



RESOURCE MANAGEMENT AGENCY

5961 S. Mooney Blvd
Visalia, CA 93277
559-624-7000
559-615-3002

Aaron R. Bock
Reed Schenke
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Economic Development and Planning
Public Works
Fiscal Services

REED SCHENKE, DIRECTOR

MICHAEL WASHAM, ASSOCIATE DIRECTOR

ADMINISTRATIVE SPECIAL USE PERMIT

ADMINISTRATIVE APPROVAL FOR COTTAGE FOOD OPERATION PERMIT

General Information

Applicant(s)/Property Owner(s) _____

Address: _____ City: _____ State: _____ Zip Code: _____

Phone: _____ Cell Phone: _____ Fax: _____

E-mail: _____

Location Information

Site Address (including closest cross streets and nearest community): _____

Assessor's Parcel No(s): _____

Minimum Application Filing Requirements

The minimum requirements for filing a Cottage Food Operation Permit Application are listed below. An application that does not include the following plans and information will not be accepted for processing. In the course of accepting and processing the application, the Permit Center Official or Planner may ask the applicant to clarify, correct or otherwise supplement the required information. The application may be filed with the Resource Management Agency Permit Center, at 5961 S. Mooney Blvd., Visalia CA 93277. Phone: (559) 624-7000.

- ☐ Completed Cottage Food Operation Permit Application, Site Plan and filing fee
- ☐ Signed Owner's Affidavit (signed by the Property Owner)
- ☐ Indemnification and Cost Recovery Agreement (signed by the Applicant)
- ☐ One (1) copy of the Site Plan and one (1) copy of the kitchen floor plan shall be submitted so that a complete evaluation of the application can be made by the Planning Branch and other agencies, as required (see below for requirements)

THIS SPACE FOR OFFICE USE ONLY

Application Received/Reviewed by: _____ Project Number: _____

Use Description: Cottage Food Operation

Current Zoning: _____ Land Use Designation: _____

Filing Fee(s): _____ Total Amount Paid: _____

Date Received: _____ Payment Type: _____

Receipt Number(s) _____ Existing Entitlements/References: _____

PERMIT CENTER HOURS: MONDAY – Friday 9:00 A.M. TO 4:30 P.M.

APPLICATION PROCESS

1. **Application Review:** A Planner will review the submitted application and determine whether the application is complete. Once the application has been deemed complete, the application will be distributed to additional agencies for review and comment. Typical reviewing agencies include, but are not limited to: Tulare County Environmental Health Services Division, Tulare County Fire Department, Planning and Economic Development and Public Works. The Cottage Food Operation may be subject to other local or state regulatory agencies.
2. **Requirements/Conditions of Approval:** Upon receiving comments from reviewing agencies, Planning staff will contact the applicant and provide a list of conditions of approval that will be required to be complied with in order for the Cottage Food Operation to be approved. Approval of this Cottage Food Operation requires compliance with conditions of approval necessary to protect public health, safety and welfare.
3. **Fee:** Ordinance No. 352, as amended, requires a filing fee to be paid at the time of filing an application for a Special Use Permit. This fee is to cover the cost to the County for advertising, investigations and processing the application through its various stages. Said fee shall be paid with submittal of this application.
4. **Operations:** The applicant shall post the approved Cottage Food Permit and conditions of approval in the location of the operation and make available for review to any person upon request. All conditions of approval for the Cottage Food Operation must be complied with at all times so long as said operation exists.
5. **Compliance/Inspections:** The Cottage Food Operation shall be subject to conditions and compliance inspections by the Resource Management Agency staff, the Tulare County Fire Department, or the County Environmental Health Services Division at any time.
6. **Minimum Site Plan Requirements:** A minimum of one (1) copy of the site plan shall be submitted so that a complete evaluation may be made of the application by the Planning Branch and other agencies, as required. In order to eliminate delay in processing the application, the submitted plans must be complete as follows:
 - The plan(s) shall be drawn legibly with full dimensions, and net areas identified in square feet (or acres for property site)
 - Note the location address and Assessor's Parcel Number on the site plan
 - Show all existing and proposed development, including size of each
 - Show the layout of the house, specifically the kitchen area where preparation of food will take place.
 - Show existing and proposed parking areas
 - Show the location of all existing and proposed septic tank-leach line systems, community sewage systems and potable water sources in accordance with the Tulare County Environmental Health Services Standards.
7. **Indemnification and Cost Recovery Agreement:** The Indemnification and Cost Recovery Agreement must be signed by the property owner and submitted along with this completed application.

ACCEPTANCE, MODIFICATIONS AND/OR DENIAL OF THE APPLICATION

I acknowledge that the County may decline to accept this Cottage Food Operation application for processing if it is deemed incomplete. I understand that submittal of the application and appropriate fee does not guarantee that the application will be approved. I understand that the approving authority may impose such conditions as determined necessary for the proposed project to be consistent with all applicable laws, ordinance, standards or regulations, or to mitigate impacts created by the proposed project, or as otherwise necessary to protect the public health, safety and welfare.

Applicant (print name)

Signature

Date

PLEASE FILL OUT THE FOLLOWING INFORMATION COMPLETELY

1. Project Description:

a. Type of food to be prepared: _____

b. Hours of operation: _____

c. Type of equipment/machines to be utilized: _____

d. Perspective Buyers - describe how product will be sold, to whom, through public venues, on-site, etc.

e. Water supply:

☐ Domestic Well – Size of pump _____ Gallons per minute _____

☐ Irrigation Well: _____

☐ Irrigation District – Name: _____

☐ Private Water Company – _____

☐ Name: Community System – _____

Name: Liquid Waste Disposal:

☐ Septic Tank-Leach Lines: Size of tank: _____ gallons & length of lines _____ ft.

☐ Name: Community System _____

☐ Other: _____

g. Source of energy:

☐ Electricity – Company name: _____

☐ Natural Gas – Company _____

☐ Propane: Size of tank _____ Provider _____

h. Please provide any additional information that you feel would aid in the processing of this application. Attach an additional sheet if necessary. _____

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DEPARTMENTAL APPROVAL/MODIFICATION/DENIAL SIGN-OFF

Does the application and site plan meet the applicable processing requirements?

Tulare County Resource Management Agency, Planning Branch:

☐ Yes ☐ Yes, with Modifications ☐ No (if no, please give a brief explanation)

Tulare County Environmental Health Services Division:

☐ Yes ☐ Yes, with Modifications ☐ No (if no, please give a brief explanation)

Tulare County Fire Department:

☐ Yes ☐ Yes, with Modifications ☐ No (if no, please give a brief explanation)

Other (if applicable) _____:

☐ Yes ☐ Yes, with Modifications ☐ No (if no, please give a brief explanation)

(Must be signed by a property owner)

STATE OF CALIFORNIA)
COUNTY OF TULARE) SS.

I, (We,) the undersigned, say:

I (We) own property involved in this application and I (we) have completed this application and other documents and maps required hereby to the best of my (our) ability and the statements and information above referred to are, in all respects, true and correct to the best of my (our) knowledge and belief.

I (We) declare under penalty of perjury that the foregoing is true and correct.

Executed on , _____ at _____

Name: _____ Signature: _____

Address: _____ Zip: _____

State: *Optional – additional property owner*

Name: _____ Signature: _____

Address: _____ State: _____ Zip: _____

If there is an agent, title company, or prospective buyer who desires notification of the Director's action on this application, please enter name here.

Name: _____

Relationship

: Address:

State: Zip:

Telephone:

FAX No.:

The County of Tulare
“INDEMNIFICATION AND COST RECOVERY
AGREEMENT” (must accompany this application)

The County of Tulare
“INDEMNIFICATION AND COST RECOVERY
AGREEMENT” (must accompany this application)

Please download or print out the form from the
County Web Site
(located with the list of land use applications).

The Indemnification and Cost Recovery Agreement
must be filled in and signed by the applicant and must be
submitted as part of any land use application requiring
discretionary review by the County.

This Agreement must be signed by the Applicant