APPLICATION FOR A VARIATION

This form shall be used for any request for relief from any Construction Code regulation.

Please bring this completed form to the Washington Township Building Department
APPLICATION FOR A VARIATION

IDENTIFICATION

Block ____________ Lot ____________

Work Site Location ______________________________ Contractor ____________________________

Owner in Fee ________________________________ Address ____________________________

Address ________________________________ Telephone # (    ) ____________________________

Telephone # (    ) ____________________________ Lic. No. ____________________________

Federal Emp. No. ____________________________ or Social Security No. ____________________________

Fee $___________ (Determined by Enforcing Agency)

APPLICANT STATEMENT

Please state the requirements of the subcode from which a variation is sought. (Use separate application forms for each variation request):

How would compliance with said provisions result in practical difficulties? Explain the nature and extent of these difficulties:

Please state an alternative to the subcode requirement that will still protect the health, safety and welfare of the occupants:

Date ____________________ Signed ____________________________________________________

Applicant

DETERMINATION

This application is to be reviewed within 20 business days.

After reviewing the facts, we[ ] DENY [ ] GRANT the above variation request, in accordance with N.J.A.C. 5:23-2.9 through 2.13, for the following reasons:

Date _________________ __________________________ __________________________

Building Subcode Official Plumbing Subcode Official

Elevator Subcode Official Electrical Subcode Official Fire Subcode Official

Construction Official