



REQUEST FOR VARIANCE

State Form 51184 (R / 5-13)
Food Protection Program

INDIANA STATE DEPARTMENT OF HEALTH
Telephone: 317/234-8569 FAX: 317/233-9200

1. Individual Submitting Request:

Date: 06 / 10 / 2013

Name: Marla Shirey Telephone: (765) 774-4444 Fax: ()

Mailing Address: 8724 N 575 E Email: shireyfarm@frontier.com

Mooreland Number and Street IN 47360
P.O. Box City State ZIP Code

2. Person/Organization Seeking Variance:

Name: Shirey Farm Beef Jerky Email: shireyfarm@frontier.com

Mailing Address: same

Number and Street
P.O. Box City State ZIP Code

3. Food Establishment(s) for Which Variance is Sought

Include the following information for each food establishment: *(List here or attach additional pages if necessary.)*

- Physical Location *(if different than mailing address):* same
- Mailing Address: _____
(Number, Street, City, State, and ZIP Code)
- Telephone Number: () Fax Number: ()
- Person at each retail food establishment most responsible for supervising: Marla Shirey

4. State how the proposal varies from each rule requirement, citing relevant rule sections by number:

(Attach additional pages if necessary.)

We would like a variance from Section 187 of the Indiana food code. We propose to process beef from a potentially hazardous product to a non-hazardous, shelf-stable food product through our jerky process.

See attachments:

- #1 Water activity results from Purdue University, Food Science Department
- #2 Water test results from HML.
- #3 Beef jerky process
- #4 Recipes
- #5 Quality and Safety Control

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: *(Attach additional pages, if necessary.)*

Due to Aw tests conducted on our beef jerky at Purdue University's Department of Food Science, no HACCP plan is required.

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:

N/A

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

N/A

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

See attachment #1

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

N/A

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

N/A

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:

Marla Shirey is the sole supervisor of this process. I will hold all steps to our usual high standards. All beef jerky is inspected by me.

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

ISDH and all Indiana counties. Attachment #6 is the ruling found by Dr. James Scott, BOAH, stating that we may also sell across state lines.

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:

Marla J. Shirey, owner

Printed Name, Title: Marla Shirey, owner