



# County of San Diego

DEPARTMENT OF ENVIRONMENTAL HEALTH  
FOOD AND HOUSING DIVISION

P.O. BOX 129261, SAN DIEGO, CA 92112-9261  
Phone: (858) 505-6900 FAX: (858) 505-6998  
1 (800) 253-9933  
[www.sdcdeh.org](http://www.sdcdeh.org)



## Conditional Approval of a Culinary Garden Food Source for a Regulated Food Facility

### Food Facility Identification

Name of Facility: \_\_\_\_\_

Health Permit #: \_\_\_\_\_

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

City \_\_\_\_\_ Zip \_\_\_\_\_

### Operator Identification

Name: \_\_\_\_\_

Phone: ( ) \_\_\_\_\_

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

City \_\_\_\_\_ Zip \_\_\_\_\_

### Garden Location

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

City \_\_\_\_\_ Zip \_\_\_\_\_

### Introduction and Purpose

Ensuring the safety of the food supply is critical to a healthy community. Retail food facilities regulated under the California Retail Food Code are required to obtain their food from an "approved source" as defined in sections 113725 and 114021 of the California Health and Safety Code. The regulation of food sources helps to ensure a safe food supply.

Some on-site gardens that provide food for a single co-located regulated food facility ("culinary gardens") are considered by the Department of Environmental Health to be approved food sources for that food facility. Express documentation of these determinations and of the considerations, underlying these determinations will help to ensure safe practices in culinary gardens.

This conditional approval is intended to ensure that the culinary garden supporting the food facility identified above is a safe source of food. The practices and standards required under this agreement are consistent with applicable standards for approved food sources, and are in conformity with current public health principles and practices, and generally recognized industry standards that protect public health.

The certifications within this agreement document the food facility operator's understanding of critical factors that play a role in preventing the microbial or chemical contamination of produce, and document the operator's agreement to adhere to these minimum requirements. If the culinary garden addressed in this agreement is managed by a contractor, the operator shall require that contractor to co-sign this agreement, and shall provide a copy of the cosigned agreement to DEH

**No transfer to or use of garden-grown food in any food facility other than the facility identified above is allowed under this approval.**

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**Water Quality**

1. Water used for irrigation must be obtained from a public water system or wells that have been tested and shown to be free from pathogens
2. Graywater or recycled water is not an approved water source for culinary gardens.
3. Water runoff from other irrigation practices unrelated to the culinary garden or rainfall water runoff must be prevented from coming into contact with the culinary garden.

**Septic Systems**

4. Gardens shall not be planted over septic systems or leach fields

**Presence of Animals**

5. Efforts shall be maintained to exclude animals, including domestic animals, from the growing area.
6. Animal waste may not be used in culinary gardens.

**Pesticides**

7. Pesticides shall not be applied on or around culinary gardens without the written authorizations of the County Agricultural Commissioner (CAC). Gardens claiming to be organic must register with the CAC.

**Compost**

8. Compost applied to culinary gardens must be fully composted, and may not contain animal fecal materials. Composted manure is not permitted on culinary gardens.

**Sanitary Practices**

9. Gardening and harvest equipment must be maintained in a clean condition and stored in a sanitary location. Dedicated equipment shall be solely used in the garden and not used for other purposes on the property.
10. Vegetation at the edges of vegetable patches should be minimized to prevent harborage places for rodents and insects.
11. The grounds surrounding the garden should be maintained in a manner such that pests are not attracted to the area.

**Worker Sanitation**

12. Workers harvesting produce from culinary gardens must properly wash their hands before handling produce and be free of open cuts or wounds on their extremities.
13. Restroom facilities with warm water and soap must be readily accessible to anyone working in a culinary garden.
14. Workers should avoid cross-contamination of produce by ensuring equipment, gloves and other sources of contamination do not come into contact with produce after being potentially contaminated by compost or other materials.

**Inspection/Notification**

15. All garden facilities, equipment, operations and records shall be subject to inspection by Environmental Health at any time without prior notice. DEH costs for offsite inspections will be reimbursed by the operator at the labor rates established in the County Code.



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### Food Facility Operator's Certification

I certify that I am authorized to enter into this agreement on behalf of the food facility operator identified above. I certify that the information in the attached Garden Questionnaire is true and correct. On behalf of the food facility operator and myself individually, I agree to adhere to the requirements listed above and agree to implement best agricultural practices in this culinary garden.

\_\_\_\_\_  
Printed Name and Title

\_\_\_\_\_  
Signature

\_\_\_\_/\_\_\_\_/\_\_\_\_  
Date

### Garden Contract Operator's Certification

I certify that I am authorized to enter into this agreement on behalf of \_\_\_\_\_, the contract operator of this culinary garden. This operator agrees to adhere to the requirements listed above and agrees to implement best agricultural practices in this culinary garden.

\_\_\_\_\_  
Printed Name and Title

\_\_\_\_\_  
Signature

\_\_\_\_/\_\_\_\_/\_\_\_\_  
Date

### DEH Conditional Approval of Food Source

The County Department of Environmental Health approves the culinary garden identified above as a food source for the food facility identified above. The approval is conditioned upon the operator's adherence to the requirements and best agricultural practices described above, and shall be void if those practices are not followed.

\_\_\_\_\_  
Printed Name and Title

\_\_\_\_\_  
Signature

\_\_\_\_/\_\_\_\_/\_\_\_\_  
Date

**Department of Environmental Health  
Food and Housing Division**

**Garden Questionnaire**

Garden's Name: \_\_\_\_\_

Operator's Name: \_\_\_\_\_ Phone #: (\_\_\_\_) \_\_\_\_\_

Street Address: \_\_\_\_\_ City \_\_\_\_\_ CA Zip \_\_\_\_\_

**PLOT PLAN:** Attach a plot plan showing the garden as well as major structures, chemical and equipment storage sheds, and septic systems within 100 feet of the garden.

**PLANT/TREE INFORMATION:** Include the type and number of plants and/or trees. Use additional sheet(s) if more space is needed.

Produce type		#	Produce type		#
_____	<input type="checkbox"/> Plant <input type="checkbox"/> Tree	_____	_____	<input type="checkbox"/> Plant <input type="checkbox"/> Tree	_____
_____	<input type="checkbox"/> Plant <input type="checkbox"/> Tree	_____	_____	<input type="checkbox"/> Plant <input type="checkbox"/> Tree	_____
_____	<input type="checkbox"/> Plant <input type="checkbox"/> Tree	_____	_____	<input type="checkbox"/> Plant <input type="checkbox"/> Tree	_____

Water Source: \_\_\_\_\_

Fertilizer Used: \_\_\_\_\_

Compost Used: \_\_\_\_\_ (include source) \_\_\_\_\_

Pesticides Used:	Quantity (in lbs.)	Application frequency
_____	_____	_____
_____	_____	_____

Are handwashing and restroom facilities available onsite?  YES  NO Distance form garden: \_\_\_\_\_

- ANIMALS:**
- 1) Are animals excluded from the growing area?  YES  NO
  - 2) Are any animals raised at this location?  YES  NO If YES:
    - a) Are animals separated from growing area?  YES  NO
    - b) Identify animal type(s): \_\_\_\_\_
    - c) Do the same workers take care of animals and produce growing areas?  YES  NO

- PRODUCE:**
- 1) Where is produce sold or used? \_\_\_\_\_
  - 2) Is produce washed prior to sale or use?  YES  NO
  - 3) Is produce processed at this location?  YES  NO