



MUNICIPALITY \_\_\_\_\_

**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