



**Building Code Appeals Application
City of Warren
Uniform Construction Code
Joint Board of Appeals**

This form may be used to file an appeal, an extension of time, or request for variance.

Rev. 9/2021

Section 1 - Construction Site

Building Permit Number

Address

City

State

Zip

Section 2 – Applicant (Contact Person)

Name

Company

Address

City

State

Zip

Phone

Section 3 – Application for Appeal of Building Code Official Decision

BCO Name

Date of Decision

Please check which of the following form the basis of your appeal:

The true intent of the Pennsylvania Construction Code Act (PCCA or the UCC was incorrectly interpreted.

The provisions of the PCCA do not apply to this construction

An equivalent form of construction was proposed for use.

Please detail the grounds for appealing this decision, citing provisions of the PCCA or the UCC, or explaining how your proposed construction would be equivalent to that specified in the UCC.

If additional space is required, please attach additional 8 1/2 x 11 pages.

Section 4 - Application for Extension of Time Request

Compliance date requested for time extension

Please detail the reasons for this request. If additional space is required, please attach additional 8 1/2 x 11 pages.

Section 5 - Request for Variance(s)

Please provide all of the following information for each variance requested: Failure to provide sufficient information will result in the return of your variance request(s) and delay the Board's consideration of your request(s).

1. Specify the particular code and the section(s) of the code, or any referenced standard mentioned in the specified section(s).
2. Indicate on your plans what portion of the building will be affected by the variance request.
3. Detail what your alternative approach entails and any compensatory measures.
4. State the reasons for the requested variance, including why the strict letter of the code is impractical, how the variance would satisfy the code's interest, and why the modification would not impair the health, life and fire safety or structural requirements in the listed code section(s)

If additional space is required, please attach additional 8 1/2 x 11 pages.

Section 6

Are you requesting a hearing with the Joint Board of Appeals? Yes No

As allowed by Pennsylvania Law, I, the undersigned, file the application with the City of Warren Building Code Joint Board of Appeals. I hereby swear or affirm that I have read, understand and will comply with the following:

1. I have enclosed eight (8) copies of all documentation in addition to the original application.
2. I have also enclosed a non-refundable filing fee which is payable to the City of Warren for costs associated with the hearing.
3. I authorize the City of Warren Building Code Joint Board of Appeals, Building Code Official and other City Officials to view and inspect the property which is the subject of this Application at any time during the pendency of said Application and the construction related thereto.
4. I acknowledge that I will be notified of date, time and location of such hearing. My attendance is mandatory to present relevant testimony.

Signature of Petitioner/Applicant

Date

Signature of Property Owner

Date

Section 7

Please use one sheet per code appeal

Certification Page

I hereby attest the attached information is true
and accurate for the property located at
in (Name of Municipality).

N O T A R Y	Subscribed and sworn before me this		
	<input type="text"/>	day of	<input type="text"/> <input type="text"/>
	<input type="text"/>		
	Signature of Notary Public		
	My Commissions Expires:	<input type="text"/>	

I hereby authorize the City of Warren Uniform Construction Code Joint Board of Appeals and other
 City Officials to view and inspect the property which is
the subject of this Application at any time during the pendency of said Application and the
construction related thereto.

Signature of Applicant

Signature of Property Owner

Section 8

Witness Registration Page

Witness Name

Company

Phone

Relationship to Applicant (Check One)

- Architect Engineer Contractor Lawyer Other

Witness Name

Company

Phone

Relationship to Applicant (Check One)

- Architect Engineer Contractor Lawyer Other

Witness Name

Company

Phone

Relationship to Applicant (Check One)

- Architect Engineer Contractor Lawyer Other

Witness Name

Company

Phone

Relationship to Applicant (Check One)

- Architect Engineer Contractor Lawyer Other

Office Use Only	
Date Received <input type="text"/>	Received By <input type="text"/>
Date of Hearing <input type="text"/>	Date of Publication <input type="text"/>
Date Sent to Appeals Board <input type="text"/>	Appeal No. <input type="text"/>