Development Services Department
Building Safety Division
Board of Appeals

APPLICATION TO APPEAR

Date	
Name	
Address	
City State Zip	
Phone No.	
Project Address	

√	Type of Appeal	Section Number	Type of Code
	The Building Official's **application** of		
	The Building Official's **interpretation** of		

My position on this issue is as follows: *(attach additional sheets if necessary)*
Signature: _____ **Date:** _____

For Agency Use Only		
Received by:	**Date:**	**Scheduled for:**