



## PETITION FOR A VARIANCE OR OTHER RELIEF

(Not Applicable for Public Employers)

1. Name and Address of Petitioner:

\_\_\_\_\_

2. Petitioner's Telephone Number: \_\_\_\_\_

3. Petitioner's Federal Employer Identification Number (FEIN): \_\_\_\_\_

4. Affecting Premises Known as: \_\_\_\_\_

5. Street Address of such Premises: \_\_\_\_\_

6. These premises are situated on

North     East     South     West side of (street/avenue/road) \_\_\_\_\_

City     Town     Village of \_\_\_\_\_ County of \_\_\_\_\_

7. Name and Address of all Designated Employee Representatives (Enter "None" if no employee organization)

\_\_\_\_\_

THE PETITIONER HEREBY PETITIONS THE COMMISSIONER OF LABOR FOR A VARIANCE (OR OTHER RELIEF) FROM THE REQUIREMENTS OF THE LABOR LAW, ORDERS OF THE COMMISSION OF LABOR REQUIRING COMPLIANCE WITH THE STATE BUILDING CONSTRUCTION CODE, THE NEW YORK STATE UNIFORM FIRE PREVENTION AND BUILDING CODE, AND/OR THE RULES OF THE COMMISSIONER OF LABOR AS STATED BELOW.

### A. CITATION

LIST THE APPLICABLE SECTION AND PARAGRAPH OF THE RELEVANT LAW, CODE, OR REGULATION(S) FOR WHICH A VARIANCE IS BEING REQUESTED.

8. Labor Law: \_\_\_\_\_ 10. State Building Construction Code \_\_\_\_\_

11. Uniform Fire Prevention Code \_\_\_\_\_ 12. Industrial Code Rule Number \_\_\_\_\_

13. Order Issued:  No  Yes If Yes, enter date issued: \_\_\_\_\_

14. Issued By:  State Inspector  Local Inspector

15. Issued To:  Owner  Agent  Lessee

Enter name appearing on Notice of Violation: \_\_\_\_\_

16. Quote the text of the orders as given on the notice of violation and order to comply, if applicable.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

17. If a variance has been granted previously covering the same section and paragraph as specified above in items 5-8. List the case number and date such variance was granted.

\_\_\_\_\_

**B. Description of Premises**

(To be filled out only when pertinent to the petition)

18. Date building was constructed: \_\_\_\_\_ 19. Number Stories: Front: \_\_\_\_\_ Rear: \_\_\_\_\_

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

20. Size of lot (at street level): Feet front \_\_\_\_\_ Feet deep \_\_\_\_\_

21. Size of building (at street level): Feet front \_\_\_\_\_ Feet deep \_\_\_\_\_

22. Size of building (at typical floor level): Feet front \_\_\_\_\_ Feet deep \_\_\_\_\_

23. 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							

**C. Reason For Request For Variance**

24. State the grounds for a variance (or other relief) setting forth difficulties and/or hardships involved in complying with the requirements stated above.

**Failure to complete this section may result in dismissal or denial of this petition.**

\_\_\_\_\_

\_\_\_\_\_

**D. Proposal**

25. State the proposal, if any, for securing safety or protecting health without literal compliance with such requirements.

\_\_\_\_\_

\_\_\_\_\_

26. I affirm that a copy of this Petition

Has been sent or  will be sent within 3 days of sending this Petition to the Commissioner of Labor, to all designated employee representatives by certified mail, return receipt requested.

AND

has been posted or  will be posted within one week of sending this Petition to the Commissioner of Labor at the site affected by the variance in an easily accessible location.

I certify that the information contained in this Petition is true and accurate

\_\_\_\_\_  
 Signature of Petitioner or Petitioner's Agent

\_\_\_\_\_  
 Date

**Return THREE copies of this application and the \$350.00 fee (certified check or money order made payable to the Commissioner of Labor) to the address shown on front**

(Use additional 8 1/2 x 11 sheets, if necessary)