**Request for Variance and HACCP Plan Checklist for Local EHS**

Please complete this checklist and submit to Variance Committee with completed Request for Variance/HACCP Plan from establishment to [NCVarianceCommittee@dhhs.nc.gov](mailto:NCVarianceCommittee@dhhs.nc.gov)

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| --- | --- |
|  | Completed application with code section cited |
|  | All locations listed or attached that will be using specialized process |
|  | Food involved in HACCP plan, with all ingredients identified |
|  | Type of specialized process being used (ROP, curing, smoking, acidification, etc.) |
|  | Equipment and materials involved |
|  | Flow diagram of food from receiving through service |
|  | Critical control points (CCP) identified on the flow diagram |
|  | Hazard analysis with hazards identified at each step |
|  | HACCP worksheet with CCP’s identified |
|  | Critical limits, monitoring, and corrective action listed for each CCP |
|  | Blank copies of any log sheets |
|  | All applicable SOP’s included (handwashing, calibration of thermometers, employee health policy, sanitization of equipment/utensils, etc.) |
|  | Copy of training program |
|  | **Comments/Field Observations for Committee Consideration:** |

This Request for Variance is supported: \_\_\_\_\_Yes \_\_\_\_\_No

REHS Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_