

Environmental Health Program
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Application for Cottage Food Operations Registration

Section 1: General Information

Personal Contact Information	Business Contact Information		
Owner/Operator Name:	Name of Cottage Food Operation:		
Home Address: Home City: State:ZIP: County: Home Phone: Personal Email:	Cottage Food Operation Address: City:		
Food Service Protection Manager Certificate ID number:Exp. Date: Previously registered? □Yes □No If yes, Cottage Food Registration number			
A cottage food operation may produce a wide variety of food and drink in their home kitchen. Check off all products you intend to produce.Low-risk shelf stable products Jams, jellies, preserves, syrups Fruit butters, fruit pies, fruit pastries, empanadas Bread, tortillas, cookies, scones, or other baked goods without frostings or cheese. Dehydrated or dried fruits, vegetables, and spices (dried spices, herbal teas, fruit leathers, apple chips, etc.) Roasted and/or ground coffee or nuts Candies and caramels			
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:			
Ouici			

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.

□ Pick-up from my home or farm (Note: cottage	that apply.
	☐ Online sales
food businesses selling from their home may be	
prohibited from some sales activities at home by	☐ Delivery directly to customer
local laws that apply to all cottage food	
operations. Check with your unit of local	□Farmers market/fairs/festivals/pop up stand/public
government about requirements on parking,	event
signage, customer counts, etc.).	
	□Shipping (Each cottage food product that is
☐ On-farm store	shipped must be sealed in a manner that reveals
	tampering, including, but not limited to, a sticker or
□ Delivery to or pick-up from a third-party private	pop top. Cottagefoods may not be shipped across
property with consent of the property holder (i.e.,	state lines.)
drop-off/pick-up location/pop-up stand).	
	☐ Other:
Section 4: Signage	
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At the point of sale, notice must be provided in a promir was produced in a home kitchen not inspected by a food allergens. If you have safety concerns, contact notice shall be a placard.	health department that may also process common your local health department." At a physical display,
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At the point of sale, notice must be provided in a promir was produced in a home kitchen not inspected by a food allergens. If you have safety concerns, contact notice shall be a placard. Online: notice shall be a message on the cottage food of Indicate the ways in which you will notify customers. □ Prominent placard at my booth/stall (8in x 10in minimal)	health department that may also process common your local health department." At a physical display, peration's online sales interface at the point of sale. at point of sale: um).
At the point of sale, notice must be provided in a promir was produced in a home kitchen not inspected by a food allergens. If you have safety concerns, contact notice shall be a placard. Online: notice shall be a message on the cottage food of the location of the cottage food of the location of the	health department that may also process common your local health department." At a physical display, peration's online sales interface at the point of sale. at point of sale: um). my home/farm (8in x 10in minimum).

Section 5: Labeling

All cottage food products must be pre-packaged in the home kitchen. The food packaging must conform to the labelingrequirements 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 FarmProduct

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 point of sale. The local health department has the authority to accept or deny the exemption request.

accept or deny the exemption	• •	cal health department has the authority to
□Request for product packag	ing exemption	
List the products for which you	u are requesting an exemption and provi	ide a rationale:
Certified FoodProtection Man	cottage food law. All persons that prepa ager (CFPM) Certificate. The CFPM is r on, or other facets of the business.	
List the persons that prepar	e or package food:	
Name:	CFPM number:	Exp. Date:
Name:	CFPM number: CFPM number:	Exp. Date:
		

Section 7: Checklist of Required Information

☐ A copy of a valid Food Service Protection Manager Certificate.

	oduct label for each product category sele ving correctly withlabeling regulations.	cted in Section 2, demonstrating that you are
☐ If on	a private water supply, a copy of water test results sh	owing satisfactory E. coli/coliform bacteria results.
☐ If pro	ducing acidified or fermented foods (pickles, kraut, ki	mchi, etc.), one of the following:
A.	A completed food safety plan and representative pH	Test for each product with a different food safety process.
		eets, kimchi, and hot sauces. Each of these four products submit a food safety plan and pH test for all four products.
	one with more sugar, one with stevia, and one with g is the same for all five recipes. Jane must submit just	t has five different variations (one with dill, one with jalapenos, inger). Although the recipes vary slightly, the pickling process one food safety plan and a pH test for atleast one pickle t and food safety plan are not required for allfive recipe
	An approved recipe from the U.S. Department of Agri the cooperative extension office of any state.	culture (USDA) National Center for Home FoodPreservation or
☐ If pro	ducing canned tomatoes or canned tomato products	(i.e., salsa, pasta sauce, etc.), one of the following:
B.	pH test for each canned tomato recipe An approved canning recipe from the USDA National extension office of any state.	Center for Home Food Preservation or the cooperative
□ \$	Registration fee in cash or check	
Section	8: Owner Statement	
health o different hazard o with the (FHREA	fficial access to my residence for the purpose of inspectional health department, or if IDPH or a local health exists, or that a cottage food operation's product has	resents my operation. I understand that I must grant a local ection in the event of an illness outbreak, upon notice from a department has reason to believe that an imminenthealth been found to be misbranded, adulterated, or not incompliance ction 4 of the IL Food Handling Regulation Enforcement Act
Signatu	re	Date
For office	use only	
\$ Reg	istration Fee: □ Cash □ Credit Card □ Check #	Registration Number:
	/ Notes:	
□ Accepte	ed □ Denied By:	