IDAHO DEPARTMENT OF HEALTH & WELFARE
DIVISION OF PUBLIC HEALTH

IDAHO COTTAGE FOOD/LOW RISK FOOD ASSESSMENT

Business Name_____________________________ Business Phone #_____________________________

Business Address or production location
(P. O. Box/Street) (City) (State) (Zip)

Name of Owner__________________________________________ Contact Phone # __________________

Owner's Mailing Address: _____________________________________________________________________________
(P. O. Box/Street) (City) (State) (Zip)

Name of Operator/Manager__________________________________________ Email _____________________________

Type of Business ___________________________________________________________________________________

Dates of Operation(s) ________________________________________________________________________________

PLEASE PROVIDE A COMPLETE LIST OF MENU ITEMS
(Either below or on a separate page)

__________________________________________________________

__________________________________________________________

__________________________________________________________

Owner/Agent's Signature ___________________________ Date: __________________________

NOTE TO OPERATOR: Examples of cottage foods/low risk foods include, but are not limited to: baked goods that do not require refrigeration, fruit jams and jellies, fruit pies, breads, cakes that do not require refrigeration, pastries and cookies that do not require refrigeration, candies and confections, dried fruits, dry herbs, seasonings and mixtures, cereals, trail mixes and granola, nuts, vinegar, popcorn and popcorn balls, tinctures that do not make medicinal claims.

If you intend to sell or serve foods that require time/temperature control for safety (TCS), and/or you distribute the product to any third party (wholesale, consignment) you are a regulated food establishment and must meet all the requirements of IDAHO FOOD CODE regulations. A TCS is any food that requires temperature control for food safety reasons. Refer to the Idaho food Code for a complete definition of TCS foods.

If you intend to package the finished product, please attach a sample label with this form. The Public Health District may ask for more detail such as allergen information, if applicable. Consult with your Public Health District for more information.

HEALTH DISTRICT USE

Risk Assessment Action
1. Low Risk 1. Exempt from licensure requirements of Idaho Food Code and legal to be sold
2. Medium Risk 2. Regulated under IDAHO FOOD CODE
3. High Risk

Environmental Health Specialist: ___________________________ Date: __________________________

Comments: __________________________________________________________

If the above listed items are considered low risk at this time, the consumer is to be informed by a clearly visible placard at the sales or service location that the food is prepared in a kitchen that is not subject to regulation and inspection by the regulatory authority. Please follow safe food handling practices.

7/2015