

BOROUGH OF WHITEHALL
Application for Building Code Appeals

File Date: _____
Hearing Date: _____

Submit 15 copies of application and all supporting documents.
The original must be notarized.

Attach the following and indicate with "x":

- () Survey, site plan and construction plans of property in question showing relevant information.
- () Copy of decision of Code Official being appealed.
- () Statement of argument or justification for appeal based on a claim of one of the following:
 1. The true intention of the Building Code or Fire Prevention Code or the rules legally adopted thereunder have been incorrectly interpreted.
 2. The provisions of the Building Code or Fire Prevention Code do not fully apply.
 3. An equally good or better form of construction will be used.
 4. In this specific case and conditions undue hardship would result.
- () Application fee (Residential \$50/Commercial \$100). Make check or money order payable to the Borough of Whitehall

All Applicants MUST complete this Section in its entirety:

PROPERTY INFORMATION:

Street address of property _____ Zip code: _____
Plan name _____ Lot No. _____
Block/Lot(s) _____ Zoning District(s) _____
Landowner's Name _____ Phone _____
Mailing Address _____
Property Description (Size, # of structures, etc.) _____
Current Use _____ Existing Structure Type _____
Proposed Use _____ Proposed Structure Type _____

APPLICANT INFORMATION:

Applicant's Name _____ Phone _____
Mailing Address _____
Occupation _____ Representative of _____

PROJECT INFORMATION:

Scope of Project (Brief Description)_____

List Design Professionals used for each of the following:

Soils Engineer_____

Structural Engineer_____

Mechanical Engineers_____

Fire Protection Systems Engineers_____

Nature of appeal: Cite the decision of the Code Official or Fire Marshall refusing to grant a modification to the provisions of the Building Code or Fire Prevention Code being appealed, with Building Code or Fire Prevention Code references, and a brief statement of argument or justification for the appeal:

RECORD OF HEARING

- () I request a stenographic record of the hearing and agree to pay the appearance fee charged by the Court Reporter.
- () I request that the record be made by electronic recording at all Council meetings as currently used, in which case there is no court reporter appearance fee.

SWORN STATEMENT OF TRUTH

To be completed by all Applicant. This form MUST be notarized.

Applicant, being duly sworn, says he/she is:

- () the owner of the property in question.
- () the authorized agent for the owner of record of the property for which the application is made. The owner's signed and notarized authorization to his/her agent to act on owner's behalf is required to be submitted.
- () other, please specify _____

All information provided on and with this application is true and correct to the best of my knowledge or belief.

INDIVIDUAL APPLICANT:

Signature of Individual

PARTNERSHIP APPLICANT:

Name of Partnership

By:

Signature

Partner

CORPORATE APPLICANT:

Name of Corporation

By:

Signature

Title

AFFIDAVIT OF VERIFICATION

COMMONWEALTH OF PENNSYLVANIA)
) SS:
COUNTY OF ALLEGHENY)

On this _____ day of _____, 19____, before me, the undersigned officer, personally appeared _____, known to be or satisfactorily proven to be:

- the individual whose name is subscribed to the within instrument;
- a partner of _____, a Pennsylvania General/Limited Partnership; or
- the _____ of _____, a corporation,

and acknowledged that

- he/she
- he/she as such _____ partner
- he/she as such _____ by signing the name of the corporation as himself/herself

executed the foregoing instrument for the purposes therein contained.

IN WITNESS WHEREOF, I hereunto set by hand and official seal.

Notary Public