



Grundy County Health Department Environmental Health

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APPLICATION FOR COTTAGE FOOD INDUSTRY REGISTRATION

Name of Business: _____ Phone #: _____

Owner Name(s): _____

Address where food is being prepared: _____

Mailing address if different from above: _____

CERTIFIED FOOD PROTECTION MANAGER CERTIFICATION

Name	Certificate Number	Expiration Date

PRODUCTS (please circle 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 above: _____

Fruit Butter:

Apple apricot grape peach plum quince prune

Breads/Cookies/Cakes/Pastries:

The following product(s) have been tested by a commercial laboratory and deemed "Not Potentially Hazardous" with a pH below 4.6. Attach a copy of laboratory results.

Item(s): _____

PRODUCT LABELING

All items listed below must be included on product label and an example label must be submitted with registration.

- 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 decreasing order of prominence 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

I, _____, agree to grant access to the local health department to conduct an inspection of my cottage food operation’s primary domestic residence in the event of a consumer complaint or foodborne illness outbreak.

Signature: _____ Date: _____

For Office Use Only:

GCHD Approval: _____ *Date:* _____

Registration Number: _____