

File No.: _____

Date: _____

GENERAL SAFETY LAW INDUSTRIAL BOARD PETITION

This form may be used to seek a variance or an extension of time.

Type or print legibly all requested information. If additional space is required, attach a separate 8-1/2"x11" sheet.

EXPEDITED REVIEW. ADDITIONAL FEE SUBMITTED.

Petitioner	<p>Contact person _____</p> <p>Company name _____</p> <p>Street address _____</p> <p>City _____ State _____ ZIP code _____</p> <p>Phone _____ Fax no. _____</p> <p>Email address _____</p>
Site Information	<p style="text-align: right;">Labor & Industry File No. _____</p> <p>Building or structure name _____</p> <p>Street address _____</p> <p>City _____ State _____ ZIP code _____</p> <p>Township, borough or city name _____ County _____</p>
Request for Variance(s)	<p>Provide <u>all</u> of the following information <u>for each variance requested</u>:</p> <ul style="list-style-type: none"> Specify the particular section of the General Safety Law and any applicable code section(s) relating to general safety requirements. Indicate on your plans what portions of the building or structure will be affected by the variance request. Detail what your alternative approach entails and any compensatory measures. State the reasons for the requested variance, including why the strict letter of regulation is impractical, and why the modification would not lessen health, life and safety requirements in the listed code section(s).
Extension of Time Request	<p style="text-align: right;">Labor & Industry order # _____</p> <p style="text-align: center;">Specify length of extension or completion date _____</p> <p>Detail the reason for this request:</p>
IND. BD USE ONLY	<p>Date received: _____ Check #: _____ Bates #: _____</p>

Filing Requirements	<p>Submission requirements shall be as follows:</p> <ol style="list-style-type: none"> 1. One copy of the completed General Safety Law Industrial Board Petition (LIIB-114) and any additional information sheets. When variances are requested, as many variances as needed may be sought via this petition. 2. One set of drawings, including floor plans. 3. Check or money order made payable to "Commonwealth of Pennsylvania." All fees paid to the Industrial Board must be separate from any fees paid to the Bureau of Occupational and Industrial Safety's Buildings Division. <p>Fee Schedule: Variance/Extension of Time Request.....\$336.65 (per building) Expedited Review of Petition.....Additional \$1048.74 (per building)</p> <p>Contact the Industrial Board at 717-787-6114 or RA-LIINDUSTRIALBOARD@pa.gov for questions or concerns.</p> <p>Mail the complete submission package to:</p> <p style="text-align: center;">Department of Labor & Industry Industrial Board 651 Boas Street, Room 1622 Harrisburg, PA 17121-0750</p>
Petitioner Signature	<p style="text-align: center;">_____</p> <p style="text-align: center;">Petitioner signature</p> <p style="text-align: right;">_____</p> <p style="text-align: right;">Telephone number</p>

*Auxiliary aids and services are available upon request to individuals with disabilities.
Equal Opportunity Employer/Program*