

STATE OF NEVADA
 DIVISION OF PUBLIC AND BEHAVIORAL HEALTH
 ENVIRONMENTAL HEALTH SECTION
www.dpbh.nv.gov



APPLICATION FOR A COTTAGE FOOD OPERATION REGISTRATION

Please return to the office listed:

OFFICE LOCATION	ADDRESS	PHONE	FAX
<input type="checkbox"/> EHS – Carson City (Main Office)	4150 Technology Way, Suite 101 Carson City, NV 89706	(775) 687-7532	(775) 687-7551

BUSINESS INFORMATION	
<input type="checkbox"/> New Business Date:	<input type="checkbox"/> Information Change Date:

OWNER INFORMATION					
Owner Name					
Owner Address					
City		State:		Zip:	
Home Phone		Business Phone:		Fax:	
Mobile Phone			E-Mail Address:		
Mailing Address					
City		State:		Zip:	

COTTAGE FOODS INFORMATION	
Facility Name	
Location of Preparation	
Primary Sales Location	
Bus Lic Reg. #	

State of Nevada allowed manufactured food items. Check as many as applicable:

- | | | |
|---|--|--|
| <input type="checkbox"/> Nuts and nut mixes | <input type="checkbox"/> Vinegar and flavored vinegar | <input type="checkbox"/> Cereals, trail mixes, and granola |
| <input type="checkbox"/> Candies | <input type="checkbox"/> Dry herbs and seasoning mixes | <input type="checkbox"/> Popcorn and popcorn balls |
| <input type="checkbox"/> Jams, jellies, and preserves | <input type="checkbox"/> Dried fruits | <input type="checkbox"/> Baked Goods (Non-PHF) |

I, _____ (PRINT) am registering as a Cottage Food Operation which is exempt from the requirement for a health permit pursuant to NRS 446.866, and understand the following conditions:

- I understand that inspections will not be conducted and that I will be solely responsible for the safety of the food sold from this Cottage Food Operation.
- I understand that I will be financially liable for any fees and/or costs incurred by the Health Authority in regard to any investigation of food adulteration or foodborne illness complaints filed against my Cottage Food Operation found to be valid.
- I understand that my personal information will be added to the Cottage Foods Registry and published on the Environmental Health Website.

Signature of Applicant	Print Name	Date