



P.O. Box 1, Pocopson PA 19366  
Office: 610.793.2151 Fax: 610.793.1944  
[www.pocopson.org](http://www.pocopson.org)

# POCOPSON TOWNSHIP

## Instruction Sheet for Appeal Application

### Building Code Board of Appeals

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All Building and Uniform Construction Code appeals for Pocopson Township must be submitted to the Township with the attached forms completed. Forms improperly completed will be returned to the Applicant.

**Complete the attached forms as follows:**

1. Complete the Applicant, Property Owner and Property Location Information.
2. Select format of appeal:
  - a. Documentary: An appeal pursuant to 34 Pa. Code § 403.122(d) where the Board of Appeals decides an appeal or request based on the application and documents submitted to the Board. This format does not provide for oral testimony by the Applicant or the Applicant's witnesses. A meeting will be schedule during which the Board of Appeals will deliberate as necessary and render a decision.
  - b. Hearing: An appeal pursuant to 34 Pa. Code § 403.122(c) where the Board of Appeals decides an appeal or request based on the application, other documents submitted to the Board, and testimony from witnesses and/or counsel for the Applicant and other interested parties. All people who present information will be testifying under oath during the proceedings. A stenographer will be present at the Hearing.
3. Identify the appropriate Township Code, ICC Code, or other applicable regulations from which the appeal is requested. Attach a copy of the code section for which relief is requested.
4. Select basis for appeal. The Pennsylvania Construction Code Act contains justifications for appeals. These provisions for appeal are:
  - a. The true intent of the Act or Code was incorrectly interpreted.
  - b. The provisions of the Act do not apply.
  - c. An equivalent form of construction is to be used.
  - d. Request for variance.
  - e. Request for extension of time.



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5. Provide a written description of the Property, the proposed improvements to the Property and the Relief Requested.
6. Identify and attach supporting documentation. Provide seven (7) copies of all documentation provided.
7. Identify attorney who may represent the Applicant in the appeal.
8. Complete Certification Page with Notary signature and seal.
9. The Township Board of Appeals doesn't hear appeals, request for variances or extensions related to accessibility. Such appeals should be directed to the Commonwealth's Accessibility Advisory Board.



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**APPLICANT:**

Name: \_\_\_\_\_  
Company: \_\_\_\_\_  
Address: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_  
Phone: \_\_\_\_\_ Mobile Phone: \_\_\_\_\_  
Email: \_\_\_\_\_  
Relationship to Property Owner: \_\_\_\_\_

**PROPERTY OWNER:**

Name: \_\_\_\_\_  
Company: \_\_\_\_\_  
Address: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_  
Phone: \_\_\_\_\_ Mobile Phone: \_\_\_\_\_  
Email: \_\_\_\_\_

**PROPERTY IDENTIFICATION:**

Street Address: \_\_\_\_\_  
Parcel Number: \_\_\_\_\_

**APPEAL METHOD:**

- Documentary pursuant to 34 Pa. Code § 403.122(d)
- Documentary pursuant to 34 Pa. Code § 403.122(c)

----- Office Use Only -----  
Date submitted: ----- Control number: -----  
Received by: ----- Permit number: -----  
Fee: -----



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If this is an appeal from a decision of the Code Official seeking relief from the terms of the Act, Regulations and/or Code, state the specific sections of the Act, Regulations and/or Code as to which the relief is being sought:

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If this is a request for a variance from the terms of the Act, Regulations and/or Code, state the specific sections of the Act, Regulations and/or Code as to which the relief is being sought:

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If this is a request for an extension of time under the Act, Regulations and/or Code, for compliance with the terms of the Act, Regulations and/or Code or from enforcement of the terms of the Act, Regulations and/or Code, state the specific sections of the Act, Regulations and/or Code as to which the relief is being sought:

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Basis for Appeal:

- The true intent of the Act or Code was incorrectly interpreted.
- The provisions of the Act or Code do not apply.
- An equivalent form of construction is to be used.
- Request for variance (modification).
- Request for extension of time.

Description of Existing Improvements on the Property:

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Description of Proposed Improvements on the Property:

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Description of Relief Requested (*use separate sheet if necessary*):

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Identification of attached supporting documentation:

- Plot Plan
- Building Plan
- Permits
- Photographs
- Written Brief or Argument

The following attorney shall represent the Applicant in this appeal:

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Phone: \_\_\_\_\_ Mobile Phone: \_\_\_\_\_

Fax: \_\_\_\_\_ Email: \_\_\_\_\_

\_\_\_\_\_  
Signature of Applicant

\_\_\_\_\_  
Date

Print Name: \_\_\_\_\_

Print Title: \_\_\_\_\_



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CERTIFICATION PAGE

I, \_\_\_\_\_ hereby attest the attached information is true and accurate for the property located at \_\_\_\_\_

\_\_\_\_\_ In Pocopson Township.

\_\_\_\_\_  
Signature of Applicant

\_\_\_\_\_  
Print Name and Title

SWORN AND SUBSCRIBED before me  
this \_\_\_\_\_ day of \_\_\_\_\_, 20 \_\_\_\_\_

\_\_\_\_\_  
Notary Public

\_\_\_\_\_  
My Commission Expires

I hereby authorize the Pocopson Township Board of Supervisors, Pocopson Township Building Code Board of Appeals and other Township Officials to view and inspect the property which is the subject of this Application at any time during the pendency of said Application and the construction related thereto.

\_\_\_\_\_  
Signature of Applicants

\_\_\_\_\_  
Print Name and Title