**Application for Home Processor Inspection**

For more information on home processing, including the step-by-step process, please visit our website (nchomeprocessing.com). Please note: if the kitchen where you are planning to produce is in another area from your home kitchen (i.e. garage, basement, etc.) or in a separate building on your property then you will not qualify as a home processor and will be considered a commercial business. If you fall into this category, ***you will not be required to fill out this application***. Please contact our office at 984-236-4820

 for more information on starting a commercial business.

**Section 1 Business Information**

NAME OF APPLICANT: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

NAME OF BUSINESS: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

ADDRESS OF PROCESSING FACILITY:

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Street address City Zip County

APPLICANT MAILING ADDRESS (if different from above)

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Street address City Zip County

ADDITIONAL CONTACT INFORMATION:

 Primary phone # Alternate phone #

 Email Address

**Section 2 Home Requirements**

Have you contacted your city/county planning department to verify you can operate a food business on this property?  [ ]  Yes [ ]  No

The business will be using:

 [ ]  A public water supply: Attach a current copy of your bill.

[ ]  A non-public/non-municipal water supply or well water: *You must have your water tested for coliforms within one year of your application submission. Include a copy of your test results with your completed application.* ***Note: store bought test kit results will not be accepted.***

Do you have pets that come into your home at any time? \* [ ]  Yes [ ]  No

**\* Pets in the home are a violation of Good Manufacturing Practices**

**Section 3 Production Information**

TYPE OF PRODUCTION:

[ ] Baked Goods

 [ ]  Breads [ ]  Jams or Jellies [ ]  Peanuts

 [ ]  Cakes [ ]  Honey [ ]  Candy

 [ ]  Pies [ ]  Dry Goods

 [ ]  Cookies

[ ]  Other (please list):

**\* Products that are not processed or manufactured in any way (i.e. gift baskets prepackaged goods, etc.) do not require an inspection.**

* ***Only finished products that are shelf stable and do not require refrigeration may be produced in a home kitchen.***
* ***Low-acid canned food products are prohibited from being produced in the home.***
* ***Cream cheese frostings require lab testing to determine if it can be produced in the home kitchen.***

DESCRIBE YOUR PRODUCT (types, styles, packaging, etc.)

How often will you operate/produce your product?

(ex. days/week): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Number of employees anticipated:

ATTACH A BRIEF WRITTEN BUSINESS PLAN TO INCLUDE:

1. Provide a detailed list of specific products by name that will be produced in the home kitchen
2. Detailed list of ingredients used and the suppliers
3. A plan for storage for supplies, equipment, and finished product
4. A general production flow- including procedures and equipment used
5. How you plan to transport products to customers (i.e. personal vehicle, food truck, etc.)
6. List potential locations where you plan to sell your product (i.e. local businesses, retail from home, etc.)

**Section 4 Product Labeling**

There are two types of “Point of Sale” you must consider with your product labels: Self-service and Custom/On-demand.

**Self-service** - the customer picks up/selects the item they want instead of you serving it from inside a display case or tub. Products packaged for self-service sale must be labeled and adequately packaged to protect them from contamination.

**Custom or On-demand Service Foods** “custom made” or “on demand” (i.e. directly to consumers from your home, special events, etc.) can be exempt from individual labeling requirements. Also, if the product is served on demand from a secure bulk container or display case and the customer must ask you for the product, it is exempt from labeling. However, the ingredient information must be available upon request by the consumer.

**The following situations require an affixed product label**: Products shipped through U.S. postal services (i.e. USPS, FEDEX, etc.); packaged products sold at farmer’s markets, flea markets, curb or tailgate markets for self-service; products sold to retail stores, distributors, or restaurants. In addition to a common label, a nutritional label may be required if certain claims are made (ex. gluten or sugar free).

**A product label must include the following:**

1. Product name
2. Manufacturer’s name and physical address.

(***NOTE*:  *The use of a website address cannot be substituted for the required information***)

1. Net quantity contents of the product in either ounces/pounds and the gram weight equivalent, or fluid ounces and the mL equivalent.
2. Complete list of ingredients in order of predominance by weight.

**LABEL EXAMPLE**

\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*

Vanilla Cake

Ingredients:  Sugar(pure cane sugar); shortening(soybean oil, fully hydrogenated palm oil, partially hydrogenated palm and soybean oils, mono and diglycerides, TBHQ, citric acid); flour(bleached wheat flour, malted barley flour, niacin, iron, thiamin mononitrate, riboflavin, folic acid); eggs; milk(reduced fat milk, vitamin A palmitate, vitamin D3); salt(salt, calcium silicate, dextrose, potassium iodide); baking soda(sodium bicarbonate); vanilla(water, sugar, caramel color, artificial flavor, citric acid, sodium benzoate)

Made by:  Smith’s Bakery

1234 Home Street

Raleigh, NC  27607

Net Weight:  4 ounces/113 grams.

\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*

**Creating the ingredient statement:**

 **Step 1:** **List ingredients in descending order by weight.** The ingredient that weighs the most in the recipe is listed first and the ingredient that weighs the least is listed last.

 **Step 2:** **Review the ingredient statement that is listed on each ingredient package.** Any ingredient which has two or more components must be declared in parentheses beside the ingredient.

 **Note:** All allergens must be listed in the ingredient statement or in a “Contains” statement immediately following the ingredients (ex. Contains: Milk, Egg, Almonds, ect.). Allergens include: Milk, Egg, Tree Nuts (specific kind of nut), Wheat, Soy, Peanuts, Sesame Seeds, Fish (specific species of fish), Shellfish.

 **The label can be produced by the following methods:**

* Format onto the sticker type label that can be printed from a personal computer
* Print label and affix to the package of food
* Professional printing

 **Please submit one example label for review. The example format should be followed.**

[ ]  A copy of my product label is attached.

[ ]  My product will not require a label as it will be sold custom/on demand *(directly to consumers only)* **OR** from a secured bulk container on demand *(ex. retail behind the sales counter)*

**Section 5 Applicant Signature**

This application and all requested materials, as listed below, should be submitted to:

**homeprocessing@ncagr.gov**

**or**

**Kaye J. Snipes**

**169 Boone Square Street, #168**

**Hillsborough, NC  27278**

By signing this application, you are confirming that all information is accurate and true. Failure to supply all requested information may result in a delay in processing your application.

Please allow eight to twelve weeks for processing of your application from the date of post marking. Please keep in mind that this is only an approximate time frame, and it may take longer for an inspector to contact applicants. Once your application is approved, a Food Regulatory Specialist will contact you to arrange an onsite inspection.

Inspectors may require that your product be tested for pH and/or water activity prior to the inspection to ensure it is safe for home production.

Following a compliant inspection, you will be permitted to produce and sell your product.

Applicant Signature Date

Printed Name

**Section 6** **Attachment Checklist**

Ensure the following are included with your application:

[ ]  Water bill or water coliforms test results (required per Section 2)

[ ]  Business plan (required per Section 3)

[ ]  Product label (if required per Section 4)

[ ]  Acidified Foods Course Certificate (if required per Section 3)