



**1. Owner's Information:**

Name: \_\_\_\_\_ Address: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_  
Phone: \_\_\_\_\_ Email: \_\_\_\_\_

**2. Duly Authorized Agent:**

Name: \_\_\_\_\_ Address: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_  
Phone: \_\_\_\_\_ Email: \_\_\_\_\_

**3. Location:**

Job Address: \_\_\_\_\_  
Zoning District: \_\_\_\_\_  
Tax ID: \_\_\_\_\_

**4. Appeals:**

Have there been previous appeals involving this property? \_\_\_\_\_  
If yes, provide case number and detailed information: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**5. Appeal Outline:**

List a brief outline of your appeal request. Please **reference sections of the Building Code** from which relief is sought and outline the proposals that are contrary to the Building Code and the Department's decision.

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*All supporting data and documents must be attached to the application, including required plans. Upon submittal, if all required items are not provided, the application will not be accepted.*

**Submission of a \$350.00 Appeal Fee is required at the time of a submitted application.**

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Applicant's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

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Agent's Signature: (if applicable) \_\_\_\_\_ Date: \_\_\_\_\_

*Do not write below this line, for use by the Building Code Appeals Board:*

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Hearing Date: \_\_\_\_\_

Disposition or Action by Building Code Appeals Board:

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