

Florida Department of Agriculture and Consumer Services Division of Consumer Services, Bureau of Standards

NOTICE OF NONCOMPLIANCE

Chapters 525, 526 Part I, 527 and 531, Florida Statutes Rule 5J-22.003, Florida Administrative Code

2005 Apalachee Parkway, Tallahassee, FL 32399-6500 Phone: (850) 921-1545 Fax: (850) 410-3801 Email: CSFAXME@FDACS.gov

| Facility # | | | | Inspection # | |
|----------------|---|--|---|------------------|--|
| Business Name: | | | | Inspection Date: | |
| Address: | 4 | | | Inspector: | |
| | | | | Mail to Address: | |
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FAILURE TO COMPLY WITH THIS CORRECTION NOTICE MAY RESULT IN ADMINISTRATIVE ACTIONS

FACILITY VIOLATIONS

(The violations below must be corrected and brought into compliance with department rules and requirements as stipulated in Rule Chapters 5J-20, 5J-21 and 5J-22, F.A.C.)

| Violation | Bus. Days to Correct | Comments | Date Corrected | Authorized Person |
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DEVICE VIOLATIONS

(The violations below must be corrected and brought into compliance with department rules and requirements as stipulated in Rule Chapters 5J-20, 5J-21 and 5J-22, F.A.C)

| Dispenser Location | Serial # | Prod | Violation | Bus. Days to Correct | Comments | Date Corrected | Authorized Person |
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Administrative Hearing Available. If you wish to contest the department's action, you have the right to request an administrative hearing to be conducted in accordance with Sections 120.569 and 120.57, Florida Statutes and to be represented by counsel or other qualified representative. Your request for hearing must contain your name, address, and telephone number, and facsimile number (if any). The name, address, telephone number and facsimile number of your attorney or qualified representative (if any) upon whom service of pleadings and other papers shall be made; a statement that you are requesting an administrative hearing and dispute the material facts alleged by the department, in which case you must identify the material facts that are in dispute (formal hearing), or that you request an administrative hearing and that you do not dispute the facts alleged by the department (informal hearing); and a statement of when (date) you received this notice and the file number on this notice. Your request for a hearing must be received at the address shown on this notice within twenty-one (21) days of receipt of this notice. If you fail to obtain a release from this notice or fail to request an administrative hearing within the twenty-one (21) day deadline you waive your right to a hearing and the department may enter a final order imposing up to the maximum penalties as authorized by Florida Law.

| Facility Rep. Signature | Date |
|-------------------------|-------|
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| Print Name | Title |