



**REQUEST FOR VARIANCE**

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

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SEP 29 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: \_\_\_ / \_\_\_ / \_\_\_

Name: Khine Tun Telephone: (612) 454-9430 Fax: (651) 294-7004

Mailing Address: 13963 Fawn Ridge Way Email: kt@kitsusushi.com

Number and Street  
Apple Valley MN 55124  
P.O. Box City State ZIP Code

**2. Person/Organization Seeking Variance:**

Name: Kitsu Sushi Email: kt@kitsusushi.com

Mailing Address: 13963 Fawn Ridge Way

Number and Street  
Apple Valley MN 55124  
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): 4225 East 82nd St, Indianapolis, IN 46250
- Mailing Address: 13963 Fawn Ridge Way, Apple Valley, MN 55124  
(Number, Street, City, State, and ZIP Code)
- Telephone Number: (612) 454-9430 Fax Number: (651) 294-7004
- Person at each retail food establishment most responsible for supervising: Mikko Chua

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

(Attach additional pages if necessary.)

Section 187 of 410 IAC 7-24, "Retail Food Establishment Sanitation Requirements" relating to the production of sushi rice as a non-potentially hazardous food (non-TCS: non-Time/Temperature controlled for Safety Food) from a potentially hazardous food (TCS: Time/Temperature Controlled for Safety Food) by a process of acidification.

**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.)**

A Critical analysis and studies shown that acidifying rice with of pH value of 4.2 or below and holding at room temperature that it will be safe and the acid will control the growth of B. cereus.

**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:

Rice is usually held by time and temperature standards

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

By holding the rice products by a pH value.

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

Studies show that following proper procedures (a pH value of 4.2 or below) and proper sanitation, rendering the rice safe to hold at room temperature.

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

See attached validation for safe acidification study

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

There is less waste of product and product is easier to work with. Also by using a pH value, there is more consistency in flavoring.

**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:**

For each batch of rice cooked, vinegar is added and then they perform 2 pH tests to verify that they rice is at or below a pH value of 4.2. These pH tests are documented in a log book noting dates, times and pH values.

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

Marion County Public Health Department

**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: Khine Tun

