



Public Health
Prevent. Promote. Protect.

Henry & Stark County Health Department
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APPLICATION FOR COTTAGE FOOD OPERATION REGISTRATION

“Cottage Food Operation” means a person who produces or packages non-potentially hazardous food in a kitchen of that person’s primary domestic residence for direct sale by the owner or a family member, stored in the residence where the food is made.

Henry County

Stark County

	Name	Address	Phone number
Business			
Owner(s)			

CERTIFIED FOOD HANDLERS

NAME	ID NUMBER (issued by IDPH)

PRODUCTS (please circle the items you will be making and selling)

Dry herb, dry herb blend or dry tea blend intended for end-use only:

Jam Jelly Preserves Fruit Pie:

apple apricot grape peach plum quince orange nectarine tangerine blackberry
raspberry blueberry boysenberry cherry cranberry strawberry red currants

Combination of the above: _____

Fruit Butter:

apple apricot grape peach plum quince prune

Breads Cookies Cakes Pies Pastries:

The following product(s) have been tested and documented by a commercial laboratory and deemed “Not Potentially Hazardous”, containing a pH equilibrium of less than 4.6

Item: _____

PRODUCT LABELING

- The name and address of the cottage food operation
- The common or usual name of the food product
- All ingredients including colors, artificial flavors, preservatives, listed in descending order of predominance by weight
- Statement **“This product was produced in a home kitchen not subject to public health inspection that may also process common food allergens.”**
- The date the product was processed
- Allergen labeling as specified in federal labeling requirements.

OWNER'S STATEMENTS

1. This food will only be sold at a Farmer's Market.
2. Gross sales do not exceed \$25,000 each calendar year.
3. I will place a placard at my stand with the following wording: **“This product was produced in a home kitchen not subject to public health inspection that may also process common food allergens.”**
4. I understand that if my product receives a complaint, or if the Henry County/Stark County Health Department believes an imminent health hazard exists, including suspicion that a food borne illness outbreak has occurred, my operation will cease until it is deemed safe by the Health Department.
I agree to have the Henry County/Stark County Health Department inspect my premises at a reasonable fee if such complaint or food borne illness outbreak occurs.

Signature(s) of Owners: _____

Date: _____