



Public Health
Prevent. Promote. Protect.

Hancock County Health Department

Division of Environmental Health
671 Wabash Avenue
Carthage, Illinois 62321
(217) 357-2171
Email: melitafinney@hchd1.org

2022 APPLICATION FOR COTTAGE FOOD

Name of Business: _____ Phone #: _____

Owner's Name(s): _____

Address where food is being prepared: _____

Mailing address if different from above: _____

Email address: _____

Certified Food Protection Manager(s) - A copy must be attached to this application in order to participate.

Name	Certificate #	Expiration Date

FOOD AND DRINK PRODUCTS

Please list the items you will be making and selling

Cottage Food Product Labeling Requirements

- The name and address of the cottage food operation
 - The common or usual name of the food product
 - All ingredients including, food coloring, artificial flavors, and preservatives. Items should be listed in decreasing order of prominence by weight
 - Label must contain this statement **“This product was produced in a home kitchen not subject to public health inspections that may also process common food allergens.”**
 - The date the product was made/processed
 - Allergen labeling as specified in federal labeling requirements
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Be advised the following products are prohibited by law for Cottage Food Operations

- (A) meat, poultry, fish, seafood, or shellfish;
- (B) dairy, except as an ingredient in a non-potentially hazardous baked good* or candy, such as caramel
- (C) eggs, except as an ingredient in a non-potentially hazardous baked good or in dry noodles;
- (D) pumpkin pies, sweet potato pies, cheesecakes, custard pies, crème pies, and pastries with potentially hazardous fillings or toppings;
- (E) garlic in oil or oil infused with garlic; except if the garlic oil is acidified (as with salad dressing).
- (F) canned foods**, except the following, which may be canned only in Mason-style jars with new lids: • fruit jams, fruit jellies, fruit preserves, and fruit butters, • Syrups • Whole or cut fruit canned in syrup • Acidified fruit or vegetables • Condiments such as prepared mustard, horseradish, or ketchup that do not contain ingredients prohibited on this list and which are properly acidified
- (G) sprouts;
- (H) cut leafy greens, except for leafy greens that are dehydrated, acidified, or blanched and frozen;
- (I) cut or pureed fresh tomato or melon;
- (J) dehydrated tomato or melon;
- (K) frozen cut melon;
- (L) wild-harvested, non-cultivated mushrooms;
- (M) alcoholic beverages; or
- (N) Kombucha

*A State-certified local public health department that regulates the service of food by a cottage food operation may require a cottage food operation to submit a recipe for any baked good containing cheese, at the cottage food operator's expense, to a commercial laboratory to verify that it is non-potentially hazardous before allowing the cottage food operation to sell the baked good as a cottage food.

**All canned foods must be acidified to a final equilibrium pH of 4.6 and must be preserved in air-tight, vacuum-sealed containers that are heat processed sufficiently to enable storing the food at normal home temperatures. A State-certified local public health department that regulates the service of food by a cottage food operation may require a cottage food operation to submit a canned food that contains tomatoes, at the cottage food operator's expense, to a commercial laboratory to verify that the final product has an equilibrium pH of 4.6 or below. See the "Canning" section in the "Illinois Cottage Food Guide" for more details on canning tomatoes or foods containing tomatoes.

NOTE: Any food or drink listed in this section may still be sold if it is produced in compliance with regular agricultural or commercial food preparation laws and rules (i.e. made in a commercial kitchen). The cottage food law, which allows for food preparation in a home kitchen, is just an exception to regular commercial food laws and rules. If you wish to make a food listed in this section, please contact your local public health department to learn more about the commercial food preparation rules in your county.

For additional information about Cottage Food review the "Illinois Cottage Food Guide"
<https://www.ilstewards.org/policy-work/illinois-cottage-food-law/>

CHECK to CONFIRM

_____ The owner or family member will be present during the sale of cottage foods.

_____ The owner has a certified Food Service Sanitation Managers Certificate.

_____ 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.”***

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

_____ I understand that if my product receives a consumer complaint, or if the Hancock County Health Department believes an imminent health hazard exists, including suspicion that a food borne illness outbreak has occurred, or a cottage food operation product has found to be misbranded, adulterated, or not in compliance, then it may invoke cessation of sales until the situation has been addressed by the State Health Department in writing.

_____ I agree to have the Hancock County Health Department inspect my Cottage food operation premises at a fee set by the health department at time of investigation in the event of a consumer complaint or food borne illness outbreak occurs.

_____ I agree to display the Permit issued by the Hancock County Health Department at my Farmers Market/Cottage Food booth.

Signature(s) of owner(s) _____

Date: _____

Date: _____

Please send this application to: Hancock County Health Department
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2021 APPLICATION FOR FARMERS MARKET

Name of Business: _____ Phone #: _____

Owner's Name(s): _____

Mailing address: _____ City: _____ Zip: _____

Email address: _____

Addresses where food is being grown: (Location 1) _____

(Location 2) _____

(Location 3) _____

List all Farmer's Market(s) will you be selling at: _____

List all types of produce will you be selling: _____

Please check and confirm:

____ I will have a sign at my stand with the my contact information and the locations in which the food was grown.

____ I agree to display the Permit issued by the Hancock County Health Department at my Farmers Market/Cottage Food booth.

Signature(s) of owner(s) _____ Date: _____

_____ Date: _____

Please send this application to:

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