



# COMMUNITY DEVELOPMENT DEPARTMENT

Quincy Yaley, AICP  
Director

Land Use and Natural Resources – Housing and Community Programs – Environmental Health – Building and Safety – Code Compliance

## Cottage Food Operation (CFO) Property Owner Agreement

48 Yaney Avenue, Sonora  
Mailing: 2 S. Green Street  
Sonora, CA 95370  
(209) 533-5633  
(209) 533-5616 (Fax)  
(209) 533-5909 (Fax – EHD)  
www.tuolumnecounty.ca.gov

CFO Business Name: \_\_\_\_\_

CFO Address: \_\_\_\_\_

Please check the appropriate box, and follow the instructions:

- I own the residential home which I will use as a CFO. Please complete Section II of this form and return to the Community Resources Agency.
- I DO NOT own the residential home which I will use as a CFO. Please have this form completed by the owner of the residential home that you will use as a CFO and return to the Community Resources Agency.

### Section I

I have read and understand the following, which are available online and at the County office listed above:

- \_\_\_\_\_ “Cottage Food Operations”, from the California Department of Public Health  
Initials
- \_\_\_\_\_ “California Homemade Food Act: Frequently Asked Questions, AB 1616  
(Gatto) – Cottage Food Operations”, from the California Department of Public Health  
Initials
- \_\_\_\_\_ California Department of Public Health CFO website,  
<http://www.cdph.ca.gov/programs/Pages/fdbCottageFood.aspx>, which includes AB 1616,  
and the two above listed documents  
Initials

I understand that the residential home listed above, and owned by me, will be used by the resident(s) of the home to make food that will be sold directly or indirectly to the public. I understand that only the foods listed under AB 1616 may be prepared in a CFO, and the resident(s) has (have) informed me of which foods will be prepared in the CFO. Please provide the following for all owners of this property.

### Section II

Property owner's(s)': \_\_\_\_\_  
(Name)

\_\_\_\_\_ (Mailing Address)

\_\_\_\_\_ (Phone)

\_\_\_\_\_ (Email)

\_\_\_\_\_  
(Signature)

\_\_\_\_\_  
(Date)