



Home Bakery Business Binder

Starting a Legal Home Bakery — Phase 1

BUSINESS NAME

YOUR NAME

STATE & COUNTY

DATE STARTED

TARGET LAUNCH DATE

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BINDER SECTIONS

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REFERENCE PAGES

— Business Summary (one-page overview)	Summary
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B Master Launch Checklist	App. B
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Print this binder as a packet. Place each section behind a labeled tab divider. This is your business plan — in your words, built from your own decisions.

My Foundation

Should You Start a Home Bakery?

Why

△ STEP 0 — Complete this before anything else in this binder

LOCAL ZONING CHECK

MY TOWN / CITY

MY COUNTY

ZONING OFFICE PHONE

DATE CALLED

PERSON I SPOKE WITH

Is a cottage food operation permitted in my residential zone?

☐ **YES** — I can proceed. Confirmation received: ☐ Email ☐ Verbal

☐ **NO** — I need to explore alternatives (commercial kitchen rental, zoning variance, neighboring town)

☐ Still checking — follow up by: _____

Do not invest in business setup until this box is resolved. One phone call can save months of wasted effort.

MY REAL WHY

First answer:

One level deeper — why does that actually matter to me?

This second answer is my anchor. This is what I come back to when it gets hard.

MY INCOME GOAL + ORDER MATH

MONTHLY INCOME GOAL

PER WEEK

AVG ORDER PRICE

ORDERS/MONTH NEEDED

Does that feel manageable? ☐ Yes ☐ Stretch ☐ Need to adjust

MY BAKER TYPE

☐ **Side Hustle Baker** — I want consistent orders but baking isn't my main income source

☐ **Business Baker** — I want this to be my business and I'm willing to do the full setup

My reason (one sentence):

HOUSEHOLD PARTNERSHIP PLAN

WHO NEEDS TO BE IN THIS CONVERSATION

CONVERSATION BY

What we need to discuss:

- ☐ Baking schedule & time
- ☐ Startup costs & budget

- ☐ Kitchen & storage space
- ☐ What support I need from them

My Commitment Level

Hobby or Business? The Mindset Shift

Mindset

MINDSET SHIFT READINESS — RATE 1 TO 5

SHIFT	MY SCORE	WHAT WOULD HELP ME BUILD READINESS HERE?
Taxes		
Customer Service		
Deadlines		
Setting & Enforcing Rules		
Saying No to Wrong Orders		
MY LOWEST SCORE IS	THIS IS WHERE I NEED TO GROW FIRST	

MY REAL AVAILABILITY

HOURS/WEEK I CAN GIVE	WEEKENDS/MONTH AVAILABLE	MAX ORDERS/WEEK WITHOUT BURNOUT	STARTING TARGET (ORDERS/MONTH)

MY DRAFT BUSINESS POLICIES

DEPOSIT %	MINIMUM LEAD TIME (WEEKS)	CANCELLATION — DEPOSIT FORFEITED WITHIN HOW MANY DAYS?
CHANGES ACCEPTED UP TO HOW MANY DAYS BEFORE PICKUP?		

MY BIGGEST BUSINESS CONCERN

Write it specific — not "what if I fail" but the real thing underneath that

I'll revisit this on my Launch Declaration page — by Episode 10, most of it will be answered.

My Business Structure

Choosing Your Business Structure

Structure

MY DECISION

☐ **Sole Proprietorship** — Simple to start; no separation between me and my business

☐ **LLC** — Legal separation between me and my business; costs to form and maintain

My reason (one sentence):

DECISION GUIDE — IF STILL DECIDING

QUESTION	YES / NO
Am I selling to the general public (not just friends & family)?	
Do I plan to take large or high-value orders (\$200+)?	
Do I want a business bank account?	
Am I concerned about personal liability?	
Will I be selling at farmers markets or public events?	

Three or more YES answers → LLC is worth the cost and effort.

LLC COSTS & TIMELINE (IF APPLICABLE)

STATE ONE-TIME FILING FEE	ANNUAL REPORT / RENEWAL FEE	REGISTERED AGENT	TARGET SETUP DATE
☐ Operating agreement downloaded	☐ Filed		

MY LIABILITY AWARENESS

The situation I'm most concerned about from a liability standpoint:

I'll keep this in mind when I choose my insurance in Section 7.

My Registration Plan

Registering Your Bakery Business

Register

BUSINESS IDENTITY

BUSINESS NAME (AS REGISTERED — USE THIS EXACT FORM EVERYWHERE)

STATE

COUNTY

NAICS CODE (MOST HOME BAKERS: 311811 — RETAIL BAKERIES)

USE THIS NAICS CODE ON EVERY GOVERNMENT FORM, BANK APPLICATION, AND GRANT THAT ASKS FOR YOUR BUSINESS TYPE.

Most home bakers use 311811 (Retail Bakeries). Write it here once and copy it from here.

NAME AVAILABILITY CHECKS — DO BEFORE FILING

- ☐ State business name search — clear
- ☐ County DBA records — clear
- ☐ USPTO trademark search — clear
- ☐ Domain name available and registered
- ☐ Social handles checked (Namechk.com)

REGISTRATION CHECKLIST

STEP	REQUIRED?	LINK / WHERE	COST	TARGET DATE	✓
State business registration	Y / N		\$		
LLC formation (if applicable)	Y / N		\$		
DBA / trade name filing	Y / N		\$		
Newspaper publication (if required)	Y / N		\$		
Local / county business license	Y / N		\$		

ALL REGISTRATION COMPLETE BY

DBA CERTIFICATE FILED

BUSINESS IDENTITY CHECKLIST

ITEM	DONE	DETAILS
Domain registered (~\$12–15/yr)	☐	
Instagram handle claimed	☐	@
Facebook page created	☐	
TikTok handle claimed	☐	@
Pinterest handle claimed	☐	@
Business Gmail created (free)	☐	@gmail.com
Google Voice number set up (free)	☐	() —

My EIN, W-9 & Tax Identity

Getting an EIN

Tax ID

EIN — EMPLOYER IDENTIFICATION NUMBER

☐ Yes, I'm getting an EIN ☐ No — my reason: _____

MY EIN (TREAT LIKE SSN — STORE SECURELY)

DATE APPLIED

WHERE I'M STORING IT

Apply at IRS.gov — free, 10 minutes, instant. Never pay a third-party service — the EIN is always free from the IRS directly.

W-9 — REQUEST FOR TAXPAYER IDENTIFICATION NUMBER

Download from IRS.gov. Fill out once. Have it ready to give to any vendor, supplier, or client who asks.

W-9 COMPLETED

DATE

SAVED AT

☐ Printed copy in this binder

SECURITY NOTE:

Never email a W-9 as an unprotected attachment. Use a secure portal, a Drive link with restricted access, or a password-protected PDF.

QUARTERLY TAX CALENDAR — ADD TO YOUR CALENDAR NOW

☐ April 15 — Q1 payment ☐ June 15 — Q2 payment ☐ September 15 — Q3 payment

☐ January 15 (next yr) — Q4 payment

TAX SAVINGS RATE I'M USING

MY TAX SAVINGS ACCOUNT AT

SSN REPLACEMENT PLAN

Places where I currently use my SSN for business that I'll replace with my EIN:

My Financial Foundation

Opening a Business Bank Account

Money

BUSINESS BANKING

BANK I'M USING & WHY	ACCOUNT TYPE	TARGET OPEN DATE

SALES TAX & RESALE CERTIFICATE

MY STATE'S RULE ON BAKED GOODS	CONFIRMED AT
☐ Exempt ☐ Taxable ☐ Partially taxable Sales Tax Permit:	☐ Required — registered: _____ ☐ Not required
RESALE CERTIFICATE NAME IN MY STATE (E.G. NJ: ST-3)	COMPLETED DATE
☐ Copy filed in this binder Suppliers given certificate: _____	

PAYMENT METHOD & BUSINESS CREDIT

PRIMARY PAYMENT METHOD	FEE PER TRANSACTION	BUSINESS CREDIT CARD	CARD OPENED DATE
☐ 1099-K threshold noted — I'll receive one when I exceed \$600 in platform payments			

DUNS NUMBER & BUSINESS CREDIT FOUNDATION

APPLIED AT DNB.COM	RECEIVED DATE	MY DUNS NUMBER

DUNS + EIN + business credit card (paid in full monthly) = your business credit foundation. Phase 2 covers building business credit intentionally.

BOOKKEEPING SYSTEM

TOOL	WEEKLY BOOKKEEPING TIME

FIRST QUARTER PROJECTION

MONTHLY REVENUE GOAL	MONTHLY EXPENSES (EST.)	MONTHLY PROFIT	QUARTERLY PROFIT (×3)	TAX RESERVE (30%)	WHAT I ACTUALLY KEEP

My Insurance Plan

Business Insurance for Home Bakers

Protected

INSURANCE COMPARISON

	QUOTE 1	QUOTE 2	QUOTE 3
Company			
Annual cost	\$	\$	\$
Per-occurrence limit			
Product liability included?	Y / N	Y / N	Y / N
Covers farmers markets?	Y / N	Y / N	Y / N
Online / shipped sales?	Y / N	Y / N	Y / N
Unlimited add'l insureds?	Y / N	Y / N	Y / N
COI — instant or days?			
Key exclusions			

MY DECISION

I'M GOING WITH	ANNUAL COST	START DATE	POLICY NUMBER
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☐ Portal login saved ☐ COI downloaded & filed in this binder

MARKETS / EVENTS REQUIRING CERTIFICATE OF INSURANCE (COI)

MARKET / EVENT	CONTACT	COI SENT	DATE
		☐	
		☐	
		☐	

Attach a copy of your COI to this tab.

My Cottage Food Compliance

Understanding Cottage Food Laws

Legal

ZONING CONFIRMATION (FROM SECTION 1)

☐ Confirmed permitted ☐ Home occupation permit also required — filed: _____

STATE LAW REFERENCE

MY STATE

OFFICIAL LAW / CODE TITLE

OFFICIAL STATE URL

FOOD HANDLER CERTIFICATION

REQUIRED IN MY STATE?

CERTIFICATION OBTAINED

CERTIFICATE NUMBER

EXPIRATION DATE

Attach a copy to this tab. ServSafe at servsafe.com — ~\$15–30, takes 2–3 hours.

MY APPROVED PRODUCT LIST

PRODUCT	ALLOWED?	NOTES / VERIFY
	☐ Yes ☐ No ☐ Verify	
	☐ Yes ☐ No ☐ Verify	
	☐ Yes ☐ No ☐ Verify	
	☐ Yes ☐ No ☐ Verify	

PRODUCTS I CANNOT SELL

ANNUAL REVENUE CAP (OR "NONE")

WHERE I CAN SELL

- | | |
|---|--|
| ☐ Direct-to-consumer (home pickup) | ☐ Farmers markets |
| ☐ Online — local pickup only | ☐ Online — shipped in-state |
| ☐ Online — shipped out of state | ☐ Other: _____ |

REQUIRED LABEL ELEMENTS

- | | |
|---|--|
| ☐ Business name + home address | ☐ Product name |
| ☐ Ingredients list (by weight) | ☐ Net weight or volume |
| ☐ Allergen statement | ☐ "Made in a home kitchen" disclaimer |

My state's required disclaimer text (exact wording):

My Permit Application Tracker

Applying for Your Cottage Food Permit

Pending

PERMIT STATUS

☐ Permit required ☐ Registration only ☐ No permit required

If no permit required — what I need instead:

REQUIRED DOCUMENTS

☐ _____	☐ _____	☐ _____
☐ _____	☐ _____	☐ _____

APPLICATION LOG

STEP	DATE	NOTES
Application downloaded / accessed		
Application submitted		
Filing fee paid — amount \$		Confirmation #:
Inspection required? Y / N		
Inspection scheduled		
Inspection completed		
Approval received		

FOLLOW-UP CONTACT

NAME	PHONE	OFFICE	FIRST FOLLOW-UP DATE (2 WKS AFTER SUBMISSION)
_____	_____	_____	_____

Attach a copy of your permit / approval letter to this tab when received.

My 30–90 Day Launch Plan

What to Do While Waiting for Approval

Launch

KEY DATES

PERMIT SUBMITTED

EXPECTED APPROVAL

TARGET LAUNCH DATE

MY WAITING PERIOD RUNWAY

WEEKS

RECIPES

BRAND

PACKAGING & PHOTOS

SOCIAL MEDIA

SYSTEMS

1–2

3–4

5–6

7–8

9–10

BRAND DECISIONS — LOCKED IN

PRIMARY COLOR (HEX)

ACCENT COLOR (HEX)

DISPLAY FONT

BODY FONT

☐ Logo created File location: _____

FIRST-CUSTOMER PLAYBOOK

5 people I'm texting directly before I launch publicly:

1.

2.

3.

4.

5.

LOCAL FACEBOOK GROUPS I'VE JOINED

EMAIL LIST

PLATFORM (MAILCHIMP / MAILERLITE)

LIST CREATED DATE

SIGN-UP LINK

Goal: 10 email subscribers before launch day. Your list is yours — no algorithm can take it from you.

COMPLETE AFTER ALL 10 TABS ARE FILLED IN

Business Summary

Your complete business plan at a glance

Overview

MY NAME

BUSINESS NAME

STATE

BAKER TYPE

My Why

Income Goal \$___/month = ___ orders/month at \$___ avg order

Business Structure ☐ Sole Prop ☐ LLC — Formed: _____

NAICS Code

DBA / Registration ☐ Complete — Filed: _____

EIN ☐ Yes — on file ☐ No

W-9 ☐ Completed and saved ☐ Pending

Business Bank Account ☐ Open — Bank: _____

Business Credit Card ☐ Open — Card: _____

DUNS Number ☐ Applied ☐ Received: _____

Sales Tax ☐ Exempt ☐ Taxable — Permit: _____

Resale Certificate ☐ Obtained ☐ Not applicable

Insurance ☐ Active — Provider: _____ — Start: ____

Food Handler Cert ☐ Obtained — Expires: _____

Products I Can Sell

Products I Cannot Sell

Where I Can Sell

Permit Status ☐ Submitted ___ ☐ Approved ___ ☐ Not required

Customer Policies ☐ Written ☐ Published to order form & social

Domain & Handles Domain: _____ Instagram: @_____

Business Phone Google Voice: () —

Email List Platform: _____ Subscribers: ____

Launch Date

Biggest Concern (Tab 2)

Is it resolved? ☐ Yes — How: _____ ☐ Still working on it

My Customer Policies

Copy these into your order form, website, and social bio link

Policies

ORDER POLICIES

BUSINESS NAME

EFFECTIVE DATE

DEPOSITS

A non-refundable deposit of _____ % is required at booking. Your order is not confirmed until the deposit is received.

FINAL PAYMENT

Remaining balance is due _____. No order will be released without payment in full.

MINIMUM LEAD TIME

All orders require minimum _____ weeks notice. Rush orders may be accepted at my discretion with a rush fee of _____.

ORDER CHANGES

Flavor/size changes accepted up to _____ days before pickup. Design changes accepted up to _____ days before pickup. No changes after baking has begun.

CANCELLATION BY CUSTOMER

Cancelled more than _____ days before pickup: deposit forfeited, no additional charge. Cancelled within _____ days: full order amount is owed.

CANCELLATION BY BAKER

In the event I must cancel, I will notify you immediately and refund 100% of all payments received within 3 business days.

ALLERGEN DISCLOSURE

My products are made in a home kitchen that also processes:

☐ Tree nuts

☐ Peanuts

☐ Wheat / Gluten

☐ Dairy

☐ Eggs

☐ Soy ☐ Sesame

It is the customer's responsibility to disclose all allergies at time of ordering. [Business Name] is not responsible for allergic reactions when allergens have not been disclosed.

DESIGN APPROVAL

For custom orders, a design concept will be shared for approval before baking begins. Once approved, the design is confirmed and cannot be changed.

PHOTOGRAPHY & TASTE GUARANTEE

[Business Name] reserves the right to photograph all orders for portfolio and marketing purposes. If you have a quality concern, contact me within 24 hours of pickup. Refunds based on taste preference are not offered; quality concerns are addressed case by case.

ACCEPTANCE OF TERMS

By placing an order and submitting a deposit, you acknowledge that you have read and agree to these policies.

Questions: _____ (email) _____ (Google Voice)

It's time.

LAUNCH DECLARATION

On _____, I completed my
Home Bakery Business Binder.

I have my **why**.

I have my **legal structure and registrations**.

I have my **EIN, W-9, and tax identity**.

I have my **business bank account and financial foundation**.

I have my **insurance**.

I have my **cottage food compliance plan**.

I have my **permit application in progress**.

I have my **customer policies**.

I have my **launch plan**.

I am ready to launch

SIGNATURE

DATE

*This is not the beginning of a hobby.
This is the beginning of a business.*