



## Metropolitan Area Building & Construction Department

271 W. 3rd St. N., Suite 101 - Wichita, KS 67202 - www.sedgwickcounty.org - TEL: 316-660-1840 - FAX: 316-660-1810

## Application for Variance Review

Use this page to email: kortney.capello@sedgwick.gov or paul.hays@sedgwick.gov Please provide all neccessary plans or pictures needed for the review process.

1. Facility Information	2. Preferred Meeting Time/Date and Other
Facility (Building) Name:	
Address:	PLR Number:
City:	Assigned Reviewer:
Jnincorporated:	Freieneu Tillie/Date.
minorporatou.	Other:
. Owner Information	4. Designer/Company Information
Contact Person:	Contact Person:
Company Name:	Firm/Company:
Address:	Address:
City, State, Zip Code:	City, State, Zip Code
mail Address:	Email Address:
Phone #	Phone #:
ectrical Code Elevator Code Accessibility Code	Residential Building Code Mechanical Code Plumbing Code e Private Sewage System Other:  ific condition or issue you are requesting be covered under this petition for variance.
Reason why compliance with the code cannot be attai	ined without the variance (Attach additional sheets, if necessary)

9. List attachments to be considered as part of the petitioner's statements (i.e., model code sections, test reports, research articles, expert opinion,

previously approved variances, pictures, plans, sketches, etc.).