



## COTTAGE FOOD OPERATION RENEWAL/CANCELLATION/PRODUCT UPDATE FORM

This form will serve to renew, cancel, or add products to your County of Orange Cottage Food Operation (CFO) registration or permit. **Please mark all boxes that apply.**

- Renewing registration or permit
- Cancellation (will no longer operate):  
**Last date of operation:** \_\_\_\_\_
- Adding products (include a list of proposed items, along with the sample labels for the new products)

**Please complete all data fields below.**

If you have changed addresses, you must re-apply. Health permits and registrations are site-specific and non-transferrable.

COTTAGE FOOD OPERATION NAME (Please print):		PHONE (including area code):
OWNER NAME(S):		EMAIL ADDRESS:
ADDRESS OF DOMESTIC HOME KITCHEN:		WEBSITE:
PR#:	CLASS: <input type="checkbox"/> A <input type="checkbox"/> B	FOOD PROCESSOR COURSE COMPLETION DATE:

**OWNER'S STATEMENT (check each box)**  
 Pursuant to California Retail Food Code, Sections: 113758, 113789, 113851, 114021, 114023, 114365, 114376, 114390, 114405, and 114409

- I agree to notify Orange County Environmental Health prior to adding any new food product not listed at the time of application. All food products must be evaluated and approved for sale by a representative of Environmental Health prior to sale.
- I agree to notify Orange County Environmental Health if I decide to change my type of sales from Class A to Class B or vice versa, or if I decide to cease my Cottage Food Operation. I acknowledge that failing to do so may incur additional fees.
- I certify my enterprise shall not have more than \$75,000 in gross sales as a CFO Class A, or \$150,000 in gross sales as a CFO Class B, in a calendar year.
- I agree to label all cottage food products in compliance with the Federal Food, Drug, and Cosmetic Act (21 U.S.C. Sec. 343 et seq.)
- I certify that I do not have more than one (1) full-time equivalent (40 hours per week) Cottage Food Employee (paid or volunteer).
- I certify that my Cottage Food products are only sold in California.

SIGNATURE(S) OF OWNER(S):	DATE:
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**Please send completed and signed form to [EHcottagefood@ochca.com](mailto:EHcottagefood@ochca.com) or mail to the address below within 10 days of receipt. If we do not receive this form, your registration/permit will not be renewed and you must cease operation.**