

APPLICATION FOR REVIEW

UPPER DAUPHIN COUNCIL OF GOVERNMENTS
UNIFORM CONSTRUCTION CODES
JOINT BOARD OF APPEALS

1. Applicant: Name _____
Address _____

Phone Number _____

2. Property Owner (if different from Applicant):
Name _____
Address _____
Phone Number _____

3. Building Permit Number at issue: _____

4. Address and municipality of building site at issue: _____

5. Reason for Appeal: _____ Code incorrectly interpreted.
_____ Request for approval of equivalent form of construction.
_____ Provisions of Code do not fully apply.
_____ Other (Explain) _____

6. Current use of property: _____

7. Name of Building Code and section numbers at issue: _____

8. Briefly state the purpose of this application and relief sought (use additional pages if needed):

9. Request for Hearing (check the space below if you want an in-person hearing):

_____ I request an in-person hearing before the Board of Appeals.

10. Attach a detailed diagram of the structural elements affected by this appeal. Indicate dimensions and location.

My/our signatures below certify that all of the above information and statements, as well as any other documents or information submitted with and made a part of this Application for Review, are true and correct to the best of my/our information, knowledge and belief. Authorization is hereby granted to the Board to enter the property for inspection purposes.

Applicant(s): _____
(Signature)

Date: _____

(Signature)

Date: _____

Property Owner(s) (if different from Applicant(s):

(Signature)

Date: _____

(Signature)

Date: _____

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