ADAMS TOWNSHIP

Building Code Board of Appeal Application

Date:_____

Applicant's Name:_____

Address:_____

Phone:_____Cell_____

The property/structure involved:

Address or other identification:_____

Property Owner:_____

Address:_____

Property Owner's Phone Number:_____Cell:_____

The action appeal form:
On_____, the Building Official/Fire Official, made the following determination and/or_____
_____ imposed following determination and/or the following requirement:_____
_____

_____

Applicant's petition:

The Appeals Board should grant the following relief: _____

_____

_____

Applicant's Arguments:
The Appeals Board should grant the relief requested for the following reasons:_____

_____

_____

The Board of Appeals shall only consider the following factors when deciding an appeal under section 501 (c) (2) of the act:

1. The true intent of the act or Uniform Construction Code was incorrectly interpreted.
2. The provisions of the act do not apply.
3. An equivalent form of construction is to be used.

_____

Signature of Applicant Print Name Date

Application Fee: $300.00