

### **Petition for a Variance to Pullorum-Typhoid Testing Rules, 1721.0300 or 1721.0310**

This form is recommended, but not required to be considered for a rule variance. The Board of Animal Health ("Board") will review the completed petition, along with any related supplemental documentation and will issue a written order granting or denying the variance as required by Minn. Stat. §14.056. If the variance is granted, the Board will notify the Petitioner of the terms and conditions of the variance. Additional information may be required before the Board can grant or deny the variance request. Please note this petition only covers the event dates listed below, each individual Exhibition/Community Sale event will need to have a separate petition completed.

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#### **This form is to be completed by the Poultry Exhibition/Sale Event Manager**

##### **Exhibition of Poultry/Community Sale Manager Information**

Event Manager Name: \_\_\_\_\_

Manager Email: \_\_\_\_\_ Manager Phone: \_\_\_\_\_

##### **Exhibition of Poultry/Community Sale Event Information**

Event Name: \_\_\_\_\_

Event Date(s): \_\_\_\_\_

Event Address: \_\_\_\_\_

##### **Please place a mark by the rule for which you are seeking a variance to the pullorum-typhoid testing requirements:**

Minn. R. Part 1721.0300, subp. 3(B) (Exhibition of Poultry)

Minn. R. Part 1721.0310, subp. 3(B) (Community Sale)

##### **Please check the boxes that correspond to the Exhibition of Poultry or Community Sale requirements for which you are seeking a variance:**

Exhibition - be negative to a pullorum-typhoid test within 90 days prior to the opening date of the exhibition. Minn. R. Part 1721.0300, subp. 3(B).

Community Sale - be negative to a pullorum-typhoid test within 30 days prior to the sale. Minn. R. Part 1721.0310, subp. 3(B).

Other, please explain:

**Please explain why a variance to the pullorum-typhoid testing rules is necessary for your Exhibition of Poultry/Community Sale Event (how would enforcement of the rule result in hardship or injustice?):**

**Please provide any information you are aware of regarding the Board's treatment of similar cases. If unknown, please indicate by putting "unknown":**

**Please provide the name, address, and telephone number of any person you know would be adversely affected by this rule variance being granted. If none, please indicate by putting "none":**

**As a condition of being granted a variance for the Exhibition of Poultry/Community Sale Event, I acknowledge my understanding of each of the following items (place a checkmark in each box to indicate your understanding):**

This petition is for a variance to Minnesota Rules, Parts 1721.0300 or 1721.0310 only. All other statutes and rules are still in full force and effect as they relate to the Event listed on this petition.

This petition only applies to a variance for the Event that is listed on this document.

If a variance is granted for the Event listed on this petition, the terms of the variance will be enforced as if they are part of the rule itself. Minn. Stat. § 14.055.

Any violation of the terms and conditions of a granted variance will result in an immediate revocation of the variance and the Event Manager will be subject to rule violation penalties and enforcement actions.

If a granted variance related to the Event listed on this document is revoked, the Board will take that revocation into consideration during the review process for any future rule variance petitions submitted by the person completing this petition.

**Attestation of the Exhibition of Poultry/Community Sale Event Manager**

I attest to the accuracy of the information presented in this petition for a variance to Minnesota Rules, Part 1721.0300 and/or 1721.0310.

If signing electronically, I understand that my electronic signature has the same legal effect and can be enforced in the same way as a handwritten signature. (Minn. Stat. Ch. 325L.07).

\_\_\_\_\_  
Signature of Petitioner

\_\_\_\_\_  
Printed Name of Petitioner

\_\_\_\_\_  
Date Signed

\_\_\_\_\_

**For Internal Use by the Board of Animal Health**

\_\_\_\_\_  
Date Reviewed

\_\_\_\_\_  
Initials of Reviewer

Granted  
Denied

\_\_\_\_\_  
Date Petitioner Notified

*The Board of Animal Health is an equal opportunity employer.*