



APPLICATION FOR FOOD SERVICE VARIANCE

Name of Establishment		Telephone number		
Address of Establishment	City	Zip		
Name of Applicant		Telephone number		
Owner_		Telephone number		
Address	City	Zip		
SECTION 1-STATEMENT OF PROPOSED VARIANCE Provide a statement of the proposed variance of the Food Cohow the public health hazard(s) is addressed by the Code se	otions	tion numbers. Provide an analysis of	the rationale for	
SECTION 2REASON FOR REQUEST (RATIONALE) Provide an explanation of the alternative to the code request nuisances addressed by the relevant code sections.	•	ernately address the potential public h		





SUPPLEMENTAL INFORMATION (IF APPLICABLE)

Make and Mo Proposed Us	odel Number:e			<u> </u>	
Equipment	ELECTRICAL (KW/HR)	GAS FIRED (BTU/HR)	OTHER (STATE TYPE)	_	
	E FOLLOWING (IF APPLICABLE)				
A. A floor plan to scale of the existing and proposed equipment.					
 B. Manufacturer's specifications C. Manufacturer's instructions for installation, maintenance and cleaning D. Variances from other health department jurisdictions 					
	Applicants Signature		Date		
		AUTHORIZED AGENT DESIG	GNATION		
I HEREBY SERVICE	AUTHORIZE VARIANCE FROM THE DETROIT HEA	(Name of Applicant) ALTH DEPARTMENT AS OUTLINED II	TO ACT AS MY AGENT IN APPLYING FOR N THE ABOVE INFORMATION.	A FOOD	
SIGNATURE OF OWNER			DATE		
OFFICE USE	ONLY				
DENIED:	APPROVED BY:	DATE:	VARIANCE NO		