

## SUTTER COUNTY DEVELOPMENT SERVICES DEPARTMENT

Building Inspection Code Enforcement Engineering/Water Resources Environmental Health/CUPA

Planning Road Maintenance

## COTTAGE FOOD OPERATION (CFO)

## **SELF-CERTIFICATION CHECKLIST**

| Regis                             | stration or Permit Type:  |     |           |  |  |
|-----------------------------------|---|-----|-----------|--|--|
| Business (CFO) Name:              |   |     |           |  |  |
| Business (CFO) Address:           |   |     |           |  |  |
| City Zip                          |   |     |           |  |  |
| Owner                             | r's Name:   |     |           |  |  |
| Owner's Mailing Address:          |   |     |           |  |  |
|                                   | City Zip  |     |           |  |  |
| Owner's Telephone: Owner's Email: |   |     |           |  |  |
|                                   | 1. Zoning Compliance  | Yes | <u>No</u> |  |  |
| 1.1.                              | Signature of Planner: Date:   |     |           |  |  |
|                                   | New CFO (or existing CFO with change of address) meets all applicable zoning requirements?  |     |           |  |  |
|                                   |   |     |           |  |  |
| 2. Facility Requirements          |   |     |           |  |  |
| 2.1.                              | CFO is located in a private dwelling where the CFO operator currently resides   |     |           |  |  |
| 2.2.                              | All CFO food preparation will take place in the private kitchen within the home   |     |           |  |  |
| 2.3.                              | All storage used for the CFO will be within the home  |     |           |  |  |
| 2.4.                              | Sleeping quarters are excluded from areas used for CFO food preparation and storage   |     |           |  |  |
| 2.5.                              | Is your water source a public water system or community services district?  |     |           |  |  |
|                                   | Note: If your CFO is on a private well, laboratory results confirming the absence of total and fecal coliform bacteria and nitrates must be submitted annually. |     |           |  |  |
|                                   |   |     |           |  |  |
|                                   | or-   |     |           |  |  |
|                                   | ·   |     |           |  |  |
|                                   | <ol><li>Employee and Training Requirements</li></ol>  |     |           |  |  |
| 3.1.                              | Have all persons preparing or packaging CFO products completed the CDPH food processor course?  |     | П         |  |  |
| 3.2.                              | The CFO has no more than 1 full-time employee (not counting family/household members)   |     |           |  |  |

|  | 4. Sanitation Requirements  | <u>es</u> |               |
|--|---|-----------|---------------|
| 4.1.   | Kitchen equipment and utensils used in the CFO are clean and in a good state of repair  | 🗖         |               |
| 4.2.   | 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  | o         |               |
| 4.3.   | Food preparation and food/equipment storage areas shall be maintained free of rodents and insects   | 🗖         |               |
|  | 5. Food Handling and Preparation Requirements   |           |               |
| 5.1.   | Hands shall be washed immediately prior to handling foods and after engaging in any activity that contaminates the hands, such as after using the toilet, coughing/sneezing, eating or smoking  |           | _             |
| 5.2.   | Warm water, pump soap, and single use paper towels are available for hand washing   |           |               |
| 5.3.   | All food ingredients used in the CFO products must be from an approved source   |           |               |
| 5.4.   | During the preparation, packaging or handling of CFO products the following will be excluded from the CFO area:   | U         |               |
|  | Domestic activities such as family meal preparation, dishwashing, clothes washing or ironing, kitchen cleaning, or guest entertainment  | <b>-</b>  |               |
|  | Infants, small children, or pets  | 🗖         |               |
|  | • Smoking   | 🗖         |               |
|  | Any person with a contagious illness  | 🗖         |               |
|  | 6. Labeling Requirements  |           |               |
| 6.1.   | All CFO products must be labeled in compliance with the Federal Food, Drug, and Cosmetic Act and include: (a) The words "Made in a Home Kitchen" in 12-point type; (b) Common name of product or a descriptive name; (c) Name of the Cottage Food Operation; (d) Registration or permit number and county issuing permit; and (e) Ingredients in descending order of weight; (f) Net quantity of food product; (g) Allergen information. <sup>1</sup> | - 🗖       | _             |
|  | 7. Permissible Sales Requirements   |           |               |
| 7.1.   | CFO owner agrees to restrict gross sales of CFO products to maximum \$50,000  | - 🗖       |               |
|  | Cottage Food Operation Owner Certification  |           |               |
| THE CFO REGISTRATION OR PERMIT IS NON-TRANSFERABLE AND VALID ONLY FOR THE PERMIT, LOCATION, TYPE OF FOOD SALES, AND DISTRIBUTION ACTIVITY SPECIFIED. |   | Г,        |               |
| Printe   | ed Name Date Signature  | Dat       | <u>—</u><br>е |

 $<sup>^1</sup> Labeling\ requirements\ are\ fully\ described\ by\ the\ California\ Department\ of\ Public\ Health\ and\ can\ be\ accessed\ at\ this\ link: \\ \underline{https://www.cdph.ca.gov/Programs/CEH/DFDCS/CDPH%20Document%20Library/FDB/FoodSafetyProgram/GeneralFoodLabelingRequirements.pdf}$