



## Ohio Department of Commerce Medical Marijuana Control Program

### VARIANCE REQUEST PROCEDURE

Pursuant to Ohio Administrative Code 3796:5-6-04, the Director of the Ohio Department of Commerce (“the Department”) may grant variances from rules promulgated in accordance with Chapter 3796 of the Revised Code in cases where: 1) granting the variance is in the public interest; 2) the applicable provision is not statutorily mandated; and 3) the rule from which the variance is granted would, in the particular case, be unreasonable or unnecessarily burdensome.

The Department requires licensees to submit all variance requests electronically to [MMCPcompliance@com.state.oh.us](mailto:MMCPcompliance@com.state.oh.us). When submitting a variance request, licensees must submit a completed “Variance Request Form” and all other applicable information to be considered for a variance. Furthermore, licensees must state in the email’s subject line: “*Variance Request – [Licensee’s Name and Facility License Number]*” and copy the licensee’s assigned compliance and enforcement agent. In addition to the materials outlined above, licensees must ensure that they remain in communication with the Department and submit any additional information in a timely manner should further information be requested from the Department to review a variance request.

Additionally, licensees must detail the following in the “detail section” of the form.

1. The specific rule and/or application standards from which the variance is being requested. A variance may not be granted for a provision that is statutorily mandated.
2. Demonstrate that the variance will not be contrary to public interest (*e.g.* health and safety of the public).
3. Demonstrate the rule from which the variance is granted would, in the particular case, be unreasonable or unnecessarily burdensome. This can be completed by detailing the practical difficulties or special conditions that the MMCP should consider when evaluating the application of the rule and/or application standards.
4. The timeframe for which the variance is being requested.
5. Any specific actions the Licensee is requesting from the Department.

This narrative may be attached as a separate document to the Variance Request Form.

The submission of a request for variance does not constitute a granting of the variance by the Department and does not release the licensee from complying with Ohio Administrative Code Chapter 3796.

Please respond to all requests for additional information in a timely manner. The Department will be unable to process the variance request if it is not complete. For additional questions, please contact your compliance and enforcement agent and/or [MMCPcompliance@com.state.oh.us](mailto:MMCPcompliance@com.state.oh.us).

# VARIANCE REQUEST FORM

**Instructions:** Licensees who wish to request a variance must complete the following information. The Variance Request Form has been created to allow licensees to apply for approval of a variance as defined in Chapter 3796 of the Ohio Administrative Code.

Variance requests must be submitted electronically to [MMCPcompliance@com.state.oh.us](mailto:MMCPcompliance@com.state.oh.us) with the subject line: “*Variance Request – [Licensee’s Name and Facility License Number.]*” Please copy your assigned compliance and enforcement agent.

## Licensee Information:

<b>Business FEIN:</b>		<b>Facility License #:</b>	
<b>Business Name:</b>			

## Variance Details:

<b>Rule/Application Standard:</b>	
<b>Proposed Timeline for Variance:</b>	
<b>Description of Variance:</b>	

**Justification of Variance:**

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**Attestation:**

- By completing this application, the licensee acknowledges that the signature provided below belongs to a person that has legal authority to sign on behalf of the holder of the Certificate of Operation or Provisional Licensee identified above and that the information provided is true, correct, and complete.

**Requested By:**

<b>Name:</b>		<b>Phone #:</b>	
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**Authorized Representative Signature:** \_\_\_\_\_

**Date:** \_\_\_\_\_