



REQUEST FOR AN OPERATIONAL VARIANCE SC Regulation 61-25 Retail Food Establishments

DHEC FORM 4314

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 including 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. If the "Other" box is marked, describe the type of variance requested. If variance is specific to food ([D-1845](#)), construction or equipment ([D-1842](#)), please use the form that applies to the request.
11. Form should be signed and dated by the person in charge (owner).
12. Submit form with supporting documentation for the variance to the email or mailing address provided on this form.

Retention schedule for this form is: 11701- Retail Food Establishments.