

Application for Cottage Food Operations Registration Section 1: General Information

	Business Contact Information
Owner/Operator Name:	Name of Cottage Food Operation:
Home Address:	Cottage Food Operation Address:
Home City:	City:
State: ZIP:	State: ZIP:
County:	County:
Home Phone:	Business Phone:
Personal Email:	Business Email:
	Business Website:
_	D number: Exp. Date:ttage Food Registration number
_	variety of food and drink in their home kitchen.
Check off all products you intend to produce.	



Items with additional instruction
□ Salad dressings, vinegars, infused oils
□ Cheesy bread or other baked goods containing cheese
□ Fermented foods (kimchi, kraut, etc.)
□ Acidified fruits or vegetables (pickles, shrubs, hot sauces, relishes, condiments)
□ Cakes, cupcakes, and other baked goods with frostings and icings
□ Fresh cut fruit and vegetables (zucchini noodles, pasta salads with vegetables, fruit bowls, etc.)
□ Canned tomato products
□ Vegan soups, vegan meals, or other heat-treated produce
□ Fresh-pressed juices or bottled drinks
Other:

Section 3: Sales Avenues

Food and drink produced by a cottage food operation shall be sold directly to consumers for their own consumption and not for resale. Sales to retail stores, such as restaurants, grocery stores, or bakeries; to third party distributors for resale; or to third party distributors that deliver products on your behalf are prohibited. Sales of cottage foods are limited to within the state of Illinois. A cottage food operation may sell products outside of the municipality or county where the cottage food operation is located. A copy of your certificate of registration must be available upon request by IDPH and any local health department.

Indicate how you will sell your products. Check all that apply.			
□ Pick-up from my home or farm (Note:	□ Online sales		
cottage food businesses selling from their	□ Delivery directly to customer]	
home may be	□ Farmers market/fairs/festivals/pop up		
prohibited from some sales activities at	stand/public]	
home by local	event]	
laws that apply to all cottage food	□ Shipping (Each cottage food product]	
operations. Check	that is shipped	1	
with your unit of local government about	must be sealed in a manner that reveals	ì	
requirements	tampering,]	
on parking, signage, customer counts, etc.).	including, but not limited to, a sticker or]	
□ On-farm store	pop top. Cottage]	
□ Delivery to or pick-up from a third-party	foods may not be shipped across state	}	
private	lines.)]	
property with consent of the property holder	□ Other:	1	
(i.e.,			
dropoff/pick-up location/pop-up stand).		}	
		l	



If you selected "Shipping" from above, describe how you will seal your product in a manner that prevents tampering:

Section 4: Signage

At the point of sale, notice must be provided in a prominent location that states the following:

"This product was produced in a home kitchen not inspected by a health department that may also process common food allergens. If you have safety concerns, contact your local health department." At a physical display, notice shall be a placard.

Online, notice shall be a message on the cottage food operation's online sales interface at the

Online, notice shall be a message on the cottage food operation's online sales interface at the point of sale.

Indicate the ways in which you will notify customers at point of sale:

□ Prominent placard at my booth/stall (8in x 10in minimum).
□ Signage placed prominently at the pick-up location at my home/farm (8in x 10in
minimum).
□ Language placed prominently at the point of sale on my website or sales platform.
□ Other:

Section 5: Labeling

All cottage food products must be pre-packaged in the home kitchen. The food packaging must conform to the labeling requirements of the Illinois Food, Drug, and Cosmetic Act, and must contain the following phrase in prominent lettering:

"This product was produced in a home kitchen not inspected by a health department that may also process common food allergens. If you have safety concerns, contact your local health department."

Special Labeling Opportunity for Local Ingredients

Are you using any ingredients grown or raised on an Illinois farm and purchased directly from the farmer? If so, you are entitled and encouraged to use the following terminology on your label: Illinois Grown, Illinois-Sourced, Illinois Farm Product



Request for a labeling exemption

Cottage food operators may request an exemption from product packaging for foods that are not easily packaged (i.e., wedding cakes), for foods that are more suited to bulk containers or display cases (i.e., donuts or scones), or for other reasons. If the exemption is granted, the cottage food producer must include all labeling requirements on a receipt or similar document that is delivered to that consumer with the product, and the cottage food warning sign must still be present at poin of sale. The local health department has the authority to accept or deny the exemption request.					
□Request for product packaging exemption					
List the products for v	which you are requesting an exemp	ption and provide a rationale:			
Section 6: Employe	es				
Employees are allowed under cottage food law. All persons that prepare or package food must have their Certified Food Protection Manager (CFPM) Certificate. The CFPM is not required for employees that handle sales, marketing, administration, or other facets of the business.					
List the persons that	t prepare or package food:				
Name:	CFPM number:	Exp. Date:			
Name:	CFPM number:	Exp. Date:			
Name:	CFPM number:	Exp. Date:			
Section 7: Checklist	of Required Information				
□ A copy of a valid Food Service Protection Manager Certificate.					
□ A product label for each product category selected in Section 2, demonstrating that you are complying correctly with labeling regulations.					
□ If on a private wate bacteria results.	r supply, a copy of water test resul	Its showing satisfactory E. coli/coliform			
□ If producing acidified or fermented foods (pickles, kraut, kimchi, etc.), one of the following:					

A. A completed food safety plan and representative pH Test for each product with a different food safety process.

Example: Delia makes pickled cucumbers, pickled beets, kimchi, and hot sauces. Each of



these four products requires a different process to make. She will need to submit a food safety plan and pH test for all four products.

Example: Janae makes a pickled cucumber recipe that has five different variations (one with dill, one with jalapenos, one with more sugar, one with stevia, and one with ginger). Although the recipes vary slightly, the pickling process is the same for all five recipes. Janae must submit just one food safety plan and a pH test for at least one pickle recipe as evidence that her process is safe. A pH test and food safety plan are not required for all five recipe variations.

B. An approved recipe from the U.S. Department of Agriculture (USDA) National Center for Home Food Preservation or the cooperative extension office of any state.

If producing canned tomatoes or canned tomato products (i.e., salsa, pasta sauce, etc.), one of the following:
 A. pH test for each canned tomato recipe
 B. An approved canning recipe from the USDA National Center for Home Food Preservation or the cooperative extension office of any state.

□ \$_____ Registration fee in cash or check

Section 8: Owner Statement

□ The information provided in this application accurately represents my operation. I understand that I must grant a local health official access to my residence for the purpose of inspection in the event of an illness outbreak, upon notice from a different
local health department, or if IDPH or a local health department has reason to believe
that an imminent health hazard exists, or that a cottage food operation's product has
been found to be misbranded, adulterated, or not in compliance with the conditions for cottage food operations set forth in section 4 of the IL Food Handling Regulation Enforcement Act (FHREA), effective 1-1-22.

□ I understand that if an inspection is warrante of \$	ed, I may be charged a fee by the health department
Signature	Date



For office use only			
\$ Registration Fee: Cash Check # F	Registration Number		
Remarks / Notes:			
□ Accepted □ Denied By: Date:			