

File #: \_\_\_\_\_

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

**P1**

Uniform Construction Code (UCC)  
**ACCESSIBILITY ADVISORY BOARD PETITION**

This form may be used to file an appeal, seek a variance or an extension of time. When variances are requested, as many variances as may be needed may be sought via this petition. Once this petition has been submitted, no changes may be made, and any additional variance requests must be filed via a separate (new) petition.

Please **type** or **print legibly** all requested information.

<b>Construction Site</b>	Building or Structure Name _____ Tenant Name _____ Street No. & Name _____ City _____ Zip Code _____ Township, Borough or City Name _____ County _____
<b>Applicant (Contact Person)</b>	Contact Person _____ Company Name _____ Street No. & Name _____ City _____ State _____ Zip Code _____ Telephone No. _____ FAX No. _____ E-mail _____
<b>Filing Requirements</b>	<ul style="list-style-type: none"> <li>Completed application and any additional information sheets.</li> <li>Fee of \$100.00 per petition form (may contain multiple variance requests). Make check or money order payable to "Commonwealth of Pennsylvania."</li> <li>Two sets of drawings, including floor plans (if applicable) drawn to a minimum scale of 1/8 inch = 1ft. and on minimum paper size of 15 in. x 24 in.</li> </ul> <p><b>Mail to:</b> Accessibility Advisory Board, Department of Labor &amp; Industry, 651 Boas Street, Room 1600, Harrisburg, PA 17121</p> <p><b>Direct questions to:</b> (717) 787-3329</p> <p><b>NOTE:</b> IF ADDITIONAL REQUESTS ARE NEEDED AFTER THIS PETITION FORM IS FILED, YOU MUST SUBMIT THESE REQUESTS ON A SEPARATE PETITION FORM, ALONG WITH AN ADDITIONAL \$100.00 PETITION FEE.</p>
<b>Part One: Extension of Time Request</b>	<p style="text-align: right;">Labor &amp; Industry Order No. _____</p> <p style="text-align: right;">Date Requested to Comply with Labor &amp; Industry Order _____</p> <p>Please detail the reasons for the extension and indicate whether, if granted, this will subject building occupants to conditions that do not comply with the UCC. If additional space is required, please attach additional 8½" x 11" pages.</p>
<b>FOR L&amp;I USE ONLY</b>	Check Number: _____ Amount: _____ Bates Number: _____

Part Two:

**Appeal of Building Code Official (BCO) Decision**

BCO Name \_\_\_\_\_ Date of Decision \_\_\_\_\_

Please check which of the following form the basis for your appeal:

The true intent of the Pennsylvania Construction Code Act (PCCA) or the UCC was incorrectly interpreted.

The provisions of the PCCA do not apply to this construction.

An equivalent form of construction was proposed for use.

Please detail the grounds for appealing this decision, citing provisions of the PCCA or the UCC, or explaining how your proposed construction would be equivalent to that specified in the UCC. If additional space is required, please attach additional 8½" x 11" pages. (Include building name on each page.)

Part Three:

**Request For Variance(s)**

Accessibility Inspector/Plans Examiner who required variances (print name):	UCC	
_____	Certification No.:	Telephone Number:
_____	_____	_____

Construction involves:

<input type="checkbox"/> New Building	<input type="checkbox"/> Existing Building
<input type="checkbox"/> Chap. 34 of Int. Building Code	<input type="checkbox"/> Int. Existing Building Code
<input type="checkbox"/> 2003	<input type="checkbox"/> 2006

**If "Existing Building," check the requirements it will meet:**

Code series: \_\_\_\_\_

**Please provide all of the following information for each variance requested: (Failure to provide sufficient information will result in the return of your variance request(s) and delay the Board's consideration of your request(s).)**

- Specify the **particular code** and the **section(s) of the code**, or any referenced standard mentioned in the specified section(s).
- Indicate on your plans what portions of the building will be affected by the variance request.
- Detail what your alternative approach entails and any measures that will provide an equivalent degree of compliance with the intent of the UCC.
- State the reasons for the requested variance, including why the strict letter of the code is impractical and why the modification would not lessen accessibility, health, life and fire safety or structural requirements in the listed code section(s).

If additional space is required, please attach additional 8½" x 11" pages.