

Pinellas County License Board for Children's Centers & Family Child Care Homes

Our mission is to protect and promote the health, safety, and mental development of children cared for in children's centers and family child care homes in Pinellas County

Faith Bornoff, M.Ed., Executive Director
Michael G. Mikurak, Chairperson



Petition for Variance from () or Waiver of Rule()

Please select the appropriate box if you are seeking a variance or a waiver and list the Citation of the Applicable Rule

PETITIONER: _____
Name of Childcare Center or Home Provider

IF NOT REPRESENTED BY AN ATTORNEY:

Name _____ Telephone Number _____
Address _____ Email Address _____
Fax Number _____

IF REPRESENTED BY AN ATTORNEY: (Attorney or qualified representative of the Petitioner information)

Name _____ Telephone Number _____
Address _____ Email Address _____
Fax Number _____

APPLICABLE RULE OR PORTION OF THE RULE _____

CITATION TO THE STATUTE THE RULE IS IMPLEMENTING _____

TYPE OF ACTION REQUESTED _____

SPECIFIC FACTS THAT DEMONSTRATE A SUBSTANTIAL HARDSHIP OR VIOLATION OF PRINCIPLES OF FAIRNESS THAT WOULD JUSTIFY A WAIVER OR VARIANCE FOR THE PETITIONER



THE REASON WHY THE VARIANCE OR THE WAIVER REQUESTED WOULD SERVE THE PURPOSES OF THE UNDERLYING STATUTE;

IS THIS VARIANCE OR WAIVER REQUEST PERMANENT? _____

IS THIS VARIANCE OR WAIVER REQUEST TEMPORARY? _____

IF TEMPORARY, INCLUDE THE DATES INDICATING THE DURATON OF THE REQUESTED VARIANCE OR WAIVER _____

SIGNED _____ DATE _____

PLEASE RETURN THE COMPLETED FORM AND REQUIRED FEE TO PCLB, 8751 ULMERTON ROAD, SUITE 2000, LARGO FLORIDA 33771

PLEASE NOTE: A VARIANCE IS GRANTED TO ALL OR PART OF THE LITERAL REQUIREMENTS OF AN AGENCY RULE TO A PERSON WHO IS SUBJECT TO THE RULE. AN WAIVER IS A DECISION BY AN AGENCY NOT TO APPLY ALL OR PART OF A RULE TO A PERSON WHO IS SUBJECT TO THE RULE.

Your petition will be processed in accordance with applicable law. The process followed will depend on whether your petition seeks a variance/waiver from a Pinellas County regulation and you will continue to meet all state regulations or if you are seeking a variance/waiver from a state regulation.

For Office Use:

Required Fee of \$100 paid _____ Date _____ Check # _____

Received by _____