



Florida Department of Agriculture and Consumer Services
Division of Food Safety

Bureau of Food Inspection
Attention: Special Process Approval
3125 Conner Boulevard C-26
Tallahassee, FL 32399-1650
Fax (850) 245-5553

**APPLICATION FOR SPECIAL PROCESS
APPROVAL FOR RETAIL FOOD ESTABLISHMENTS**

WILTON SIMPSON
COMMISSIONER

5K-4.0050, Florida Administrative Code

Application must be submitted and accepted before starting the special processing. A separate application is required for each process if there is more than one.

Date: _____

Business Name: _____ Food Establishment # _____

Location Address: _____

City: _____ State: _____ ZIP: _____ County: _____

Business Owner Name: _____

Owner Contact Phone Number: _____ Email: _____

Name of Applicant: _____

Contact Phone Number: _____ Email: _____

TYPE OF SPECIAL PROCESS APPROVAL REQUESTED (CHECK ONE):

- | | |
|--|---|
| <input type="checkbox"/> Reduced Oxygen Packaging* | <input type="checkbox"/> Smoking Food for Preservation |
| <input type="checkbox"/> Custom Animal Processing for Personal Consumption | <input type="checkbox"/> Curing Food |
| <input type="checkbox"/> Sprouting Seeds or Beans | <input type="checkbox"/> Using Food Additives or Adding Components for Preservation |
| <input type="checkbox"/> Operating a Molluscan Shellfish Life-Support Tank | <input type="checkbox"/> Other Special Processes |

*You may conduct Reduced Oxygen Packaging without having to obtain a Special Process Approval from the Division if at least two barriers (one barrier in addition to refrigeration or freezing) are in place to control the growth and toxin formation of *Clostridium botulinum* and the growth of *Listeria monocytogenes* and all provisions of § 3-502.12 of the FDA Food Code are followed; however, you must submit a Hazard Analysis Critical Control Point (HACCP) plan. You may not begin the process until the Department has approved your HACCP plan in writing.

What is the specific finished product(s) for which you are requesting a Special Process Approval? _____

How do you plan to store the final product? ☐ Refrigeration ☐ Freezing ☐ Shelf Stable

How do you plan to display the final product? ☐ Refrigeration ☐ Freezing ☐ Shelf Stable

If you are using a reduced oxygen packaging process, what barrier you are using to prevent *Clostridium botulinum* and *Listeria monocytogenes* in your process? (see Annex 6 of the FDA Food Code incorporated in subsection 5K-4.002(4), F.A.C.) _____

You will be notified, by email, within 14 days of receipt of your documentation. If there are any deficiencies or additional information is required, you will be notified. After our receipt of all requested information and corrections, you will be notified within 30 days as to whether the Special Process Approval is granted or denied.

A Special Process Approval is not transferable from person to person or place to place. A Special Process Approval may be rescinded if the applicant is not following the parameters/conditions as outlined in the approved application and HACCP plan or if the Department receives additional information that would deem the process a food safety hazard.

I hereby certify that the above information is correct. I have provided all relevant material to the best of my ability. I understand until such time as this Special Process Approval is granted I shall not begin operation of any special process activity. I understand that by submitting this application in no way guarantees that my Special Process Approval will be granted. I understand that if this Special Process Approval is granted it can be rescinded immediately during any official inspection.

Signature of Applicant: _____

Print Name and Position Title: _____

Submit the following documentation with the Special Process Approval Application-FDACS 14095:

- Standard Operating Procedures (SOPs) which include items such as: Step-by-step description of the entire process from start to the finished food product – include ingredients; preparation steps; method(s) of storage and display for sale; labels (include use by date, etc.); calibration of applicable instruments; Sanitation Standard Operating Procedures; training of employees on all aspects of the special procedures; etc.
- A HACCP plan is required, unless, stated otherwise. Provide a HACCP plan with copies of potential monitoring records. A HACCP plan must include all the following:
 - A. A categorization of the types of Time/temperature Control for Safety (TCS) Foods that are specified in your special process such as: type of meats and if raw or cooked, soups and sauces, salads, and bulk, solid foods such as meat roasts, sausages, or of other foods that are specified by the Department;
 - B. A flow diagram by specific food or category type identifying critical control points and providing information on the following:
 - 1. Ingredients, packaging, and equipment used in the preparation of that food, and
 - 2. Formulations or recipes that delineate methods and procedural control measures that address the food safety concerns involved;
 - C. Food employee and supervisory training plan that addresses the food safety issues of concern—include summary outline or course content, trainer and designate responsible person;
 - D. Clearly identify:
 - 1. Each critical control point,
 - 2. The critical limits for each critical control point,
 - 3. The method and frequency for monitoring and controlling each critical control point by the food employee designated by the person in charge (who, what, when and how),
 - 4. The method and frequency for the person in charge to routinely verify that the food employee is following standard operating procedures and monitoring critical control points,
 - 5. Action to be taken by the person in charge if the critical limits for each critical control point are not met (corrective actions), and
 - 6. Records to be maintained by the person in charge to demonstrate that the HACCP plan is properly operated and managed; and
- Additional scientific data or other information, as required by the Department, supporting the determination that the proposal does not compromise food safety such as lab analysis, letter from a Process Authority, etc.
- Lot identification code system—include explanation of code and record keeping system
- Layout of the area where the operation will be performed; include storage, preparation/processing, display area, hand washing sink and three-compartment sink, etc.
- There must be physical separation/barrier OR a scheduling separation from other activities to prevent cross contamination when necessary. A diagram to scale indicating the location of where the processing operation will occur in relation to your other processing areas or specific processing schedule showing times when special processing will take place in relation to your other processing times to avoid cross contamination.
- Any other pertinent, applicable documentation to ensure the safety of the finished product

Submit all required documentation to:

Florida Department of Agriculture and Consumer Services
Division of Food Safety
Attn: Special Process Approval
3125 Conner Boulevard, Room 287 (C-26)
Tallahassee, Florida 32399-1650

OR

food.inspection@fdacs.gov

*Subject line should state "Special Process Approval Application"

Contact 850-245-5520 for any questions or concerns regarding these instructions.