

# Food Service Sanitation Code Variance Request

Applicant Name \_\_\_\_\_ Facility ID \_\_\_\_\_

Facility Name \_\_\_\_\_

Facility Address \_\_\_\_\_

E-mail \_\_\_\_\_ Fax \_\_\_\_\_

Work Phone \_\_\_\_\_ Cell Phone \_\_\_\_\_

The Champaign-Urbana Public Health District (CUPHD) and Champaign County Public Health Department (CCPHD) Food Service Sanitation Rules & Regulations, Section 750.360 states that, "The regulatory authority may grant a variance by modifying or waiving the requirements of this Part, if, in the opinion of the regulatory authority, a health hazard or nuisance will not result from the variance."

Instructions on reverse side

- 1) I hereby request the approval of a variance from the requirements of the CUPHD/CCPHD Food Service Sanitation Rules & Regulations, Section (include section number and title):

\_\_\_\_\_

- 2) Variance by (check one):  modifying OR  waiving the requirement.

- 3) Variance requested: \_\_\_\_\_

\_\_\_\_\_

- 4) Reason(s) for seeking a variance from this code requirement: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

- 5) Methods to assure public health protection if this variance is approved: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

(for additional space use reverse side)

For CUPHD/CCPHD use only

Request reviewed by: \_\_\_\_\_ Supervisor review (required): \_\_\_\_\_

Recommendation:  Approved  Rescinded  Denied Date: \_\_\_\_\_

Comments: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

