

# New Jersey Cottage Food Operator Application Instructions

**Adobe Reader** is strongly recommended and available as a free app for your computer, tablet, or phone. The PDF application form includes dropdown selections that must be completed on an electronic device. The following instructions will help you complete your application for a Cottage Food Operator Permit in New Jersey.

## SECTION I: APPLICATION INFORMATION

### Application Date

Provide the date you are submitting the application.

### Check or Money Order Number/Payment Confirmation Number

The biannual application fee of \$100 is non-refundable and is due at the time of submission.

**Online payment and electronically completed applications are strongly recommended.** Advantages to submitting your payment and application online include:

- ✓ Faster processing time
- ✓ No processing delays due to unintended loss or separation of checks or money orders
- ✓ Immediate, verifiable electronic documentation that your payment was successfully submitted
- ✓ Easy, no-hassle corrections in the event you need to resubmit an application

Online payment options include checks and most credit cards. (Discover, American Express, MasterCard, Visa) To make an online payment:

- A link to the online payment application is available on the following webpage:

[nj.gov/health/ceohs/phfpp/retailfood](http://nj.gov/health/ceohs/phfpp/retailfood)

The following guidance will help you fill out the online payment application:

- **Trade or Individual Name and Physical Address:** Must match the Applicant Name and Applicant Residential Street Address you provide in SECTION II of the Cottage Food Operator Application.
- **Responsible Party Information:** The last name and first name of the contact person for any questions about the payment submission.
- **Application Type Information:** Select *License/Permit/Certificate* in the dropdown.
- **Pertinent Number:** If you are submitting a renewal, input your existing permit number and expiration date. If you are applying for a new permit, leave this section blank.
- **Payment Information:** Indicate *Electronic Check Payment* or *Credit Card Payment*. The application fee of \$100 should be prefilled for you.
- **Security Message:** The security message is a string of letters and numbers in the gradated box. Click *Refresh* if you cannot see the security message. Enter the security message in the indicated text field.
- **Click *Continue* when you are finished.** Depending on your payment type selection, you will be directed to a check payment or credit card payment page where you can complete your online payment.
- When payment is complete, you will be presented with a payment confirmation number. You will also receive an email receipt that includes your payment confirmation number. Copy your payment confirmation number to the *Payment Confirmation Number* box on the application.

If you do not have access to a credit card or checking account, paper checks or money orders are accepted. Write the number and date of the check or money order in the box provided on the application form. Make checks and money orders payable to *NJ Department of Health*. All checks and money orders must be dated and signed. State policy prohibits processing of money orders or checks that do not include signatures and legible dates.

### Type of Request

- *New permit*: New cottage food application being submitted for operation
- *Renewal of existing permit*: previously licensed cottage food operator submitting for renewal. Include the permit/license number, which does not change.

## SECTION II: APPLICANT INFORMATION

### Applicant Name

The full legal name of the person applying as a Cottage Food Operator. This name will appear on the Cottage Food Operator Permit.

### Business Trade Name or DBA Name

If the business operates under a separate trade name, enter it here. Information entered in this field will appear on the Cottage Food Operator Permit. This field is not required.

### Applicant Residential Street Address

Enter the location of the kitchen at which the applicant will prepare cottage food products.

### Mailing Address, Telephone Number and Email Address

Provide a direct, year-round mailing address, telephone number, and email address for official Department communications.

## SECTION III: COTTAGE FOOD PRODUCT INFORMATION

**REMINDER: All cottage foods must be non-TCS foods, meaning the products do not require refrigeration.**

Each separate 'Product Type' box that you select, if approved, will appear on the Cottage Food Operator Permit as an approved product type for that permit. Ensure that every type of food product that you plan to offer for sale is included in this section. Only products that are approved for an individual permit may be sold under that permit.

Use one product field for each product you plan to sell that shares a product name and major food allergens. Multiple flavors of the same product may be listed in the same field. If certain flavors include different major food allergens, list them in a separate product field. If you run out of room, fill out a second product field. An example is provided below.

Page 1 of the application offers space for four (4) separate products. If you need space for additional products, utilize the additional fields provided on page 3.

### Product Type

Select one of the options on the electronic dropdown menu (also listed below) that best describes the product. If the product cannot be described by any of the available options, select or write *Other\** and follow the instructions provided on the following webpage to request approval of a unique non-TCS food product.

<https://nj.gov/health/ceohs/phfpp/retailfood>

## List of Product Types

1. Baked goods, including bread, rolls, biscuits, cakes, cupcakes, pastries, and cookies;
2. Candy, including brittle and toffee;
3. Chocolate-covered nuts and dried fruit;
4. Dried fruit;
5. Dried herbs and seasonings, and mixtures thereof;
6. Dried pasta;
7. Dry baking mix;
8. Fruit jams, fruit jellies, and fruit preserves;
9. Fruit pies, fruit empanadas, and fruit tamales (excluding pumpkin);
10. Fudge;
11. Granola, cereal, and trail mix;
12. Honey and sweet sorghum syrup;
13. Nuts and nut mixtures;
14. Nut butters;
15. Popcorn and caramel corn;
16. Roasted coffee and dried tea;
17. Vinegar and mustard;
18. Waffle cones and pizzelles

### Product Name

Type in the common name of the product. You may abbreviate or generalize, using the space provided.

### Major Food Allergens

Check the box next to every potential major food allergen ingredient that may be used in the product. Include major food allergens that appear in the ingredients of any manufactured product that will be used in the recipe.

### Example Completed Product Fields

Below is an example of four completed product fields.

<b>Product Type</b>	Baked goods (including bread, rolls, biscuits, cakes, cupcakes, ▾)	<b>Major Food Allergens</b>	<input checked="" type="checkbox"/> Milk	<input checked="" type="checkbox"/> Peanuts	<input type="checkbox"/> Shellfish
<b>Product Name</b>	Cookies		<input checked="" type="checkbox"/> Tree Nuts	<input type="checkbox"/> Fish	<input type="checkbox"/> Soybean
<b>Product Type</b>	Baked goods (including bread, rolls, biscuits, cakes, cupcakes, ▾)	<b>Major Food Allergens</b>	<input checked="" type="checkbox"/> Eggs	<input checked="" type="checkbox"/> Wheat	
<b>Product Name</b>	Cupcakes		<input checked="" type="checkbox"/> Milk	<input checked="" type="checkbox"/> Peanuts	<input type="checkbox"/> Shellfish
<b>Product Type</b>	Chocolate-covered nuts and dried fruit ▾	<b>Major Food Allergens</b>	<input checked="" type="checkbox"/> Tree Nuts	<input type="checkbox"/> Fish	<input type="checkbox"/> Soybean
<b>Product Name</b>	Chocolate-covered nuts		<input type="checkbox"/> Eggs	<input type="checkbox"/> Wheat	
<b>Product Type</b>	Roasted coffee and dried tea ▾	<b>Major Food Allergens</b>	<input type="checkbox"/> Milk	<input type="checkbox"/> Peanuts	<input type="checkbox"/> Shellfish
<b>Product Name</b>	dried tea		<input type="checkbox"/> Tree Nuts	<input type="checkbox"/> Fish	<input type="checkbox"/> Soybean
			<input type="checkbox"/> Eggs	<input type="checkbox"/> Wheat	

## SECTION IV: APPLICANT REPRESENTATIONS AND CERTIFICATION

This section lists the operational standards to which a Cottage Food Operator must adhere in order to qualify for the Cottage Food Operator Permit. Select **Yes** or **No** for each statement. Each statement must have a selected answer or the application will be denied. Any unanswered statement or **No** selection may be grounds for denial of application. Willfully false answers may subject you to civil administrative penalties, denial of application and/or revocation of your permit.

## Certification by Applicant of N.J.A.C. 8:24 Cottage Food Operator Standards

**Electronic signatures are not required!** Typing your name in the certification box will serve as acknowledgement of the Terms and Conditions of licensure by the Department. **The name and date fields must be completed, or your application will not be processed.**

## ADDITIONAL REQUIRED DOCUMENTATION AND ATTACHMENTS

### City Water or Private Well Water

- Submit a copy of your most recent city water bill for the location of the cottage food kitchen OR
- If the location uses private well water, submit a copy of a microbiological (total coliform) analysis of the private well water that is conducted using sample collected no earlier than 60 days prior to the filing date of this application.
- Certified Drinking Water Labs:  
<https://www13.state.nj.us/DataMiner/Search/SearchByCategory?isExternal=y&getCategory=y&catName=Certified+Laboratories>

### Food Protection Managers Certification

- Submit a copy of your accredited food protection managers certificate. A list of accredited Food Protection Managers Certification programs is available on the following webpage:  
<https://nj.gov/health/ceohs/phfpp/retailfood/>

## FINALIZE AND SUBMIT YOUR APPLICATION

### Submit by Email

Once the form is completed, it must be saved to your device to begin submission

Ensure the completed form is saved as a file on your device before you submit to the Department.

To submit electronically, attach the form and additional required documentation to a new email

All emailed applications and documents must be submitted as file attachments. Due to security restrictions, this office cannot open links to files that are stored externally. The original files must be attached directly to the email.

Include the following information with your email:

- To: [cfo@doh.nj.gov](mailto:cfo@doh.nj.gov)
- Subject: **Cottage Food Application: (Applicant Name)**
- In the body of the email, provide the name and direct contact information of the applicant.

### Do not mail your application in addition to email

You will receive an automated response to confirm your application is received. If you submitted your application by email, do not also mail your application. Applications which are received in duplicate will create significant delays in processing time due to limited staff and resources. Please accept the automated response as confirmation that your application is successfully received and in process.

## Submit by Mail

### If you are paying with a paper check or money order, mail your application

The application must be completed on an electronic device. Handwritten applications will be returned to the sender. If you submit your application via mail, do not submit via email unless instructed to do so by a representative of the Department. Printed, typed applications and paper checks may be mailed to the following address:

#### *United States Postal Service (USPS):*

NJ Department of Health  
Public Health and Food Protection Program  
P.O. Box 369  
Trenton, NJ 08625

#### *Courier (UPS/FedEx/DHL):*

NJ Department of Health  
Public Health and Food Protection Program  
135 East State Street  
Trenton, NJ 08608

**Walk-in delivery of applications is NOT accepted.** There is no receptacle at the office to accept walk-in applications or personal delivery by applicants. The office is not open to the public. To ensure your application is promptly delivered to the appropriate office, all paper applications must be submitted by mail or courier. If you would like to expedite the process or ensure the application is received as quickly as possible, submit your application via email.

## Application Processing

### Allow at least five weeks for processing

Please allow time for processing with the consideration that this is a new project with minimal staffing available. A timeline has not yet been established. Updates will be provided to applicants as often as possible. A listing of current issued permits is updated online weekly at: [nj.gov/health/ceohs/phfpp/retailfood](http://nj.gov/health/ceohs/phfpp/retailfood)

### Permits will be issued via mail only

The Cottage Food Operator Permit is not available electronically and cannot be sent via email. Approved permits will be mailed to the mailing address provided on the form. The issued date of the permit is the date the permit was printed for mailing. Please allow two weeks from permit issuance for receipt of the mailed permit.

Public Health & Food Protection Program | [cfo@doh.nj.gov](mailto:cfo@doh.nj.gov) | 609-913-5099

Please see our website: [nj.gov/health/ceohs/phfpp/retailfood](http://nj.gov/health/ceohs/phfpp/retailfood)