



# APPLICATION FOR A VARIATION

Date Received \_\_\_\_\_ Control # \_\_\_\_\_  
Date Issued \_\_\_\_\_ Permit # \_\_\_\_\_  
Date Revised \_\_\_\_\_ Date Permit Issued \_\_\_\_\_

IDENTIFICATION Block \_\_\_\_\_ Lot \_\_\_\_\_  
Work Site Location \_\_\_\_\_ Contractor \_\_\_\_\_  
Address \_\_\_\_\_  
Owner in Fee \_\_\_\_\_  
Address \_\_\_\_\_ Tele. (\_\_\_\_\_) \_\_\_\_\_  
Lic. No. \_\_\_\_\_  
Tele. (\_\_\_\_\_) \_\_\_\_\_ 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 \_\_\_\_\_