



Steve Troxler
Commissioner

North Carolina Department of Agriculture
and Consumer Services
Food and Drug Protection Division

Daniel L. Ragan
Director

Application for Home Processor Inspection

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 local town/city zoning committee 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 (ex. 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.

Do you have pets that come in 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:*

- | | | |
|--------------------------------------|--|------------------------------------|
| <input type="checkbox"/> Baked Goods | <input type="checkbox"/> Acidified Foods (pickled)** | <input type="checkbox"/> Dry Goods |
| <input type="checkbox"/> Breads | <input type="checkbox"/> Jams or Jellies | <input type="checkbox"/> Peanuts |
| <input type="checkbox"/> Cakes | <input type="checkbox"/> Honey | <input type="checkbox"/> Candy |
| <input type="checkbox"/> Pies | <input type="checkbox"/> Dressings/Sauces | |
| <input type="checkbox"/> Cookies | | |

Other (please list): _____

* Products not processed or manufactured in any way (gift baskets, prepackaged goods) do not require inspection.

**Must provide certification of NCSU Acidified Foods School for Entrepreneurs or an equivalent FDA certified course

Refrigerated or frozen products may not be produced at home.

Low-acid canned foods may not be produced at home.

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. Ingredients used and the suppliers
2. A plan for storage for supplies, equipment, and finished product
3. A general production flow- including procedures and equipment used
4. How you will transportation of products
5. List potential locations where you plan to sell your product (ex. farmers market, retail from home, local fairs, local businesses)

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.

The following situations require an affixed product label: sale over the internet; farmer's markets; flea markets; curb or tailgate markets; trading posts; retail stores.

A product ingredient 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.
3. **. Net quantity contents of the product in either ounces/pounds and the gram weight equivalent, or fluid ounces and the mL equivalent.**
4. **Complete list of ingredients in order of predominance by weight.**

A sample label could look like this:

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.

The easiest way is to copy the ingredients component lists directly from the original ingredient labels onto yours. Any duplication of component ingredients can be deleted after the first listed occurrence. You can format or size this type of label to fit onto a "sticker-type" of label which you print using your computer or have professionally printed; you can also print onto paper and "cut & tape" it onto the individual packages of food.

Custom or On-demand Service Foods "custom made" or "on demand" (ie: wedding or specialty event cake, cake for a restaurant to serve, or a dozen cookies in bulk package for a restaurant to serve) 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.

A copy of my product label is attached.

My product will not require a label as it will be sold custom/on demand **OR** from a secured bulk container on demand

Section 5 Applicant Signature

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

homeprocessing@ncagr.gov

or

**Martha Osborne
PMB #180
13000 S. Tryon St, Ste. F
Charlotte, NC 28278-7602**

Application for Home Food Processor

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 two weeks for processing of your application from the date of post marking. Once your application is approved, a Food Regulatory Specialist will contact you to arrange an on site 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)