



Public Health Permit Application Instructions for MICROENTERPRISE HOME KITCHEN OPERATION (MEHKO)

Environmental Health Division

Homebased Food Operations Program

5050 Commerce Drive, Baldwin Park, CA 91706-1423

www.publichealth.lacounty.gov/eh

homebasedfoods@ph.lacounty.gov | 626) 430-9855



Please fill out each section completely by printing or completing the fillable PDF. Refer to the list of required documents to be submitted with this application, and instructions for payment. Application will be reviewed within 20 business days.

1. Type Application Date

2. MEHKO Information

- a. Name of Business
- b. Address of Business
 - i. Unit (if applies), City, Zip Code
- c. Business Owner's Information
 - i. First and Last
 - ii. E-mail address
 - iii. Phone Number

3. Billing Information

- a. Check box if you want the bill sent to your **Business Address**
- b. Check box if you want the bill sent to a **different Address** that is not the business address
 - i. Address
 1. Unit (if applies), City, State, Zip Code

4. Fee Information (Fees can not be refunded or transferred)

- a. Check the box if you are paying for the **Initial Application Review** for the 1st home kitchen evaluation, application, review of the Standard Operating Procedures, and review of the menu **(One-time fee)***
 - i. **Fee is \$597**
- b. Check the box if you are paying for a **Site Evaluation** fee for changes that have been made to the menu or equipment (if you have already received approval). This is an **hourly** fee.
 - i. Hourly fee is \$167
- c. **Note:** You will be contacted to schedule a Home Kitchen Evaluation. If the home kitchen is approved, a **MEHKO Public Health Permit fee of \$347 will be invoiced** to the operator. The Permit fee is due within **30 days** of the kitchen approval. [Do not submit your payment for this fee until you receive an invoice.](#)

If you do not pay the fees that are due, it is a violation of Title 8-Consumer Protection, Business, and Wage Regulation of the Los Angeles County Code and you may receive penalty fees.

5. Initial Application Review for Fee Waiver

Los Angeles County is offering a one-time fee waiver on a first come, first-serve basis for up to 1,000 MEHKO permittees. The fee waiver will pay for the initial application review of \$597. The fee waiver is available until June 30, 2026, or until the funding runs out.

How do I determine if I am eligible for a Fee Waiver?

- The MEHKO is not in the City of Pasadena, Long Beach, or Vernon
- The MEHKO permittee **annual profit** is less than \$50,000. To find out what your **annual profit** is, subtract total earnings from your expenses.
- Never been issued a MEHKO Public Health Permit in Los Angeles County or received a fee waiver for the initial application review fee.

I Confirm

- By completing and submitting this section of the MEHKO Public Health Permit Application, I acknowledge that I am requesting a MEHKO one-time subsidy from the Los Angeles County Department of Public Health, Environmental Health Division (EH).
- I acknowledge that the subsidy will cover 100% of the \$597 MEHKO Public Health Permit Application initial review fee.
- I acknowledge that the subsidy will NOT cover any additional site evaluation, additional application review, or the cost of a Public Health Permit.
- I acknowledge that receipt of a subsidy request does not guarantee that I will be approved and granted a MEHKO permit.
- I acknowledge that I will be subject to the requirements of the California Health and Safety Code and must complete the approval process through the Department of Public Health.
- I declare that if I am awarded a subsidy, my story may be utilized for promotional and marketing objectives to showcase the County's achievements.
- I acknowledge that if I am awarded the subsidy but decide not to move forward with the MEHKO, I thereby, forfeit the subsidy; no monetary payment will be issued to me.

Check the box if you want to apply for the MEHKO Initial Application Review Fee Waiver

If you want to apply for the fee waiver, type your First and Last name on the line below and please read the statement:

I, _____ (first and last name) declare under penalty of perjury under the laws of the State of California that the information above is true and correct. I further understand that if I make false statements, false representations, or provide misleading or incomplete information to the County in order to receive the Subsidy, I may be, disqualified from the program, be subject to civil liability and penalties, be required to pay back the amount of the subsidy, and may be excluded or banned from participating in other County programs.

6. Terms of Agreement

I hereby certify under penalty of perjury that the above information is true and correct to the best of my knowledge and will operate my MEHKO in compliance with the requirements set forth in the California Health and Safety Code.

I understand that MEHKOs may sell up to 30 meals per day; no more than 90 meals per week and can earn up to \$100,000 annually. I understand that MEHKOs may sell up to 80 meals per day; no more than 200 meals per week and can earn up to \$150,000 annually if operating along with an approved Compact Mobile Food Operation.

I understand that MEHKO Public Health Permits are non-transferable and non-refundable. I understand that refunds may be considered only when funds are collected in excess, error, or as double payment. I shall notify this agency in writing if I discontinue operation or change the billing address. I understand that failure to do so may result in an obligation to pay additional penalties.

I understand that a failure to maintain a current Public Health Permit may result in the closure of the MEHKO, pursuant to Los Angeles County Code, California Health and Safety Code, and/or applicable local City ordinances.

After issuance of the Public Health Permit, I hereby consent to all necessary inspections conducted by the Department of Public Health, Environmental Health Division.

I understand that any changes to my approved operations, including menu and equipment, must be reported to the Environmental Health Division in writing prior to the change within twenty (20) calendar days.

Box 1: Type Owners Name

Box 2: Type Owners Signature

Box 3: Type Date

7. Please submit the documents below with this application

- Copy of Identification. Identification includes, Driver's license, passport, or other government issued I.D.
- Standard Operating Procedures and menu
- Food Safety Manager Certificate
- Food Handler Card (s) for all employees, and/or individuals involved with the MEHKO (this can be submitted within 30 days of hire)
- Well-water test results (if applicable)

8. Submission:

- **Submit application online:** to the Homebased Food Operations Program by calling 626-430-9855 or emailing homebasedfoods@ph.lacounty.gov to receive an e-mail that is secure.
- **Submit application in person to:** 5050 Commerce Drive, Baldwin Park, CA 91706

9. For Payments:

- Pay for your Public Health Permit when you receive the invoice
- Include your invoice number if you are paying by mail
- Do not mail cash

- **Payments can be made online using:**
 - Credit Card (Visa, MasterCard, American Express, or Discover)
 - Debit Card
 - Electronic Check (ECheck)
 - There is an additional fee charged for paying online.

- **Payments can be made by mailing:**
 - Check, Cashier’s Check, or Money Order
 - Make Payable to County of Los Angeles
 - Put on the note line of the check “MEHKO”
 - Mail to:
 - Department of Public Health
 - 5050 Commerce Drive
 - Baldwin Park, CA 91706

- **Payments can be made in Person:**
- **Payment types accepted in person are:**
 - Cash, Check, Cashier’s Check, or Money Order
 - Please pay with the exact amount that is due
- **Pay in person at the Environmental Health Headquarters:**
 - Address is: 5050 Commerce Drive, Baldwin Park, CA 91706
 - Hours of Operation 8:00am to 4:30pm, Monday through Friday