

Petition for a Permanent Variance or Alternative Compliance Agreement

Is this application the result of receiving a PESH Notice of Violation?

If yes , this is a request for an **Alternative Compliance Agreement**

If no , this is a request for a **Permanent Variance**

1. Name and address of petitioner:

Telephone no.

2. Name and address of petitioner's agent, if any:

Telephone no.

3. Name and address of owner of premises:

4. Name of occupant of premises:

The petitioner requests the Commissioner of Labor issue a variance from the requirements of the standards, regulations or sections of the Public Employee Safety and Health Act and/or orders of the Commissioner requiring compliance with the standards, regulations or sections of the Act as follows:

5. Standards, regulations, or sections of the act:

6. Date orders issued, if any:

7. Orders issued by: _____
Inspector/Hygienist ID

8. Affecting premises known as:

9. Street address of premises:

10. These premises are situated on:

North East South West

Side of _____ Street Avenue Road

In the City Town Village of _____, County of _____

A. Description of Premises

11. Date building was constructed _____

12. No. Stories: Front _____ Rear _____

13. Construction of building is Wood
 Non-fireproof (Masonry walls, wood floors and roof)
 Fireproof (Masonry walls, concrete floors and roof)

14. Size of building: At street level
Feet front _____ Feet deep _____

15. Size of building: At typical floor level
Feet front _____ Feet deep _____

16. Use of each floor and maximum number of persons on each floor are as follows:

Floor	Equipped with Automatic Sprinklers		Use	Occupancy			
	Yes	No		Present		Proposed	
				Men	Women	Men	Women
Cellar							
1							
2							
3							
4							
5							

17. Give the item number, abatement date, and standard or its portion from which the employer seeks an Alternative Compliance Agreement. **Attach a copy of the page(s) of the Notice of Violation and Order to Comply which pertain to the variance request.**

18. Write a detailed statement of the reasons the employer cannot comply with the standards. Include an estimate of the cost to comply with the standard.

19. List all steps the employer has taken and will take to protect employees against the hazard covered by the standard. Include a statement showing how the steps taken will provide employment and places of employment to the employees which are as safe and healthful as those which would exist if the standard was complied with.
20. Certification by the employer that employees have been notified of both the employer's variance application and their right to request a hearing. **Attach a copy of notification letter or posting notice, etc.**
21. Submit the name(s), title(s), address(es), and union affiliation(s) of the local employee representative(s) notified.
22. Submit the name(s), title(s), address(es), and union affiliation(s) of the statewide employee representative(s) notified.

23. Name and title of petitioner or agent _____

Signature _____ Date _____

Return THREE copies of this application to the address shown on front
(Use additional 8 ½ x 11 sheets, if necessary)