

A petition for a variance from or waiver of an agency rule shall be filed with the clerk of the agency that adopted the rule, with a copy to the Joint Administrative Procedures Committee, Room 680, Pepper Building, 111 W. Madison Street, Tallahassee, Florida 32399-1400. The petition for a variance or waiver may be withdrawn by the applicant at any time before final agency action.

Florida Department of Health
Board of Opticianry
4052 Bald Cypress Way, Bin C-08
Tallahassee, FL 32399-3258

(check one) Petition for: Variance or Waiver Rule Contesting: _____

Petitioner's Information (required)

DA or DO # (if applicable): _____

Name: _____ Email: _____

Address: _____ City: _____

Address #2: _____ State: _____ Zip: _____

Telephone # - Home: _____ Cell: _____ Work: _____

Attorney or Qualified Representative's Information (if any)

Name: _____ Email: _____

Address: _____ City: _____

Address #2: _____ State: _____ Zip: _____

Telephone # - Cell: _____ Work: _____

Information for Variance or Waiver

(check if) **Emergency Request**

*See 28-104.004, 28-104.005, and 28-104.0051

(check one) Is your Variance/Waiver : **Permanent** or **Temporary**

If **Temporary**, what is the duration of requested variance or waiver? : _____
(dates active)

Contested Rule: _____ Action Requested: _____

Citation to the Statute the Rule is Implementing: _____

Facts Demonstrating Hardship or Violation of Principles Requiring Variance or Waiver:

Lined area for text entry.

(If needed, continue on a separate sheet)

Rulemaking Authority 14.202, 120.54(5) FS. Law Implemented 120.54(5)(b)8. FS. History–New 4-1-97, Amended 3-18-98, 2-5-13.

Justification of Variance or Waiver Requested & How it Serves the Underlying Statutes:

Lined area for text entry.

(If needed, continue on a separate sheet)

Rulemaking Authority 14.202, 120.54(5) FS. Law Implemented 120.54(5)(b)8. FS. History–New 4-1-97, Amended 3-18-98, 2-5-13.

I state that this information is true and correct and recognize that providing false information may result in disciplinary action against my license or criminal penalties pursuant to Sections 484.014, 456.072, 775.082, 775.083 and 775.084, Florida Statutes.

Signature of Person Submitting Petition

Date