



REQUEST FOR VARIANCE

State Form 51184 (R / 5-13)

Food Protection Program

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JAN 23 2014

INDIANA STATE DEPARTMENT OF HEALTH

Telephone: 317/234-8569

FAX: 317/233-9200

FOOD PROTECTION PROGRAM
INDIANA STATE DEPT. OF HEALTH

1. Individual Submitting Request:		Date: <u>1 / 22 / 2014</u>	
Name: <u>Andrea Bursey</u>		Telephone: <u>(704) 926-2293</u> Fax: <u>(704) 926-3963</u>	
Mailing Address: <u>11949 Steele Creek Road</u>		Email: <u>abursey@hisshosushi.com</u>	
<small>Number and Street</small>			
<u>Charlotte</u>	<u>NC</u>	<u>28273</u>	
<small>P.O. Box</small>	<small>City</small>	<small>State</small>	<small>ZIP Code</small>
2. Person/Organization Seeking Variance:			
Name: <u>Hissho Sushi</u>		Email: <u>abursey@hisshosushi.com</u>	
Mailing Address: <u>11949 Steele Creek Road</u>			
<small>Number and Street</small>			
<u>Charlotte</u>	<u>NC</u>	<u>28273</u>	
<small>P.O. Box</small>	<small>City</small>	<small>State</small>	<small>ZIP Code</small>
3. Food Establishment(s) for Which Variance is Sought			
Include the following information for each food establishment: <i>(List here or attach additional pages if necessary.)</i>			
• Physical Location <i>(If different than mailing address):</i> <u>See revised list attached</u>			
• Mailing Address: _____ <small>(Number, Street, City, State, and ZIP Code)</small>			
• Telephone Number: () _____ Fax Number: () _____			
• Person at each retail food establishment most responsible for supervising: _____			
4. State how the proposal varies from each rule requirement, citing relevant rule sections by number:			
<i>(Attach additional pages if necessary.)</i>			
Variance as approved December 19, 2013			
5. Explain how the potential public health hazards and/or nuisances will be alternatively addressed by the proposal. Include supporting studies, Hazard Analysis Critical Control Point (HACCP) Plan(s), standard sanitation operating procedures, and/or any other evidence: <i>(Attach additional pages, if necessary.)</i>			

6. List how the proposal demonstrates the following (if applicable to the request):

A) How the proposal differs from what is common and usual in similar industry situations:

B) How the proposal is unique and not addressed in existing rules or law:

C) How the proposal does not diminish the protection of public health:

D) How the proposal is based on new scientific or technological principle(s):

E) How the implementation of the variance would be practical:

7. Explain how the person/organization seeking the variance will assure that all provisions of a granted variance will be enacted at each food establishment for which a variance has been granted:

8. List all affected parties known by the person/organization seeking a variance, including all affected regulatory authorities: (Attach additional pages if necessary.)

Please see attachment.

9. Attach copies of any related variances, waivers or opinions issued by other governmental agencies.

For Office Use Only

10. Signature of Individual Making Request:

Printed Name, Title: Andrea Bursey, Hissho Sushi, Quality Manager

8. Kroger #091 528 South College Ave.

Bloomington, IN 47401

812-339-3351

Kroger #900 4025 S Old State Road 37

Bloomington, IN 47401

812-824-5200

Kroger #928 1175 S. College Mall Road

Bloomington, IN 47401

812-331-2823

Monroe County Health Department

119 W. 7th Street

Bloomington IN 47404

812-349-2543

Kroger #804 5810 East 71st Street

Indianapolis, IN 46200

317-845-9653

O'malia's Market #209 320 North New Jersey Street

Indianapolis, IN 46204

317-262-4888

Meijer #154 8375 E 96th Street

Indianapolis, IN 46256

317-858-2410

Meijer #230 17000 Mercantile Blvd

Noblesville, IN 46060

317-774-7800

Hamilton County Health Department

18030 Foundation Dr

Suite A

Noblesville, IN 46060

317-776-8500

Baesler's Market 2900 Poplar Street

Terre Haute, IN 47803

812-232-2498

Vigo County Health Department

147 Oak Street

Terre Haute, IN 47807

812-462-3428

Marion County Health Department

3838 N Rural St, Indianapolis, IN 46205

317-221-3196

Kroger/Payless Supermarket #824

1032 Sagamore Parkway West

West Lafayette, IN 47906

765-463-1556

Tippecanoe County Health Department

20 N 3rd Street

Lafayette, IN 47901

765-423-9221

Earth Fare #670

13145 Levison Ln

Noblesville, IN 46060

Earth Fare #675

1392 South Rangeline Rd.

Carmel, IN 46032

Hamilton County Health Department

18030 Foundation Dr

Suite A

Noblesville, IN 46060unty

IUPUI Campus Center Kitchen

420 University Blvd Ste 120

Indianapolis, IN 46202

Marion County Health Department

3838 N Rural St, Indianapolis, IN 46205