



Community and Economic Development

Environmental Health Division

200 W. 4th Street, Suite 3100

Madera CA 93637

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CATERER APPLICATION PACKET

California Retail Food Code Definitions:

Catering operation (§113739.1): means a food service that is conducted by a permanent food facility approved for food preparation where food is served, or limited food preparation is conducted, at a location other than its permitted location, in either of the following circumstances:

- (1) As part of a contracted offsite food service event.
- (2) When operating in conjunction with a host facility with direct food sales.

Catering operation shall not include either of the following:

- (1) Food ordered as takeout or delivery from a food facility, where the food is provided to the consumer for self-service.
- (2) A food facility that is participating as part of a community event.

Limited food preparation (§113818(a)): means food preparation that is restricted to one or more of the following:

- (1) Heating, frying, baking, roasting, popping, shaving of ice, blending, steaming or boiling of hot dogs, or assembly of nonprepackaged food.
- (2) Dispensing and portioning of nonpotentially hazardous food.
- (3) Holding, portioning, and dispensing of any foods that are prepared for satellite food service by the onsite permanent food facility or prepackaged by another approved source.
- (4) Holding, portioning, and dispensing of any foods that are prepared by a catering operation for a host facility.
- (5) Slicing and chopping of food on a heated cooking surface during the cooking process.
- (6) Cooking and seasoning to order.
- (7) Juicing or preparing beverages that are for immediate service, in response to an individual consumer order, that do not contain frozen milk products.

Potentially hazardous food (§113871(a)): means a food that requires time or temperature control to limit pathogenic micro-organism growth or toxin formation.

Host facility (§113806.1): means a facility located in a brewery, winery, commercial building, or another location as approved by the local enforcement agency, that meets applicable requirements to support a catering operation that provides food directly to individual consumers for a limited period of time, up to four hours, in any one 12-hour period and that has a permit pursuant to Section 114328.1.

To make the caterer plan review process as easy as possible, use the checklist below to assure that you have all the necessary information required. Once the packet is submitted, you will be contacted by the inspector within 10 business days or within 20 business days if submitted with a facility plan review.

- Completed Health Application Form with the proposed Menu
- Completed Madera County Commissary/Permitted Food Facility Agreement Form *(Two required if using a Host facility)*
- Completed written Standard Operational Procedures (SOP)
- Copy of Food Safety Certificate and Food Handler Cards for employees *(if available)*
- A set of floor plans and equipment specification sheets for all equipment *(if applicable)*

WRITTEN STANDARD OPERATIONAL PROCEDURES

The permit holder or caterer handling unpackaged food shall develop and follow written operational procedures for food handling, cleaning and sanitizing of food-contact surfaces and utensils and how to maintain food safety during all operations that is essential to the catering business. **The following must be completed and returned to this Division for approval before a permit is issued. NOTE: If you are an existing caterer who moved, you are required to fill out a new form when changing to a new location.** Use additional paper if necessary

Name of Business: _____
Owner Name: _____ Phone: _____
Owner Email: _____
Commissary Name: _____
Commissary Address: _____
City: _____ State: _____ Zip: _____

A. CATERING BUSINESS PLAN (Check all that apply):

1. Who are your target customers?

Company Lunches Individual Order Private Parties (*weddings, etc.*) Host Facility Patrons

Other: _____

2. How do you receive orders from customers?

Phone Internet Walk-in Service Window (*Host facility only*)

Other: _____

3. Provide days of the week and times of the proposed permitted food facility use:

M _____ T _____ W _____

Thurs _____ F _____ Sat _____

Su _____ Other: _____

4. How many individuals will be employed by the business? _____

5. How many employees will be preparing food? _____

5. Provide detailed steps/procedures that indicate storing, cooking, cooling, and delivering **temperatures for each food item** proposed (use one page per menu item, attach pages as needed). Reference: Sample step/procedure worksheet.

Menu Item:	
Step 1- Storage: Potentially Hazardous Foods (PHF) must be stored at or below 41F or at or above 135F. (e.g. PHF- Milk, meat, poultry, cheese, etc.)	
Step 2- Preparation:	
Step 3- Cooking See Minimum Cooking Temperatures handout for reference.	
Step 4- Cooling (if applicable) Potentially hazardous foods which have been cooked or heated in the approved facility must be cooled from 135°F to 70°F within 2 hours and from 70°F to 41°F within 4 hours.	
Step 5- Reheating (if applicable) Any potentially hazardous food that has been cooked, cooled and subsequently reheated for hot holding must be reheated from 41°F to 165°F for at least 15 seconds within 2-hours.	
Step 6- Transportation & Food Service	

Menu Item:	
Step 1- Storage: Potentially Hazardous Foods (PHF) must be stored at or below 41F or at or above 135F. (e.g. PHF- Milk, meat, poultry, cheese, etc.)	
Step 2- Preparation:	
Step 3- Cooking See Minimum Cooking Temperatures handout for reference.	
Step 4- Cooling (if applicable) Potentially hazardous foods which have been cooked or heated in the approved facility must be cooled from 135°F to 70°F within 2 hours and from 70°F to 41°F within 4 hours.	
Step 5- Reheating (if applicable) Any potentially hazardous food that has been cooked, cooled and subsequently reheated for hot holding must be reheated from 41°F to 165°F for at least 15 seconds within 2-hours.	
Step 6- Transportation & Food Service	

6. Indicate where the food(s) or food ingredients will be purchased (*invoices must be available for review for a minimum of 90 days*).

Store Names: _____

7. Are specialized processes used to prepare your food? Cook-chill Vacuum packaging Sous Vide
 Acidification Fermentation Drying Smoking Curing
8. Attach an approved HACCP plan from the California Department of Public Health (CDPH) for any of the following specialized processes (cook-chill, vacuum packaging, and sous vide).
9. Explain all special processes: _____

10. Indicate where the food and utensils will be stored at in the permitted food facility. Submit pictures and/or draw a layout of the kitchen, if available.

Items:	Location in the kitchen
Potentially Hazardous Food (Dairy, meat, poultry, cooked food)	(e.g. 1-door upright cooler in the storage area)
Dry ingredients (salt, pepper, sugar)	
Cooking equipment, serving utensils, transportation equipment.	

C. CLEANING AND SANITIZING OF FOOD EQUIPMENT AND UTENSILS (Check all that apply):

1. Describe how food utensils and food contact surfaces will be cleaned and sanitized.
- Manual sanitize** (*wash, rinse, sanitize, and air-dry*)
- Chemical dishwasher**
- High-temperature dishwasher** (*final rinse temperature shall reach a minimum of 160°F*)
2. What sanitizer or sanitizing method will be used? Indicate if a commercial premixed solution will be used or if a sanitizer solution will be prepared.

3. Approved sanitizer must contain one of the following chemicals at the specified concentrations.
 Check the sanitizer that will be used:
- Contact with a solution of 100 parts per million (ppm) available chlorine for at least 30 seconds.
- Contact with a solution of 200 parts per million available quaternary ammonium for at least one minute.
- Contact with a solution of 25 parts per million available iodine for at least one minute

NOTE: Appropriate test strips are required.

D. **FOOD DELIVERY METHOD:** Catered food may **NOT** be mailed via UPS/FED-EX or USPS.

1. Describe **HOW** potentially hazard foods (PHF) will be transported? What equipment will be used to maintain cold food below 41°F or hot food above 135°F?

2. How are the catered foods delivered? : Pick up only Delivery only Served on site by catering staff (*includes Host Facility operations*)

Additional comments: _____

3. A catering operation shall maintain records for all offsite food service activities for a **minimum of 90 days after each operation**. The records must include the event organizer name and contact information, location of service, menu of foods and beverages served. When operating at a host facility, the record shall include your menu and location/date/time of operation.

Describe how you will log this information (e.g. Excel, Word) and provide a sample of that log.

Initial each statement to show you understand the requirements:

_____ All food, prior to the caterer function, shall be stored and prepared at the caterer's permitted food facility.

_____ All utensils and equipment shall be washed and stored at the caterer's permitted food facility. Prior to use, all utensils shall be washed and sanitized. Utensils and equipment shall be protected from contamination.

_____ At all times that the caterer has control over the food, including periods of storage, preparation, transportation and service, all food shall be adequately protected so as to be maintained pure and free from adulteration, spoilage and contamination.

_____ The caterer shall not prepared food from home to be used at a caterer function, except foods that are approved from permitted Cottage Food Operation (CFO).

_____ Caterer must ensure potable water is available and toilet facilities shall be available within 200 feet of the off-premise catered function.

_____ Catering vehicle shall be maintained in a clean, sanitary condition.

_____ All Potentially Hazardous Foods (PHFs) shall be prepared, transported, and maintained at the appropriate temperature (e.g. cold foods @ $\leq 41^{\circ}\text{F}$ and hot foods @ $\geq 135^{\circ}\text{F}$).

_____ Mechanical refrigeration is required to hold all potentially hazardous food during operation; use of ice, portable cooling blocks, or ice chests/coolers is prohibited.

_____ Hands will be washed with warm water, hand soap, and clean paper towels, prior to food handling, after hands are contaminated, after handling raw meats, and before donning gloves.

_____ Employees will not handle food when diagnosed with communicable disease(s), or have symptoms of vomiting and diarrhea.

_____ When operating at an off-site food service event, a sign or business cards must be posted/provided at the event premises stating the Caterer's business name, address, and Environmental Health permit number.

_____ A catering facility may not directly and indirectly sponsor a private event, social function, or sponsored commercial function at which the caterer prepares or serves food.

_____ The Caterer must ensure all approvals are obtained from all applicable agencies prior to operation. (e.g. Fire, Planning, Building, etc.)

By signing below you are certifying that you meet the requirements of the California Retail Food Code (CRFC), as it pertains to a catering operation. Prior to making any changes, I acknowledge that I shall notify the Environmental Health Division within 10 business days if I change commissary kitchen or would like to inactivate my permit. Failure to notify the enforcing agency may result in suspension or revocation of the issued operating Health Permit.

Owner/Authorized Agent Signature

Title

Print Name

Date

FOR OFFICE USE ONLY

Written Standard Operation Procedure Reviewed By: _____ Date Approved: _____

SR : _____ **Comments:**

OW#: _____

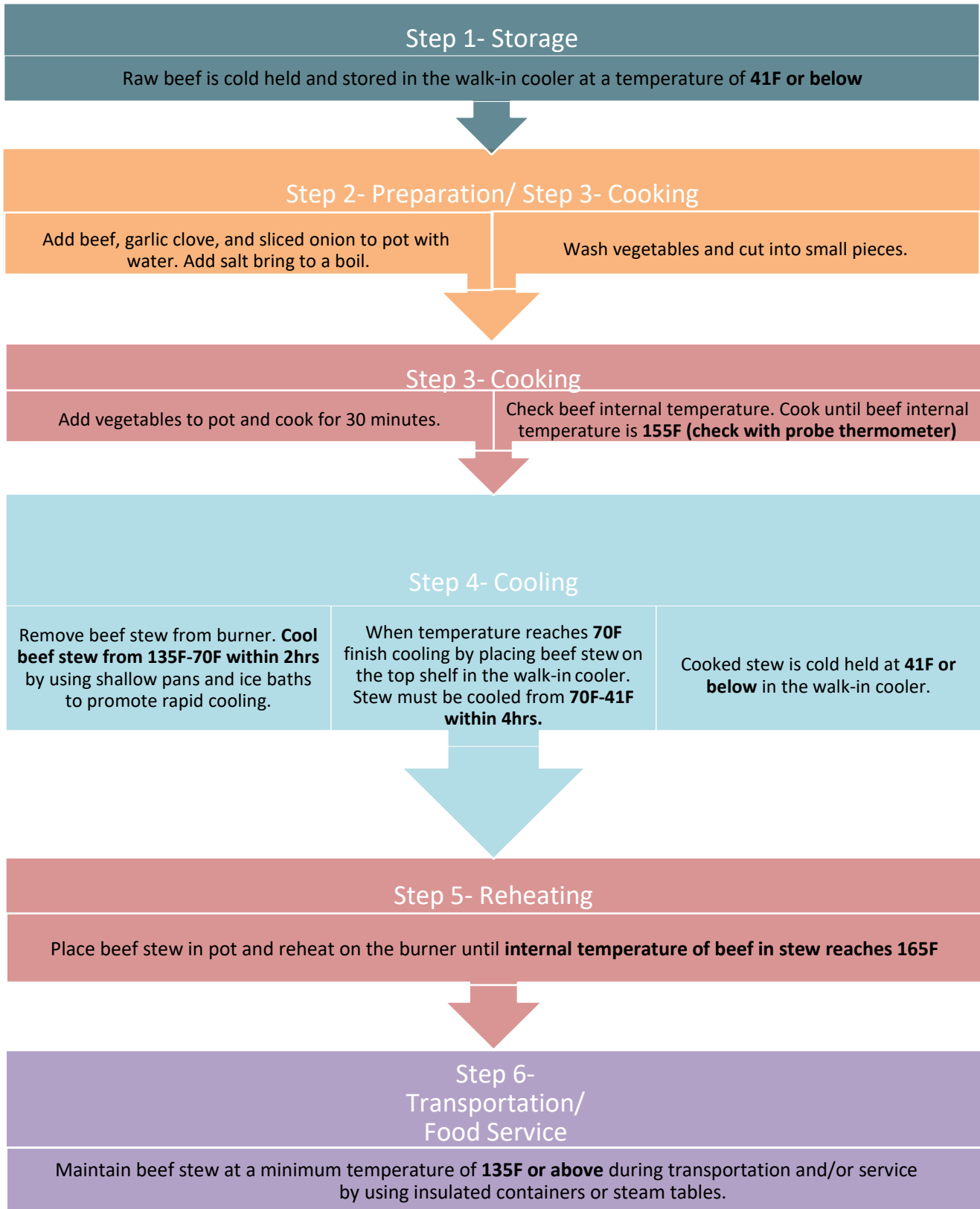
AR#: _____

IN#: _____

PAID ON: _____

EXAMPLE: STEPS/PROCEDURES FOR COMPLEX FOOD ITEM

Beef Stew:





HEALTH APPLICATION FOOD FACILITY PERMIT

OWNER/OPERATOR INFORMATION:			
Owner/Operator Name (DBA):			
Type of Ownership: <input type="checkbox"/> Sole Proprietor <input type="checkbox"/> Corporation <input type="checkbox"/> LLC <input type="checkbox"/> Government Agency <input type="checkbox"/> Other:			
Home Address:	City:	State:	Zip:
Mailing Address:	City:	State:	Zip:
Phone:	Email:		
Has/Does the owner had/have a permit to operate a Facility in Madera County? <input type="checkbox"/> No <input type="checkbox"/> Yes			
If Yes, please answer the following:			
Facility ID: FA0	Facility Name:		
FACILITY INFORMATION:		APN:	
Business Name:			
Business Address:	City:	State:	Zip:
Mailing Address:	City:	State:	Zip:
Business Phone:	Email:		
Manager/Person in Charge (PIC):	Phone:		
Mobile Food Facility VIN #:	License Plate #:		
ACCOUNTS RECEIVABLE (Responsible Party for Billing):			
Account Name:	Care of:		
Account Address:	City:	State:	Zip:
Phone:	Mail Invoices to: <input type="checkbox"/> OWNER/OPERATOR <input type="checkbox"/> FACILITY <input type="checkbox"/> ACCOUNT RECEIVABLE		
CHANGE OF OWNER/OPERATOR: (if applicable)			
Date of Ownership Change:			
Will there be a change in the Menu? <input type="checkbox"/> No <input type="checkbox"/> Yes Provide a copy of the proposed Menu			
Will there be a change in operation? <input type="checkbox"/> No <input type="checkbox"/> Yes If Yes, please explain:			
Will there be sales of alcohol at the facility? <input type="checkbox"/> No <input type="checkbox"/> Yes If Yes, Contact ABC for Licensing Requirements			
Will there be any remodeling of the facility or change in equipment? <input type="checkbox"/> No <input type="checkbox"/> Yes			
If Yes, construction plans, plan check application and fees shall be submitted to this division for review and approval.			
FOOD FACILITY OPERATIONS:			
Days and Hours of Operation:			
Type of Meals to be Served: <input type="checkbox"/> Breakfast <input type="checkbox"/> Lunch <input type="checkbox"/> Dinner <input type="checkbox"/> Other:			
Type of Service(s): <input type="checkbox"/> Onsite Consumption <input type="checkbox"/> Take Out/Delivery <input type="checkbox"/> Other			
Potable Water Source: <input type="checkbox"/> Public <input type="checkbox"/> Private		Liquid Waste Disposal: <input type="checkbox"/> Public <input type="checkbox"/> Private	

PROPOSED FOOD PROCESSES:

Identify the type of food facility operation being proposed: *(check all that apply)*

<input type="checkbox"/>	Food Service Restaurant (with or without seating)	<input type="checkbox"/>	Cottage Food Operation: <input type="checkbox"/> Class A or <input type="checkbox"/> Class B
<input type="checkbox"/>	Retail Market (Prepackaged Only)	<input type="checkbox"/>	Bar
<input type="checkbox"/>	Retail Market w/Food Preparation (e.g., Coffee, Hot Dogs)	<input type="checkbox"/>	Bed & Breakfast
<input type="checkbox"/>	Food Storage Warehouse (Prepackaged Only)	<input type="checkbox"/>	Caterer
<input type="checkbox"/>	Mobile Food Facility (Enclosed Trailer/Truck)	<input type="checkbox"/>	Delicatessen
<input type="checkbox"/>	Mobile Food Facility (Cart)	<input type="checkbox"/>	Bakery
<input type="checkbox"/>	Commissary/Rental Kitchen	<input type="checkbox"/>	Meat Market
<input type="checkbox"/>	Hotel/Motel Continental Breakfast	<input type="checkbox"/>	Produce Market
<input type="checkbox"/>	Host Facility (e.g., Winery, Brewery)	<input type="checkbox"/>	Other:

To determine equipment and refrigeration needs, identify below the type of food preparation to take place at the food facility: *(e.g., All food on-site is stored/displayed sold in prepackaged state, food preparation occurs, unpackaged beverages)*

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Food Item Prepared	Food Operation
<input type="checkbox"/> Meat/meat dishes	<input type="checkbox"/> Refrigeration/Freezing of foods
<input type="checkbox"/> Fish/fish dishes	<input type="checkbox"/> Cooking of foods
<input type="checkbox"/> Poultry/poultry dishes	<input type="checkbox"/> Reheating foods which have been prepared on site
<input type="checkbox"/> Shellfish	<input type="checkbox"/> Holding hot foods for more than 30 minutes
<input type="checkbox"/> Rice, beans and/or cheese dishes	<input type="checkbox"/> Cooling foods after they have been cooked or reheated
<input type="checkbox"/> Baked foods	<input type="checkbox"/> Preparing foods for next day service
<input type="checkbox"/> Soups/Stews/Gravies	<input type="checkbox"/> Washing produce
<input type="checkbox"/> Sandwiches/Salads/Pastas	<input type="checkbox"/> Washing meat, fish, poultry, shellfish
<input type="checkbox"/> Barbecue	<input type="checkbox"/> Raw or undercooked foods (Sushi, Poki, wellness)
<input type="checkbox"/> NO FOOD PREPARATION WILL TAKE PLACE	<input type="checkbox"/> Other: Special Processes (ROP, Cook-chill Sous-vide, Dehydrating, etc.)

BILLING AND COMPLIANCE ACKNOWLEDGEMENT:

I, the undersigned owner, operator or agent, acknowledge that all fees associated with this facility or activity will be billed to the party identified as the OWNER/OPERATOR on this form. I also certify that all operations will be performed in accordance with all applicable Madera County Ordinance Codes and/or Standards and State and/or Federal Laws. I understand that the annual Health Permit is non-transferable to a different owner/operator and upon change of ownership, or the closure of a business, I will notify this Division in writing within 10 business days before the change occurs.

Failure to pay annual Health Permit fees constitutes operating without a valid permit and the owner/ operator is subject to facility closure and/or penalties.

APPLICANT'S SIGNATURE: _____ DATE: _____

DIVISION USE ONLY

FA:	_____
OW:	_____
AR:	_____
IN:	_____

COMMENTS: _____

RECEIVED BY: _____ DATE: _____



COMMISSARY/ PERMITTED FOOD FACILITY (PFF) AGREEMENT FORM

Community and Economic Development

Environmental Health Division

200 W. 4th Street, Suite 3100

Madera CA 93637

P: (559) 675-7823

FAX (559) 675-7919

envhealth@maderacounty.com

APPLICANT INFORMATION

Type of Facility: MFF (trailer/cart/MSU) TFF Caterer Other: _____ For Vehicles, License #: _____
Business Name: _____ Owner/Operator Name: _____
Owner/Operator Address: _____ City: _____ ST: _____ Zip: _____
Phone: () _____ Mobile: () _____ E-mail: _____
Provide days & times of commissary/PFF use: Mon: _____ Tues: _____ Wed: _____ Th: _____ Fri: _____ Sat: _____ Sun: _____

I, the owner/operator, will operate out of the commissary/PFF noted below. I will store all food and operating equipment at the permitted food facility. For vehicles: I will report to the facility at least once each operating day for cleaning and servicing.

Applicant Signature: _____ Print: _____ Date: _____

COMMISSARY/PERMITTED FOOD FACILITY INFORMATION

Type of Facility: Commissary Restaurant Rental Kitchen Host Facility (caterers only) Other: _____
Facility Name: _____ Facility ID (FA#): _____
Owner/Operator Name: _____ Phone: () _____
Facility Address: _____ City: _____ ST: _____ Zip: _____
Business Phone: () _____ E-mail: _____
Food Safety Certificate Holder: _____ Certificate Company/ID #: _____ Date Issued: _____

<input type="checkbox"/> Food Preparation Areas	<input type="checkbox"/> Warewashing facilities and cleaning service operations
<input type="checkbox"/> Supply food products and/or supplies (e.g. ice, meat, utensils)	<input type="checkbox"/> Storage of cleaning chemicals
<input type="checkbox"/> Supply of hot and cold potable water	<input type="checkbox"/> Provide for proper solid waste disposal
<input type="checkbox"/> Storage of frozen/refrigerated food and dry food	<input type="checkbox"/> Provide for proper liquid/waste tank disposal
<input type="checkbox"/> Storage of food-related products and catering equipment	<input type="checkbox"/> Provide used cooking oil disposal
<input type="checkbox"/> Electrical hook-up (for MFF's)	<input type="checkbox"/> Toilet & handwashing facilities for employees

I, the commissary/PFF owner/operator, can and will provide the necessary facilities, as indicated above by the applicant, at my permitted food facility. I acknowledge that I am ultimately responsible for the maintenance and sanitation of this facility. In addition, I will notify Madera County Environmental Health Division (MCEHD) when this agreement is terminated by either of the involved parties.

Commissary/PFF Operator Signature: _____ Print: _____ Date: _____

COMMISSARY/PERMITTED FOOD FACILITY OUTSIDE OF MADERA COUNTY

Provide a copy of a valid Environmental Health Permit for the commissary/PFF and obtain a signature of an Environmental Health Specialist (EHS/REHS) from the local Environmental Health agency of that county.

County Name: _____ Phone: () _____ Date: _____
Address: _____ City: _____ ST: _____ Zip: _____

The above checked requirements are available at the proposed commissary/permitted food facility.

EHS/REHS Name (print): _____ Food Facility Permit Expiration Date: _____
EHS/REHS Signature: _____ REHS #: _____

You are hereby advised that pursuant to the California Health and Safety Code, Section 114395, any person who violates any provision of this part or regulation adopted pursuant to this part is guilty of a misdemeanor. Each offense shall be punished by a fine of not less than twenty-five dollars (\$25) or more than one thousand dollars (\$1,000) or by imprisonment in the county jail for a term not exceeding six months, or by both fine and imprisonment. In addition to the penalties prescribed under California Health and Safety Code, Section 114387, violators who operate without the necessary permits shall be subject to closure of the facility and a penalty not to exceed three times the cost of the health permit.



FOOD SAFETY CERTIFICATION

Health and Safety Code section 113947.1 states, "Each food facility shall have an owner or employee who has successfully passed an approved and accredited food safety certification examination." Section 113947.1 further states, "The responsibilities of a certified owner or employee at a food facility shall include the safety of food preparation and service, including ensuring that all employees who handle, or have responsibility for handling, unpackaged foods of any kind have sufficient knowledge to ensure the safe preparation or service of the food, or both." Additional specifications for approved food safety certifications can be found in Health and Safety Code section 113947.2 and 113947.3.

A copy of the certificate must be kept on the premises of the facility at all times and available at times of inspection by enforcement officers. Per section 113947.1, "Certified individuals shall be recertified every **five years** by passing an approved and accredited food safety certification examination."

FOOD SAFETY CERTIFICATION PROVIDERS

This is a list of food safety certification providers who have notified us of their services. There may also be other providers, which have not notified us. This list does not imply an endorsement of any of the providers.

* **S** = Spanish, **K** = Korean, **V** = Vietnamese, **C** = Chinese, **M** = Mandarin, **CA** = Cantonese, **J** = Japanese, **H** = Hmong

American Food Safety Institute	(800) 723-3873	www.americanfoodsafety.com
Fidelity Loss Control Management	(866) 221-4045	www.flcm.net
National Registry of Food Safety Professionals	(800) 446-0257	www.NRFSP.com
Sysco Food Services of Central California	(209) 527-7700	www.sysco.com
Tap Series (Computer Based) *S	(888) 826-5222	www.tapseries.com
PSI	(800) 211-2753	www.lasergrade.com
Fidelity Safety & Training	(866) 221-4045	www.fidelitysafety.com
Focus Food Safety(Offered in Spanish)	(800) 845-2573	
Food Safety Educators *S	(831) 521-4635	www.foodsafetyeducators.com
AAA Food Handler Training *S,K,J,V,C	(877)222-3487	www.aaafoodhandler.com
Bon Appétit Food Safety *S	(559) 281-3695	
Clovis Community College	(559) 325-5200	www.cloviscollege.edu
Sam Xiao Zhang *M,C	(408) 666-7866	sam2009sam@126.com
All Star Food Safety Training *S	(559)381-1904 or (559) 364-6976	
LL Resources *S	(559) 859-2266	www.llresources.com
360training.com	(877) 881-2235	www.360training.com

TO SEE CURRENT LIST OF ACCREDITED PROVIDERS BY ANSI, CLICK ON <http://tinyurl.com/FMcert>



CALIFORNIA FOOD HANDLER CARD LAW



California Retail Food Code, an excerpt from the California Health and Safety Code, section 113790 and 113948 requires food handlers to have a **California Food Handler Card (CalCard)** within 30 days of being hired. Cards are valid for three years. Employees that have a valid Food Manager Certificate do not need a Food Handler Card as well. Employers are required to maintain documentation of their employee's food handler cards. Here is information about the food handler card:

1 Who has to have a California Food Handler Card?

Individuals working in food facilities who are involved in preparing, storing, or handling food. This includes:

- | | | |
|--------------------|---|---------------------------------------|
| ✓ Wait staff | ✓ Bussers | ✓ Host/hostesses that handle food |
| ✓ Chefs | ✓ Bartenders | ✓ Supervisory personnel |
| ✓ Cooks | ✓ Beverage pourers (including alcohol beverage pourers) | ✓ General managers and other managers |
| ✓ Head cooks/chefs | | |

that work in all types of restaurants, cafes, beverage facilities, smoothie facilities, bakeries, delis, mobile lunch trucks, mobile carts, bars, kiosks, and any other food facility staff that is not specifically exempt.

2 Who is exempt from obtaining a California Food Handler Card?

- | | | |
|---|---|--|
| ✓ Temporary Food Facilities (food booths at community events) | ✓ Food facilities with approved in-house training* | ✓ Venues with snack bars in which the majority of sales are from admission tickets, but does not include any area in which restaurant style sit-down service is provided |
| ✓ Certified farmer's markets | ✓ Grocery stores, and grocery store delis, bakeries, meat and produce departments all under one owner | ✓ Elderly nutrition programs administered by California Department of Aging |
| ✓ School cafeterias (public or private) | ✓ Facilities used for the confinement of adults or minors such as a jail, juvenile hall, camp/ranch | ✓ Any person who has a valid Food Manager Certification |
| ✓ Bed and breakfast | ✓ Food facilities subject to collective bargaining agreement | ✓ Volunteers without compensation and who are not family |
| ✓ Drug stores | | |
| ✓ Commissaries | | |
| ✓ Licensed health care facilities | | |
| ✓ Convenience stores | | |

* In-house training course must be approved pursuant to Subpart 2-103.11 of the 2001 Model Food Code, the food facility must provide evidence of approval, and food handler card training must be provided during normal work hours at no cost to the employee.

3 How can I find an approved food handler class?

The only class providers that are allowed to offer the California Food Handler Card class are listed on the American National Standards Institute (ANSI) website below. Because new providers are being added frequently, we are not providing a list here as it would quickly become outdated. Most are online classes for about \$15 or less. Click the following link or enter it into your web browser for the most recent list of classes:

<http://tinyurl.com/CalCard>

New providers are continually being added. Check this website often for the latest listing.



For more information, contact the Madera County Environmental Health Division at 559-675-7823.