a water well, the Department of Environmental Health (DEH) requires that the water be analyzed by a private lab to ensure it meets minimum bacterial and chemical standards
- An annual well water analysis is required and shall consist of a total coliform bacteria test which shows the absence of coliform bacteria and a nitrate test which shows nitrates are at or below the MCL for nitrates.
- Should you have questions regarding this, please contact the Land & Water Quality Division at (858) 565-5173.

**TRAINING REQUIREMENT: FOOD PROCESSOR COURSE:**

Within **3 months** of being approved to operate by the Department of Environmental Health, you must provide proof of completion of the required California Department of Public Health (CDPH) food processor course, or other approved Food Safety Training Course. Proof of completion may be faxed to the Department at **(858) 999-8920** or emailed to [fhdcottagefood@sdcounty.ca.gov](mailto:fhdcottagefood@sdcounty.ca.gov). For information on CDPH course availability, visit their web site at [www.cdph.ca.gov](http://www.cdph.ca.gov).

**LABELING:**

All cottage food must be labeled in accordance with the [Federal Food, Drug, and Cosmetic Act \(Title 21 of the U.S. Code; Sect. 343 et seq.\)](#).

The cottage food label shall include the following:

1. The words "**Made in a Home Kitchen**" in 12-point type. "Repackaged in a Home Kitchen" to be used when applicable and must also be printed in at least 12pt font.
2. The name commonly used for the food product.
3. The name of CFO which produced the food (Registered with DEH-FHD).
4. The physical address of the Cottage Food Operation.
5. The registration number (Class A) or permit number (Class B) and the name of the local enforcement agency that issued the permit (San Diego County).
6. The product ingredients in descending order by weight.
7. A declaration if the product contains any of the major food allergens allowed to be used as ingredients in Cottage Food Products.
8. The net weight of the product listed in grams and ounces.

**\*\*For Class B Operations only:** Products served without packaging or labeling shall be identified as homemade to the customer at a food facility; this can be done on the menu, menu board or any other easily accessible location

**Along with your completed registration form, submit a copy of no more than ten (10) label(s) for your cottage food product(s) to this Department for review.**

**Operator's Certification Statement and Signature:**

**CERTIFICATION STATEMENT:** I certify under penalty of law that I am the operator of this cottage food operation, not an employee or household member of the true operator. I further certify, based on my direct personal knowledge, that the statements of conformance with legal requirements made by my checkmarks on this document are true and correct. I will comply with the applicable requirements of the California Health and Safety Code and applicable County or City codes, including any directives or orders issued under the codes. I also certify that no modifications or alterations have been made to my residence to accommodate this cottage food operation that would require a building permit, and that prior to making any modifications, the appropriate building permits will be obtained from the local building department. I understand that the registration I am seeking will not be transferable to another person or location, and that this registration will become invalid and this cottage food operation illegal if required fees, including annual renewal fees, are not paid when due.

Owner's Signature: \_\_\_\_\_

Date: \_\_\_\_\_

Owner's Printed Name: \_\_\_\_\_



# County of San Diego

## DEPARTMENT OF ENVIRONMENTAL HEALTH APPLICATION FOR PUBLIC HEALTH PERMIT



**-OFFICE USE ONLY-**

**ADDRESS:**

5500 OVERLAND AVE #170  
SAN DIEGO, CA 92123  
PHONE: (858) 505-6666  
FAX: (858) 999-8920

**MAILING ADDRESS:**

P.O. BOX 129261  
SAN DIEGO, CA 92112-9261

New #: \_\_\_\_\_

Previous #: \_\_\_\_\_

Record Type: \_\_\_\_\_

New  Change of Owner  Update Record  Exempt

- Please print clearly, using **BLUE** or **BLACK** ink **ONLY**/Por favor escribir legible con tinta **NEGRA** o **AZUL** Solamente -

**TYPE OF APPLICATION (Check one per site)**  Food Facility  Mobile Food  Pool/Body of Water  Massage Establishment  
 Public Housing  Body Art Facility  Resort/Entertainment Complex  Seasonal Organized Camp  Annual Organized Camp  
 Class B Cottage Food Operation  Host Facility  Catering  Direct Sales Catering  Charitable Feeding Food Facility

<b>RECORD INFORMATION/Información del Establecimiento</b>	<b>Business Name (DBA)/</b> Nombre del establecimiento: _____
<b>Assumed Business Date/Fecha de inicio:</b> Month/Mes: _____ Day/Día: _____ Year/Año: _____	<b>Days &amp; Hours of Operation/</b> Días y horas de operación: _____

**BUSINESS/APPLICANT INFORMATION/Información del Establecimiento**  Check if same as owner/Marque si igual al dueño

Name/Nombre: \_\_\_\_\_ Email/Correo electrónico: \_\_\_\_\_  
 Phone #/Número de teléfono: \_\_\_\_\_ Home Phone#/Número de casa: \_\_\_\_\_  
 Fax #/Número de fax: \_\_\_\_\_ Mobile Phone#/Número de cell: \_\_\_\_\_  
 Street #/Número de la calle: \_\_\_\_\_ Street Name & Suite/Nombre de la calle: \_\_\_\_\_ City/Ciudad: \_\_\_\_\_ Zip Code/Código postal: \_\_\_\_\_

**BILLING ADDRESS/ Dirección de Correspondencia**  Check if same as owner/Marque si igual al dueño

Name/Nombre: \_\_\_\_\_ Email/Correo electrónico: \_\_\_\_\_  
 Phone #/Número de teléfono: \_\_\_\_\_ Home Phone#/Número de casa: \_\_\_\_\_  
 Fax #/Número de fax: \_\_\_\_\_ Mobile Phone#/Número de cell: \_\_\_\_\_  
 Street #/Número de la calle: \_\_\_\_\_ Street Name & Suite/Nombre de la calle: \_\_\_\_\_ City/Ciudad: \_\_\_\_\_ Zip Code/Código postal: \_\_\_\_\_

**OWNER INFORMATION/Información del Dueño** **Type of Ownership/Tipo de organización:**  Sole Owner/Dueño único  
 Partnership/Sociedad  Corporation/Corporación  Non-Profit/Sin fines de lucro

**Owner Name (Corp, LLC, or Sole Owner)/Dueño:** \_\_\_\_\_  
 Please list the NAME of the entity if applicable. An honorably discharged veteran who is a sole owner may be entitled to a fee exemption for certain food related permits.  
**Owner Email/Correo electrónico del dueño:** \_\_\_\_\_  
**List of Partners or Officers (attach separate sheet if necessary)/Lista de Socios:** \_\_\_\_\_  
 Phone #/Número de teléfono: \_\_\_\_\_ Home Phone#/Número de casa: \_\_\_\_\_  
 Fax #/Número de fax: \_\_\_\_\_ Mobile Phone#/Número de cell: \_\_\_\_\_  
 Street #/Número de la calle: \_\_\_\_\_ Street Name & Suite/Nombre de la calle: \_\_\_\_\_ City/Ciudad: \_\_\_\_\_ Zip Code/Código postal: \_\_\_\_\_

**FOOD FACILITIES ONLY/Establecimientos de Comida Solamente**

# of Employees/Número de empleados: \_\_\_\_\_ Total # of Prep Areas/Número de áreas de preparación (deli, bakery, etc.): \_\_\_\_\_  
 Square Footage/Area en pies cuadrados: \_\_\_\_\_ # of Vending Machines/Número de maquinas: \_\_\_\_\_

**MOBILE FOOD FACILITIES ONLY/Móviles de Comida Solamente**

**MUST SUBMIT COMMISSARY AGREEMENT LETTER, TOILET FACILITY LETTER (if applicable/si es aplicable)**  
**Will the mobile unit be operating at one location at all times?/Estará la unidad móvil trabajando en una sola ubicación?**  
 Yes/Si  No (If no, please provide a list of locations/Si no, porfavor incluya una lista de las ubicaciones)  
**Indicate # of Mobile Units (In addition to the sink cart)/ Numero de Unidades Móviles (Aparte del sink móvil):** \_\_\_\_\_

**HOUSING PERMIT ONLY/Permiso de Viviendas Solamente**

Indicate # of Housing Units/Número de unidades: \_\_\_\_\_

Name of Management Company/Nombre de la compañía administradora (if applicable/si es aplicable): \_\_\_\_\_

Primary Contact Name/Nombre del contacto principal: \_\_\_\_\_

Phone #/Número de teléfono: \_\_\_\_\_ Email/Correo electrónico: \_\_\_\_\_

**POOL PERMIT ONLY/Permiso de Piscina Solamente**

Bodies of Water: # of Pool(s): \_\_\_\_\_ # Spa(s): \_\_\_\_\_ # of Wader(s): \_\_\_\_\_ # of Spray Ground(s) : \_\_\_\_\_ Other: \_\_\_\_\_

Name of Management Company/Nombre de la compañía administradora (if applicable/si es aplicable): \_\_\_\_\_

Primary Contact Name/Nombre de contacto principal: \_\_\_\_\_

Phone #/Número de teléfono: \_\_\_\_\_ Email/Correo electrónico: \_\_\_\_\_

**BODY ART FACILITY ONLY/Arte de Cuerpo Solamente****INDICATE THE SERVICES YOU WILL BE PROVIDING/ Indique los servicios que serán proporcionados**

(Check all that apply/Marque todos que apliquen)

 Tattooing     Permanent Cosmetics     Body Piercing     Branding     Mobile Body Art**- INFECTION PREVENTION & CONTROL PLAN (IPCP) TO BE SUBMITTED WITH APPLICATION.****- PRACTITIONERS MUST BE REGISTERED WITH DEH.**

Applicable to all permits: I declare under penalty of perjury that to the best of my knowledge and belief, the statements made herein are correct and true. I hereby consent to all necessary fees and inspections made pursuant to law and incidental to the issuance of this permit and the operation of this business. I also agree to conform to all conditions, orders, and directions, issued pursuant to the California Health and Safety Code, and all applicable County and City Ordinances.

Authorized Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Print Name: \_\_\_\_\_ Title: \_\_\_\_\_

**CHANGE OF OWNERSHIP ONLY/Cambio de Dueño Solamente****Documents required to process change of ownership/Documentos requeridos para procesar el cambio de dueño:**

- \*Health Permit Application
- \*Proof of ownership (such as: business license, seller's permit, etc)
- \*Menu (if applicable)
- \*Change of ownership questionnaire (if applicable)

**After an invoice is generated, the following payment options are available/Después de que se genere una factura, existen varias opciones para realizar el pago:**

- \*Online at [www.dehpay.com](http://www.dehpay.com)
- \*In-person at 5500 Overland Ave, #170, San Diego, CA 92123
- \*By mail P.O. BOX 129261, San Diego, CA 92112-9261 (May take up to two weeks for processing)

NOTE: A food facility shall not be open for business without a valid health permit (Section 114381 of the California Health & Safety Code and Section 61.104 of San Diego County Code of Regulatory Ordinance). Permit fees due to DEH for the investigation of a regulated business operating without a Health Permit will be three (3) times the cost of the annual permit fee, which are payable in addition to the current permit fee.

**- FOR OFFICE USE ONLY/Para Uso de Oficina Solamente -**

New Permit #	Previous Permit # or Plan Check #	Permit Type	Units	Decal Number	Processing Clerk



# County of San Diego

## DEPARTMENT OF ENVIRONMENTAL HEALTH FOOD AND HOUSING DIVISION

P.O. BOX 129261, SAN DIEGO, CA 92112-9261  
Phone: (858) 505-6900 | Fax: (858) 999-8920 | [www.sdcdeh.org](http://www.sdcdeh.org)



### ADDENDUM INFORMATION

#### Cottage Food Operation (CFO) Contact Information

CFO Name \_\_\_\_\_

CFO Address \_\_\_\_\_ City \_\_\_\_\_ Zip \_\_\_\_\_

CFO Owner's Name \_\_\_\_\_ Phone \_\_\_\_\_

Mailing Address \_\_\_\_\_ City \_\_\_\_\_ Zip \_\_\_\_\_

E-Mail Address \_\_\_\_\_ @ \_\_\_\_\_

**This addendum contains information for the Cottage Food Operation (CFO) owner and outlines their responsibilities. Please read each statement carefully and initial confirming your understanding.**

\_\_\_\_\_ My Cottage Food Operation shall not have more than fifty thousand dollars (\$50,000) in gross annual sales in the calendar year.

\_\_\_\_\_ My Cottage Food Operation shall only conduct indirect sales within the County of San Diego.

\_\_\_\_\_ My Cottage Food Operation shall not ship the product through a third party. All products must be delivered by the CFO, or an employee of the CFO, directly to the consumer.

\_\_\_\_\_ I understand that Cottage Food Products include only non-potentially hazardous foods, limited to the foods that are described in the approved food list in the California Retail Food Code and maintained current by the California Department of Public Health (CDPH).

\_\_\_\_\_ I understand that any buttercream frostings, buttercream icings, buttercream fondant and gum pastes prepared in my cottage food operation cannot contain eggs, cream or cream cheese.

\_\_\_\_\_ I understand that I am responsible to ensure that all product labels meet the requirements established by the California Department of Public Health (CDPH) and San Diego County Department of Environmental Health (DEH-FHD).

\_\_\_\_\_ I understand that a Class A Cottage Food Operation may engage in direct sales only.

\_\_\_\_\_ I understand that Class B Cottage Food Operation may engage in direct & indirect sales only.

\_\_\_\_\_ I understand that I am required to maintain my permit (Class B) or registration (Class A) at any point of direct sales and provide it for inspection when requested.

Owner's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Owner's Printed Name: \_\_\_\_\_



