



**TENNESSEE DEPARTMENT OF AGRICULTURE**  
Division of Consumer & Industry Services

**REQUEST FOR RETAIL VARIANCE**  
**Retail Food Store Sanitation 0080-04-09**

Date: \_\_\_\_\_ Establishment Permit Number: \_\_\_\_\_

Establishment/Organization Name: \_\_\_\_\_

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

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Mailing Address (if different from above):  
\_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

If applying for multiple locations, please list name and establishment number for all locations.

Organization Contact Name: \_\_\_\_\_

Contact Telephone Number: \_\_\_\_\_ Fax Number: \_\_\_\_\_

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

**Please use the checklist below to ensure all necessary items are included with your application:**

**Type of variance requested:**

- |   |   |
|---|---|
| <input type="checkbox"/> Smoking Food for Preservation          | <input type="checkbox"/> Reduced Oxygen Packaging |
| <input type="checkbox"/> Acidification of Food for Preservation | <input type="checkbox"/> Other _____              |
| <input type="checkbox"/> Molluscan Shellfish Life-Support Tank  |   |
| <input type="checkbox"/> Sprouting Seeds or Beans               |   |
| <input type="checkbox"/> Curing Food                            |   |

**Food product for which you are requesting the variance:**

**Attach a statement of the proposed variance of TN 0080-04-09 requirement citing applicable rule section numbers:**

**Attach a statement regarding how the proposed process varies from the rule(s)**

**Attach an analysis of the rationale (justification) for how the potential public health hazards addressed by the applicable rule(s) will be alternatively addressed by the proposal:**

**Attach a HACCP plan if required, including the following:  
(Please see "HACCP Plan Requirements" for guidance)**

- 1. Types of Time Temperature Control for Safety foods (TCS) that are specified in the menu**
- 2. A flow diagram by specific food or category type identifying critical control points and providing information on the following:**
  - a. Ingredients, materials, and equipment used in the preparation of the food**
  - b. Formulations or recipes that include methods and procedural control measures that address the food safety risks involved**
- 3. Food employee and management training plan that addresses the food safety issue(s) of concern**
- 4. Standard operating procedures for the plan clearly identifying:**
  - a. Each critical control point (CCP)**
  - b. The critical limits for each CCP**
  - c. The method and frequency for monitoring and controlling each CCP by the food employee and the person in charge (PIC)**
  - d. The method and frequency for the PIC to routinely verify that the food employee is following the standard operating procedures and monitoring CCPs.**
  - e. Action to be taken by the PIC is the critical limits for each CCP are not met**
  - f. Records to be maintained by the PIC to demonstrate that the HACCP plan is properly operated and managed**

**Attach additional scientific data or other information supporting the determination that food safety is not compromised by the proposal:**

**Please submit your application and supporting documentation to:**

**CIS- Food and Dairy Division  
PO Box 40627  
Nashville, TN 37204**

For questions you may contact the Food and Dairy Division at 615-837-5193

Variances are intended for the allowance of specialized processes that will enhance operations with science based controls and monitoring. All supporting documentation must be submitted along with this completed application.

Incomplete applications cannot be reviewed and will be returned to the applicant. You will be notified upon the receipt of your application. Within 60 days of receipt of your complete application, you will be notified of the approval or denial of the application for variance.

Approved Variance Requests and HACCP Plans are final and no changes or modifications may occur without prior review and approval by this Department. Compliance with approved variances will be monitored during inspections. Due to advancements in technology and changing public health concerns, approved variances will be subject to periodic review by the TN Variance Committee (TNVC). It is the responsibility of the establishment to follow the procedures approved by the TNVC and to notify the Department immediately if there is to be any change made in the approved process.