**Request for a Temporary Variance**

Name of Certified Operator:

Certificate Number:

File/NOP ID Number:

Address/Physical location:

**Requested variance**

*Please provide information on the requested variance from USDA organic regulations i.e. which production/handling requirement you cannot meet and your proposed alternative to this requirement.*

**Justification for temporary variance request**

[ ] Natural disasters declared by the Secretary;

[ ] Damage caused by drought, wind, flood, excessive moisture, hail, tornado, earthquake, fire, or other business interruption; and

[ ] Practices used for the purpose of conducting research or trials of techniques, varieties, or ingredients used in organic production or handling.

**Support for justification**

*Please provide information on the conditions that necessitate the temporary variance. Attach to this sheet documents that support your requested variance (e.g. production records).*