



# County of Yolo

DEPARTMENT OF COMMUNITY SERVICES

## Environmental Health Division

292 West Beamer St., Woodland, CA 95695

PHONE - (530) 666-8646 FAX - (530) 669-1448

### Cal Code Food Facility / Cottage Food Operation Water System Permit Application

Applicant/ Business Name: \_\_\_\_\_

Address: \_\_\_\_\_

The \_\_\_\_\_ hereby makes application to the Environmental Health  
Business Name

Division for a Water Supply Permit to conduct a business serviced from privately owned water source for a:

- Food Facility as defined under the California Health and Safety Code, Section 113789.
- Cottage Food Operation (CFO) that is to be registered of permitted pursuant to the California Health and Safety Code, Section 114365.

Pursuant to the provisions of the California Safe Drinking Water Act (Health & Safety Code, Section 116270) please provide the following information:

1. Description of Source (Well, Spring, Surface Water): \_\_\_\_\_.
2. Is water treatment provided, and if so, what is the treatment purpose?  
\_\_\_\_\_.
3. Do you have a Well Completion Report (Well Log)? yes no (If so, please attach a copy. If not, please submit a request to the CA Department of Water Resources.)

I (We) declare under penalty of perjury that the statements on this application and on the accompanying attachments are correct to my (our) knowledge and that I (we) are acting under authority and direction of the responsible legal entity under whose name this application is made.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Printed Name & Title: \_\_\_\_\_

Email: \_\_\_\_\_ Telephone: \_\_\_\_\_

#### **Staff Use Only**

System Number:

Facility ID: