Date Received ________________
Permit Application # ____________
Property ID # _________________

UNIFORM CONSTRUCTION CODE BOARD OF APPEALS APPLICATION FORM

Applicant Name: ________________________ Relationship to Owner: ________________
Applicant Address: __________________________________________________________
Owner's Name: ________________________ Owner’s Phone Number: ________________
Owner's Address: __________________________________________________________

The Appeal(s) below pertain to the following use:
(Check one): Residential _____ Commercial____

This property has been the subject of a previous appeal: Yes_____ No____

Items of Appeal: (Complete Items 1 through 3 as applicable)

1. (A) Permit Number to which the appeal is applicable: _________________
   
   (B) Brief description of appeal item: ________________________________
   ________________________________________________________________
   ________________________________________________________________
   ________________________________________________________________

   (C) Applicable code sections (List applicable code and section numbers):
   ________________________________________________________________
   ________________________________________________________________
   ________________________________________________________________

   -Over-
(D) Describe the specific work you wish to perform, or have performed, that has been disallowed by the code official:

________________________________________________________________________
________________________________________________________________________
________________________________________________________________________

(E) Your reason for appeal is based upon:
- □ A belief the inspector's interpretation of the code is in error.
- □ Strict compliance with the code is impossible or unduly burdensome.
- □ A request for approval of a modification you are proposing that is equal to or better than the requirement of the code, but which has been denied by the code official.
- □ Other (Explain): ______________________________________________________
  ______________________________________________________________________
  ______________________________________________________________________

(F) The reason(s) you believe your appeal should be granted (Explain your reasoning as opposed to that of the denying inspector): ________________________________
  ______________________________________________________________________
  ______________________________________________________________________

PLEASE ATTACH COPIES OF YOUR SUPPORTING EVIDENCE OR DOCUMENTATION.

I hereby certify that all supporting documentation provided herewith is true and accurate.

Applicant Signature: ________________________ Date: ____________