

South Carolina **DEPARTMENT OF AGRICULTURE**

RETAIL FOOD SAFETY DEPARTMENT

350 Ballard Court, West Columbia, SC 29172

Hugh E. Weathers, Commissioner

SC REGULATION 61-25, RETAIL FOOD ESTABLISHMENTS REQUEST FOR A CONSTRUCTION/EQUIPMENT VARIANCE

Date	Permit Number If issued	
Retail Food Establishment/Organization Name		
Physical Address		
City	State	Zip
Are you applying for multiple locations?	☐ No If yes, please attach a list o	of facilities to this application.
Person in Charge (Owner)		
Phone	Email	
Variance Requested For Construction	Equipment	
Per Regulation 61-25, Section 8-103.10 — Modif	ications and Waivers	
(B) When a retail food establishment desires to u and/or equipment other than specified in this regu	·	
1. Be submitted in writing, and		
2. <u>Include a description</u> of the material(s), eq	uipment, and/or construction procedure	e(s) proposed, and
3. *Identify the material, equipment and/or pe.g. equipment specification sheets, picture	,	. , ,
*Reference Regulation 61-25 Sections 4-1	Materials for Construction and Repair, and	d 4-2 Design and Construction.
Owner/Person in Charge Signature	Name (print)	Submittal Date
RETURN BY EMAIL OR MAIL TO	SCDA USE ONLY	
SCDA Retail Food Safety food-variances@scda.sc.gov	The request is: Approved Denied Additional Information Required	
350 Ballard Court West Columbia, SC 29172	CommentsSCDA Representative	Date

Personal information provided on this document is subject to public scrutiny or release.



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INSTRUCTIONS FOR COMPLETING REQUEST FOR A CONSTRUCTION/EQUIPMENT VARIANCE

INSTRUCTIONS

- 1. Provide the date.
- 2. Provide the permit number if one has been assigned to the establishment.
- 3. Provide the establishment name.
- 4. Provide the establishment's physical address to include the city and zip code.
- 5. If the request will apply to multiple locations, mark the box and attach a list of facilities to include the establishment name (if different from the one provided in item 1.), and physical address to include city and zip code.
- 6. Provide the name of the person in charge or owner.
- 7. Provide a contact telephone number including the area code.
- 8. Provide the contact email address.
- 9. Mark the box indicating the type of variance requested.
- 10. Form should be signed and dated by the person in charge (owner).
- 11. Submit form along with supporting documentation for the variance, to the email or mailing address provided on this form.

OFFICE MECHANICS & FILING

This form is maintained under the retention schedule 11701 - Retail Food Establishments.