



Food Facility Permit Exemption Verification Form for Prepackaged Non-Potentially Hazardous Foods

Applicant must complete and submit this form for exemption evaluation. Accurate information is required. Misleading information may result in denial of the exemption. An approved exemption shall remain as long as the owner and qualifying information on this form remains accurate.

I. EXEMPTION REQUIREMENTS

California Retail Food Code, Section 114289, exempts a permanent food facility from obtaining a Food Permit to Operate from the Department of Public Health if <u>ALL</u> criteria below are met. Verify that you meet all criteria:	Yes	No
1. Foods/beverages that are stored, handled, sold, and/or provided are non-potentially hazardous and prepackaged. (Common potentially hazardous foods: milk, cheese, ice cream, dairy products, eggs, meat, fresh juices/smoothies, cut melons, and perishable foods.)	<input type="checkbox"/>	<input type="checkbox"/>
2. No food preparation occurs. (Making or dispensing open coffee, popcorn, hot pretzels, hard-boiled eggs, etc. is considered food preparation.)	<input type="checkbox"/>	<input type="checkbox"/>
3. The floor space for the food display area shall be limited to 25 square feet. (No height restriction within floor space.)	<input type="checkbox"/>	<input type="checkbox"/>

II. PERMANENT FOOD FACILITY INFORMATION

Business Name/DBA:	Owner Name:
Business Address:	
Contact Phone:	Email:

III. FOOD MENU

List all foods/beverages stored and/or sold at this facility. (Ensure to include any items that contain dairy/eggs/meat, will require refrigeration, or have "perishable" or "keep refrigerated" on the label.)

IV. FLOOR PLAN

Draw a diagram to show location and square footage of floor space for food display in the space below. Add up square footage to show that it does not exceed 25 sq. ft.

If preferred, a separate diagram may be attached. Please sign and date attachment.

**Example diagram:
Total display = 16 sq. ft.**

I declare under penalty of perjury that I am an authorized representative of this business entity and that the information contained herein is true and complete to the best of my knowledge and belief. I understand that I will need to obtain a Food Permit to Operate from the SF Department of Public Health when food display exceeds 25 sq. ft. or when potentially hazardous food or non-prepackaged food is stored, handled, sold, or provided. I also understand that any complaints may result in an investigation and/or enforcement action charged at the current hourly rate.

Owner Name (Print) _____ Owner Signature _____ Date _____

EH OFFICE USE ONLY **APPROVED** **DISAPPROVED** Reason for disapproval: _____

Inspector _____ Principal Inspector _____ Date _____