Electrical Petition for Variance

Dashboard | eSLA | Salesforce - Unlimited Edition | DSPS Home | Service Request: SR-19-21690 ~

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eSLA

DASHBOARD PUBLIC LOOKUP 1 TESTER, TERESA

Welcome to your eSLA Dashboard

Click on “NEW APPLICATION”

Plan Review | Permit

+ NEW APPLICATION | MY HISTORY

Are you trying to add a business or renew a cross connection control assembly? Click here to add a business or renew your assembly.

Your Plan Reviews

To renew, edit, or update your Plan Review, please click on the Options button. Applications for a Plan Review are also shown on the bottom of the dashboard page.

SORT BY

	PROJECT NAME	STATUS	EXP DATE	REVIEW DATE	
Electrical Petition for variance EL-121900011-PV	Mulder Farms	Conditionally Approved			OPTIONS
Plan Review only EL-121900018-PRO	Joe	Approved			OPTIONS
Plan Review only EL-121900017-PRO	Fern School	Approved			OPTIONS

12:45 PM 1/2/2020

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Click on the drop-down menu and click on “Permits”

eSLA

DASHBOARD | PUBLIC LOOKUP | 1 | TESTER, TERESA

Application Selection

Select the Area. Next, based on the area, select either the Program Area, Permit/Plan Review, and Application Type or the Application Type, Credential and Credential Type as applicable.

To add an account, select the account name from the drop down. If you do not see an account, please add the business via the Manage Business page.

Select Area

- Permits
- Plan Reviews
- Products
- Fire Department / Municipality (2% Dues)
- Credentials
- Manufactured Homes
- Delegated Municipality

Application Instructions

Provide the information necessary for the application. Once finished, click which type of Save option desired.

CANCEL | SAVE AND CONTINUE

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12:47 PM
1/2/2020

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Click on the drop-down menu for Program Area and select “Electrical”.

eSLA

DASHBOARD | PUBLIC LOOKUP | 1 | TESTER, TERESA

Application Selection

Select the Area. Next, based on the area, select either the Program Area, Permit/Plan Review, and Application Type or the Application Type, Credential and Credential Type as applicable.

To add an account, select the account name from the drop down. If you do not see an account, please add the business via the Manage Business page.

Select Area

Permits

Select Program Area

Electrical

--None--
Amusement Rides
Amusement Rides PTO
Boiler & Unfired Pressure Vessels
for Variance
Electrical
Manufactured Homes Communities
Mechanical Refrigeration
Mechanical Refrigeration Systems Petition for Variance
Plumbing
Plumbing PTO
POWTS
Public Sector Employee Safety
Public Swimming Pools
Ski Lifts & Tows

Application Instructions

Provide the information necessary for the application. Once finished, click which type of Save option desired.

CANCEL | SAVE AND CONTINUE

SUPPORT | CONTACT | PRIVACY NOTICE | WWW.WISCONSIN.GOV

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Apps | Bookmarks | Suggested Sites | Google

Click on Select Permit Type dropdown menu and click on “Electrical Petition for variance”

eSLA

BLIC LOOKUP | 1 | TESTER, TERESA

Application Selection

Select the Area. Next, based on the area, select either the Program Area, Permit/Plan Review, and Application Type or the Application Type, Credential and Credential Type as applicable.

To add an account, select the account name from the drop down. If you do not see an account, please add the business via the Manage Business page.

Select Area

Permits

Select Program Area

Electrical

Select Permit Type/Plan Review

--None--

- Electrical Petition for variance
- Miscellaneous Inspection
- Permit and Plan Review only
- Permit only
- Plan Review only
- Training Request

Application Instructions

Provide the information necessary for the application. Once finished, click which type of Save option desired.

CANCEL | SAVE AND CONTINUE

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eSLA

DASHBOARD | PUBLIC LOOKUP | 1 | TESTER, TERESA

For Application type select "Plan Review"

Application Selection

Select the Area. Next, based on the area, select either the Program Area, Permit/Plan Review, and Application Type or the Application Type, Credential and Credential Type as applicable.

To add an account, select the account name from the drop down. If you do not see an account, please add the business via the Manage Business page.

Select Area

Permits

Select Program Area

Electrical

Select Permit Type/Plan Review

Permit only

Select Application Type

Plan Review

Plan Review

Application Instructions

Provide the information necessary for the application. Once finished, click which type of Save option desired.

In instances where exact compliance with a particular code requirement cannot be met or alternative designs are desired, the division has a petition for variance process in which it reviews and considers acceptance of alternatives which are not in strict conformance with the letter of the code, but which meet the intent of the code. A variance is not a waiver from a code requirement.

The petitioner must provide an equivalency which meets the intent of the code section petitioned to obtain a variance. Documentation of the rationale for the equivalency is required. Failure to provide adequate information may delay a decision on the petition. Pictures, sketches, and plans may be submitted to support equivalency.

A position statement from the chief of the local fire department is required for fire or life-safety issues.

No fire department position statement is required for topics such as plumbing, private onsite sewage systems, or energy conservation.

1:07 PM
1/2/2020

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Apps | Bookmarks | Suggested Sites | Google

Read the instructions then click on “SAVE AND CONTINUE”

Application Instructions

Provide the information necessary for the application. Once finished, click which type of Save option desired.

In instances where exact compliance with a particular code requirement cannot be met or alternative designs are desired, the division has a petition for variance process in which it reviews and considers acceptance of alternatives which are not in strict conformance with the letter of the code, but which meet the intent of the code. A variance is not a waiver from a code requirement.

The petitioner must provide an equivalency which meets the intent of the code section petitioned to obtain a variance. Documentation of the rationale for the equivalency is required. Failure to provide adequate information may delay a decision on the petition. Pictures, sketches, and plans may be submitted to support equivalency.

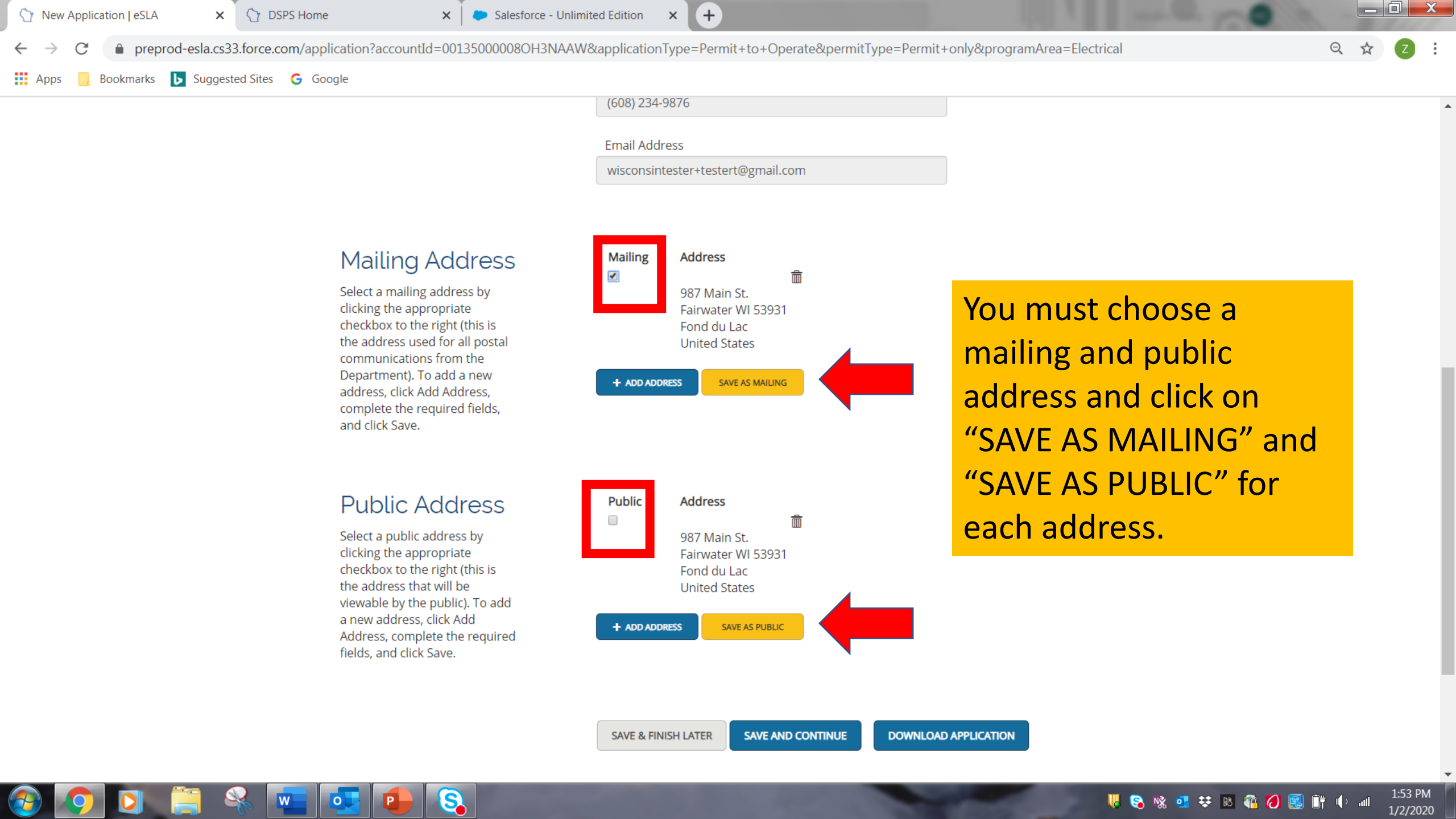
A position statement from the chief of the local fire department is required for fire or life-safety issues.

No fire department position statement is required for topics such as plumbing, private onsite sewage systems, or energy conservation.

Submit a municipal building inspection department position for SPS 316 electrical petitions, or if SPS 361-366 commercial building plan review is by the municipality or orders are written on the building under construction. (Submit a copy of the orders.) For rules relating to one- and two-family dwellings, a position statement is required only if the local municipality is the enforcing body. A position statement from the county sanitary permit issuing agent is required for petitions to SPS 383 and 385. A position statement from the Department of Agriculture, Trade and Consumer Protection (DATCP) is required for life-safety issues for public swimming pools requested from SPS 390. Position statements must be completed and signed by the appropriate fire chief, local government enforcement official or state agency designee. Signatures or seals on all documents must be originals. Photocopies are not acceptable.

CANCEL | SAVE AND CONTINUE

1:07 PM
1/2/2020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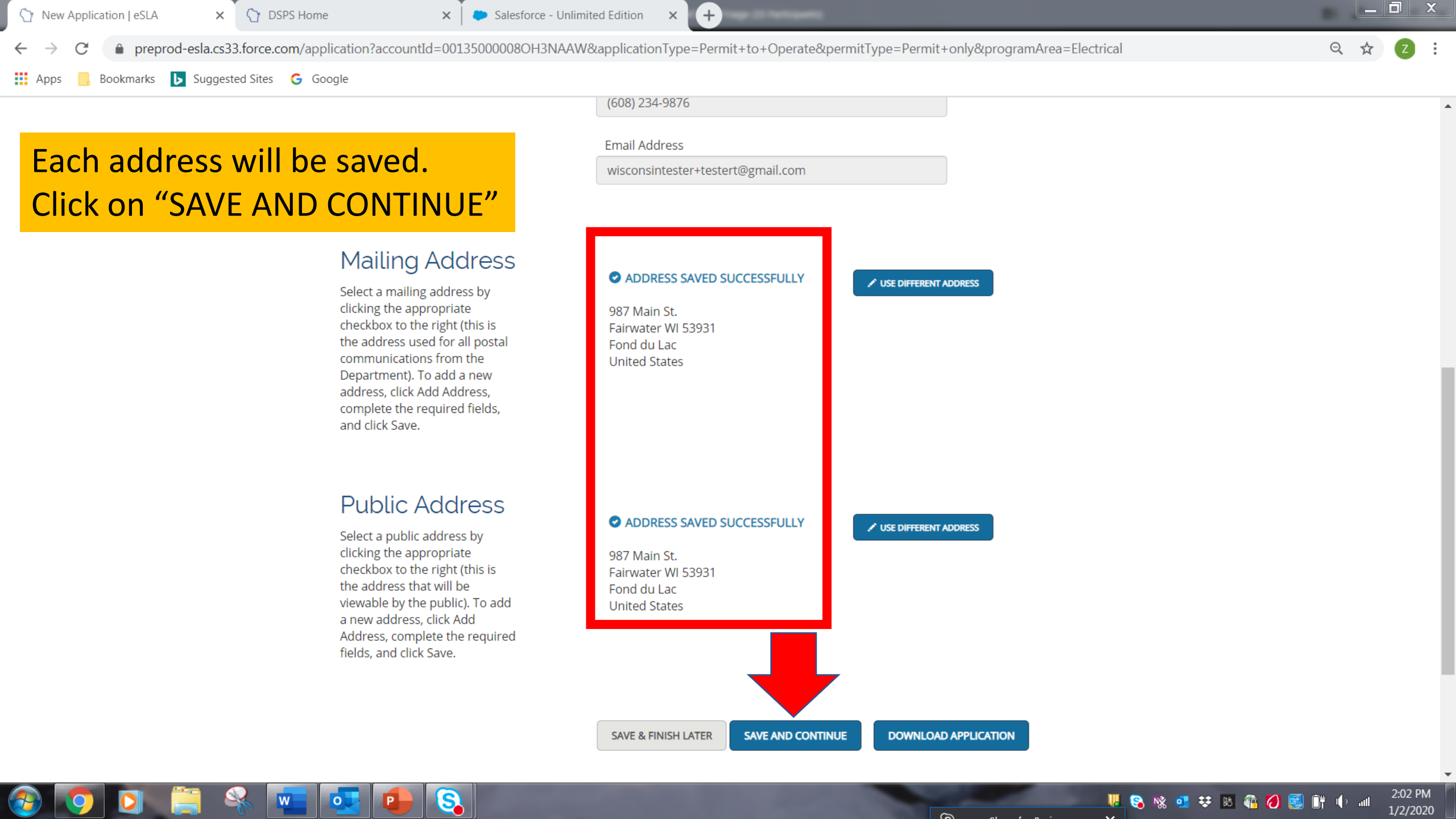
Apps
Bookmarks
Suggested Sites
Google
(608) 234-9876
Email Address
wisconsintester+testert@gmail.com
Mailing Address
Select a mailing address by clicking the appropriate checkbox to the right (this is the address used for all postal communications from the Department). To add a new address, click Add Address, complete the required fields, and click Save.
Mailing
Address
987 Main St.
Fairwater WI 53931
Fond du Lac
United States
+ ADD ADDRESS
SAVE AS MAILING
Public Address
Select a public address by clicking the appropriate checkbox to the right (this is the address that will be viewable by the public). To add a new address, click Add Address, complete the required fields, and click Save.
Public
Address
987 Main St.
Fairwater WI 53931
Fond du Lac
United States
+ ADD ADDRESS
SAVE AS PUBLIC
You must choose a mailing and public address and click on “SAVE AS MAILING” and “SAVE AS PUBLIC” for each address.
SAVE & FINISH LATER
SAVE AND CONTINUE
DOWNLOAD APPLICATION
1:53 PM
1/2/2020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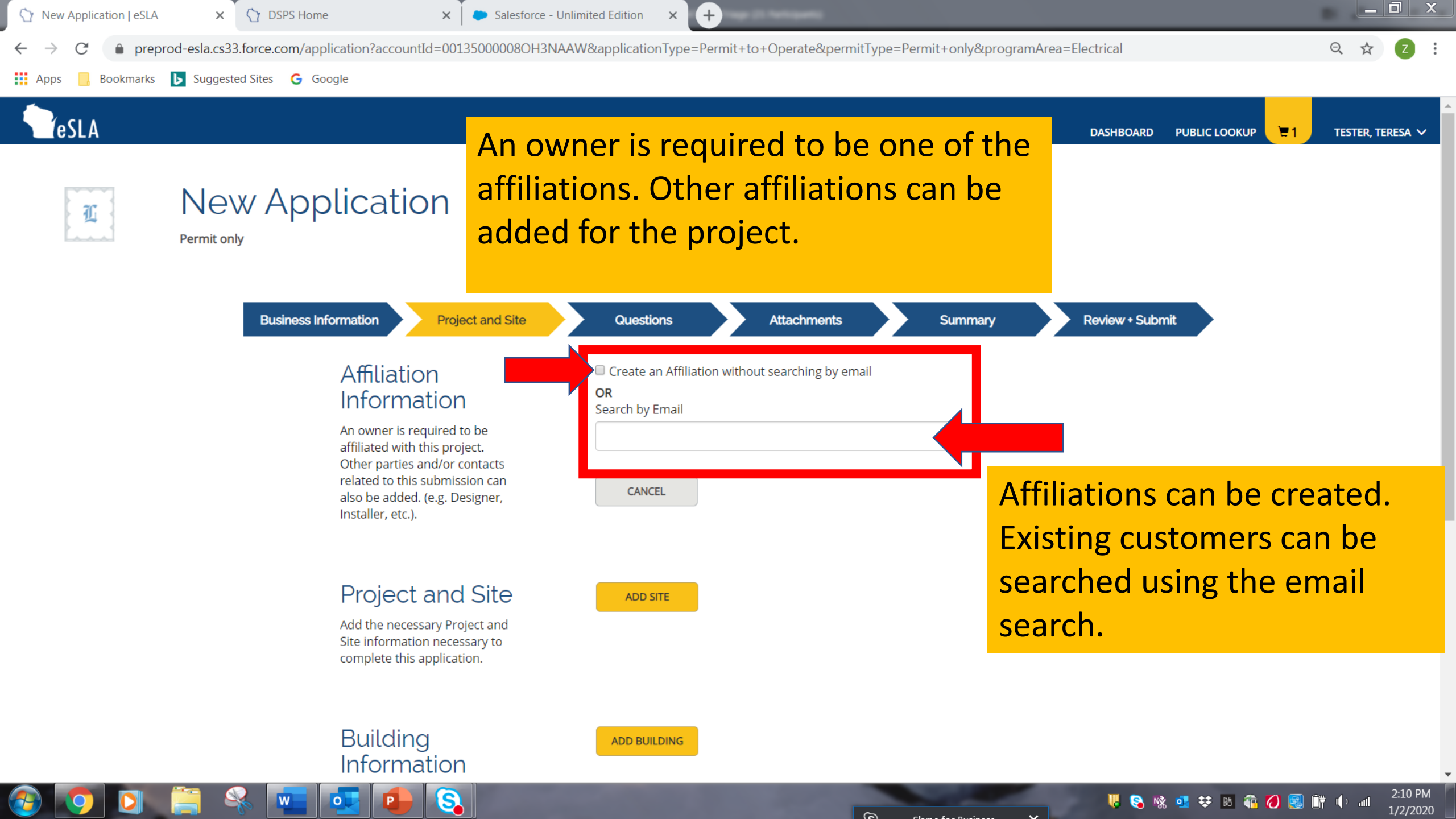
Apps
Bookmarks
Suggested Sites
Google
(608) 234-9876
Email Address
wisconsintester+testert@gmail.com
Each address will be saved.
Click on "SAVE AND CONTINUE"
Mailing Address
Select a mailing address by clicking the appropriate checkbox to the right (this is the address used for all postal communications from the Department). To add a new address, click Add Address, complete the required fields, and click Save.
ADDRESS SAVED SUCCESSFULLY
USE DIFFERENT ADDRESS
987 Main St.
Fairwater WI 53931
Fond du Lac
United States
Public Address
Select a public address by clicking the appropriate checkbox to the right (this is the address that will be viewable by the public). To add a new address, click Add Address, complete the required fields, and click Save.
ADDRESS SAVED SUCCESSFULLY
USE DIFFERENT ADDRESS
987 Main St.
Fairwater WI 53931
Fond du Lac
United States
SAVE & FINISH LATER
SAVE AND CONTINUE
DOWNLOAD APPLICATION
2:02 PM
1/2/2020


New Application | eSLA
DSPS Home
Salesforce - Unlimited Edition
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Apps
Bookmarks
Suggested Sites
Google
eSLA
DASHBOARD
PUBLIC LOOKUP
1
TESTER, TERESA
An owner is required to be one of the affiliations. Other affiliations can be added for the project.
New Application
Permit only
Business Information
Project and Site
Questions
Attachments
Summary
Review + Submit
Affiliation Information
An owner is required to be affiliated with this project. Other parties and/or contacts related to this submission can also be added. (e.g. Designer, Installer, etc.).
Create an Affiliation without searching by email
OR
Search by Email
CANCEL
Affiliations can be created. Existing customers can be searched using the email search.
Project and Site
Add the necessary Project and Site information necessary to complete this application.
ADD SITE
Building Information
ADD BUILDING
2:10 PM
1/2/2020

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Business Information > Project and Site > Questions > Attachments > Summary > Review + Submit

Affiliation Information

An owner is required to be affiliated with this project. Other parties and/or contacts related to this submission can also be added. (e.g. Designer, Installer, etc.).

Fill out all the required affiliation information and click SAVE.

Type of Affiliation *: Owner

First Name *: Craig

Last Name *: Mulder

Company: State of Wisconsin

Email *: craig.mulder@wi.gov

Phone *: (608) 444-5701

Street Address *: PO Box 171

City *: Brandon

State *: Wisconsin

ZipCode *: 53919

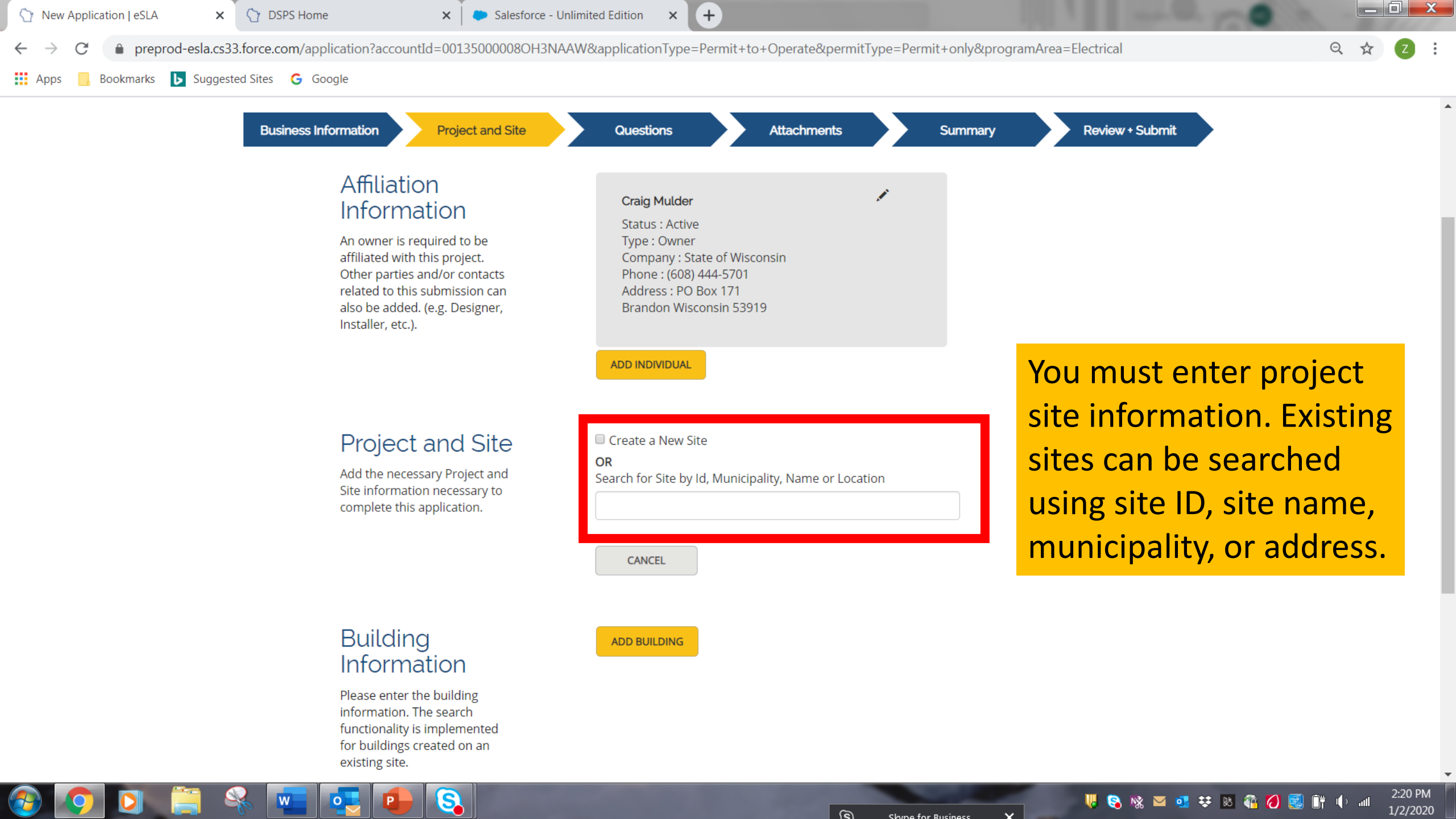
CANCEL | SAVE

Project and Site

Add the necessary Project and Site information necessary to complete this application.

ADD SITE

2:17 PM
1/2/2020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Apps
Bookmarks
Suggested Sites
Google
Business Information
Project and Site
Questions
Attachments
Summary
Review + Submit
Affiliation Information
An owner is required to be affiliated with this project. Other parties and/or contacts related to this submission can also be added. (e.g. Designer, Installer, etc.).
Craig Mulder
Status : Active
Type : Owner
Company : State of Wisconsin
Phone : (608) 444-5701
Address : PO Box 171
Brandon Wisconsin 53919
ADD INDIVIDUAL
Project and Site
Add the necessary Project and Site information necessary to complete this application.
Create a New Site
OR
Search for Site by Id, Municipality, Name or Location
CANCEL
Building Information
Please enter the building information. The search functionality is implemented for buildings created on an existing site.
ADD BUILDING
You must enter project site information. Existing sites can be searched using site ID, site name, municipality, or address.
Skype for Business
2:20 PM
1/2/2020

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Apps | Bookmarks | Suggested Sites | Google

Project and Site

Add the necessary Project and Site information necessary to complete this application.

Fill out the required site information and click SAVE.

Project/Site Name
* Joe's Sporting Goods

Location, Number and Street of Project
* 123 Main St.

Legal Description

County
* Dodge

Municipality
* City

Municipality Name
* MAYVILLE

Municipality Zip Code
* 53050

CANCEL | SAVE

Building Information

ADD BUILDING

2:28 PM
1/2/2020

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Apps Bookmarks Suggested Sites Google

An owner is required to be affiliated with this project. Other parties and/or contacts related to this submission can also be added. (e.g. Designer, Installer, etc.).

Status : Active
Type : Owner
Company : State of Wisconsin
Phone : (608) 444-5701
Address : PO Box 171
Brandon Wisconsin 53919

ADD INDIVIDUAL

Project and Site

Add the necessary Project and Site information necessary to complete this application.

Joe's Sporting Goods

Site Id : SIT-69084
County : Dodge
Municipality Type : City
Municipality : MAYVILLE

You can add building information, but it is not required. Click SAVE AND CONTINUE.

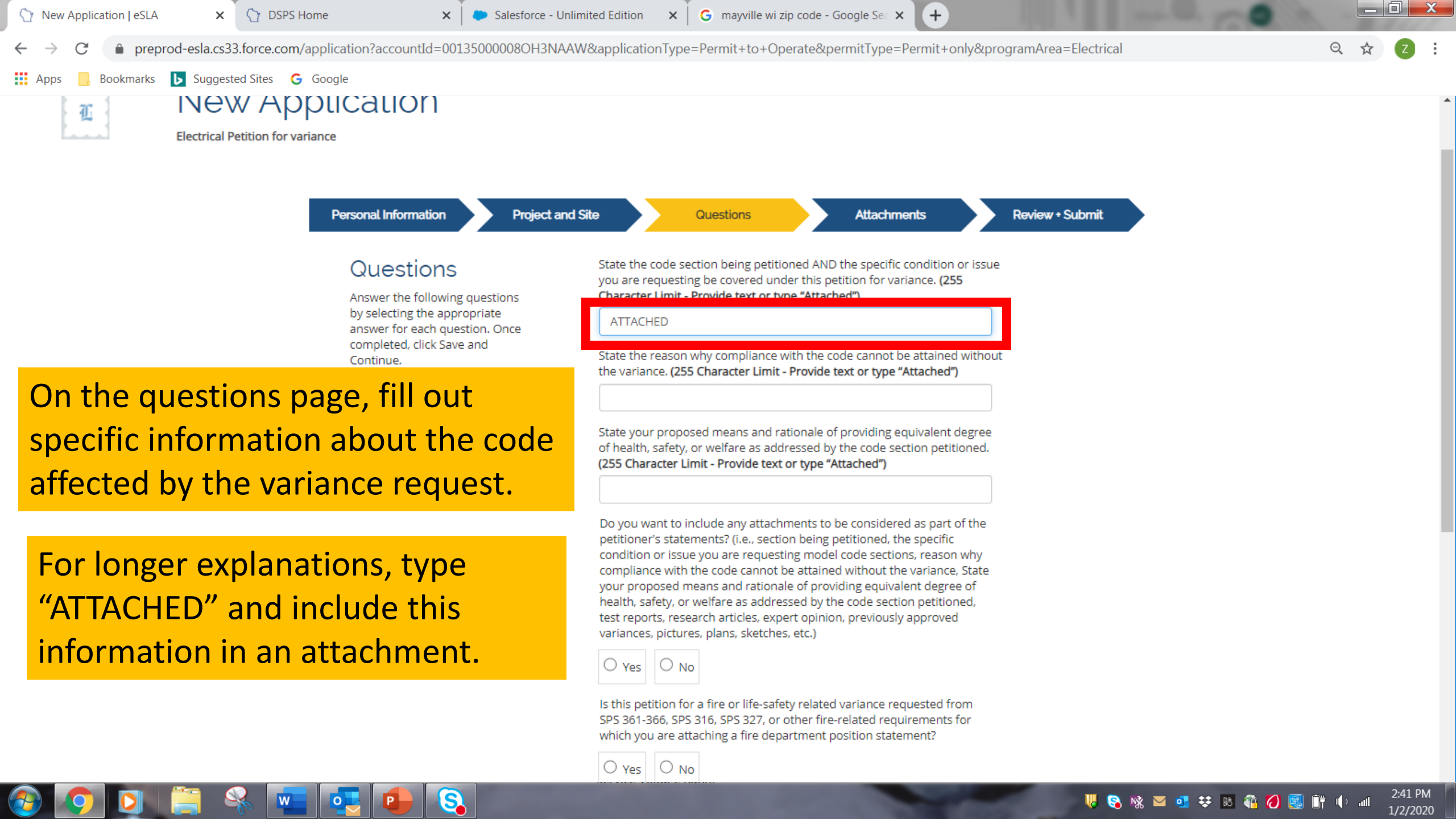
ADD BUILDING

Information

Please enter the building information. The search functionality is implemented for buildings created on an existing site.

SAVE & FINISH LATER | SAVE AND CONTINUE | DOWNLOAD APPLICATION

2:30 PM
1/2/2020


New Application | eSLA
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Apps
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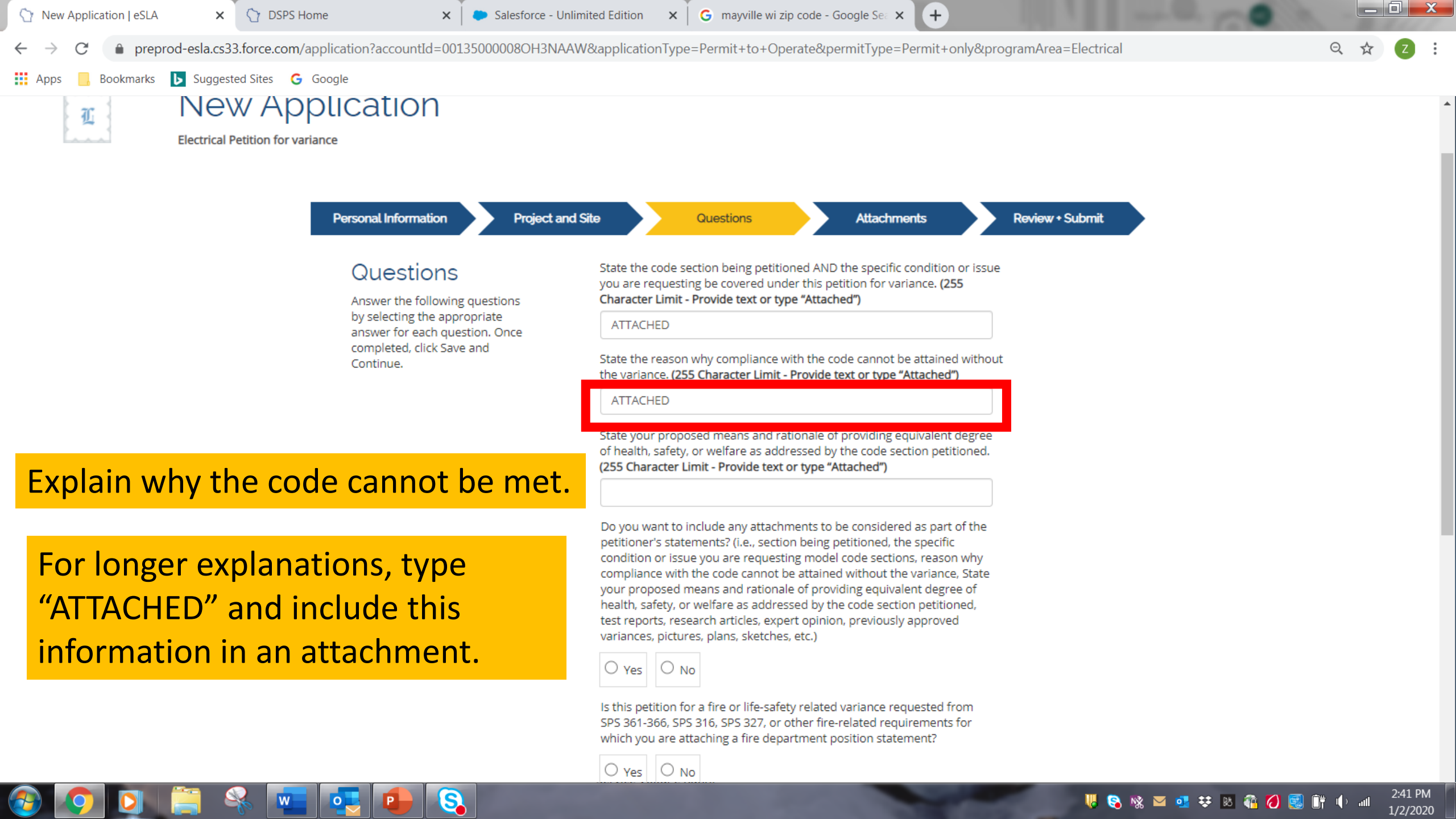
Suggested Sites
Google
New Application
Electrical Petition for variance
Personal Information
Project and Site
Questions
Attachments
Review + Submit
Questions
Answer the following questions by selecting the appropriate answer for each question. Once completed, click Save and Continue.
State the code section being petitioned AND the specific condition or issue you are requesting be covered under this petition for variance. (255 Character Limit - Provide text or type "Attached")
ATTACHED
State the reason why compliance with the code cannot be attained without the variance. (255 Character Limit - Provide text or type "Attached")
State your proposed means and rationale of providing equivalent degree of health, safety, or welfare as addressed by the code section petitioned. (255 Character Limit - Provide text or type "Attached")
Do you want to include any attachments to be considered as part of the petitioner's statements? (i.e., section being petitioned, the specific condition or issue you are requesting model code sections, reason why compliance with the code cannot be attained without the variance, State your proposed means and rationale of providing equivalent degree of health, safety, or welfare as addressed by the code section petitioned, test reports, research articles, expert opinion, previously approved variances, pictures, plans, sketches, etc.)
Yes
No
Is this petition for a fire or life-safety related variance requested from SPS 361-366, SPS 316, SPS 327, or other fire-related requirements for which you are attaching a fire department position statement?
Yes
No
On the questions page, fill out specific information about the code affected by the variance request.
For longer explanations, type "ATTACHED" and include this information in an attachment.
2:41 PM
1/2/2020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preprod-esla.cs33.force.com/application?accountId=00135000008OH3NAAW&applicationType=Permit+to+Operate&permitType=Permit+only&programArea=Electrical
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Personal Information
Project and Site
Questions
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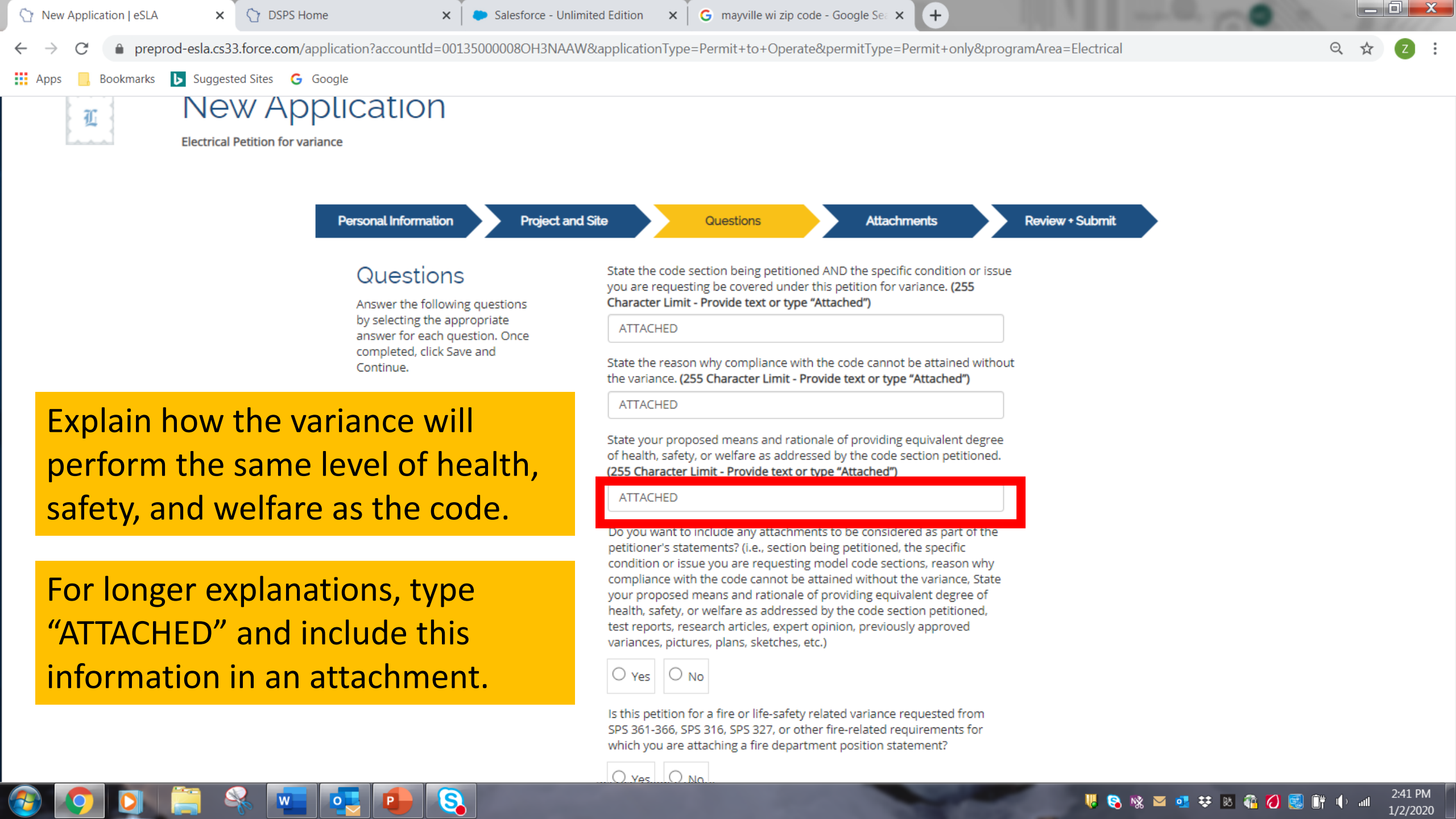
State the code section being petitioned AND the specific condition or issue you are requesting be covered under this petition for variance. (255 Character Limit - Provide text or type "Attached")
ATTACHED
State the reason why compliance with the code cannot be attained without the variance. (255 Character Limit - Provide text or type "Attached")
ATTACHED
State your proposed means and rationale of providing equivalent degree of health, safety, or welfare as addressed by the code section petitioned. (255 Character Limit - Provide text or type "Attached")
Do you want to include any attachments to be considered as part of the petitioner's statements? (i.e., section being petitioned, the specific condition or issue you are requesting model code sections, reason why compliance with the code cannot be attained without the variance, State your proposed means and rationale of providing equivalent degree of health, safety, or welfare as addressed by the code section petitioned, test reports, research articles, expert opinion, previously approved variances, pictures, plans, sketches, etc.)
Yes
No
Is this petition for a fire or life-safety related variance requested from SPS 361-366, SPS 316, SPS 327, or other fire-related requirements for which you are attaching a fire department position statement?
Yes
No
Explain why the code cannot be met.
For longer explanations, type "ATTACHED" and include this information in an attachment.
2:41 PM
1/2/2020


New Application | eSLA
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preprod-esla.cs33.force.com/application?accountId=00135000008OH3NAAW&applicationType=Permit+to+Operate&permitType=Permit+only&programArea=Electrical
Apps
Bookmarks
Suggested Sites
Google
New Application
Electrical Petition for variance
Personal Information
Project and Site
Questions
Attachments
Review + Submit
Questions
Answer the following questions by selecting the appropriate answer for each question. Once completed, click Save and Continue.
State the code section being petitioned AND the specific condition or issue you are requesting be covered under this petition for variance. (255 Character Limit - Provide text or type "Attached")
ATTACHED
State the reason why compliance with the code cannot be attained without the variance. (255 Character Limit - Provide text or type "Attached")
ATTACHED
State your proposed means and rationale of providing equivalent degree of health, safety, or welfare as addressed by the code section petitioned. (255 Character Limit - Provide text or type "Attached")
ATTACHED
Do you want to include any attachments to be considered as part of the petitioner's statements? (i.e., section being petitioned, the specific condition or issue you are requesting model code sections, reason why compliance with the code cannot be attained without the variance, State your proposed means and rationale of providing equivalent degree of health, safety, or welfare as addressed by the code section petitioned, test reports, research articles, expert opinion, previously approved variances, pictures, plans, sketches, etc.)
Yes
No
Is this petition for a fire or life-safety related variance requested from SPS 361-366, SPS 316, SPS 327, or other fire-related requirements for which you are attaching a fire department position statement?
Yes
No
Explain how the variance will perform the same level of health, safety, and welfare as the code.
For longer explanations, type "ATTACHED" and include this information in an attachment.
2:41 PM
1/2/2020

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preprod-esla.cs33.force.com/application?accountId=00135000008OH3NAAW&applicationType=Permit+to+Operate&permitType=Permit+only&programArea=Electrical
Apps Bookmarks Suggested Sites Google

On the questions page you will also answer a set of Yes/No questions about the code for which you are requesting a variance.

(255 Character Limit - Provide text or type "Attached")

ATTACHED

Do you want to include any attachments to be considered as part of the petitioner's statements? (i.e., section being petitioned, the specific condition or issue you are requesting model code sections, reason why compliance with the code cannot be attained without the variance, State your proposed means and rationale of providing equivalent degree of health, safety, or welfare as addressed by the code section petitioned, test reports, research articles, expert opinion, previously approved variances, pictures, plans, sketches, etc.)

○ Yes ◉ No

Is this petition for a fire or life-safety related variance requested from SPS 361-366, SPS 316, SPS 327, or other fire-related requirements for which you are attaching a fire department position statement?

○ Yes ◉ No

Is this a petition for variance requested from SPS 316, SPS 320-323, SPS 327 or SPS 383 for which you are attaching a local inspection department position statement? For SPS 361-366, complete if plan review is by municipality or orders are written on the building under construction; optional in other cases.

◉ Yes ○ No

Is this a petition for public health and life-safety related variance requested from SPS 382, SPS 384 and SPS 390, or other public swimming pool related requirements for which you are attaching a Public Health/Life Safety position statement?

○ Yes ◉ No

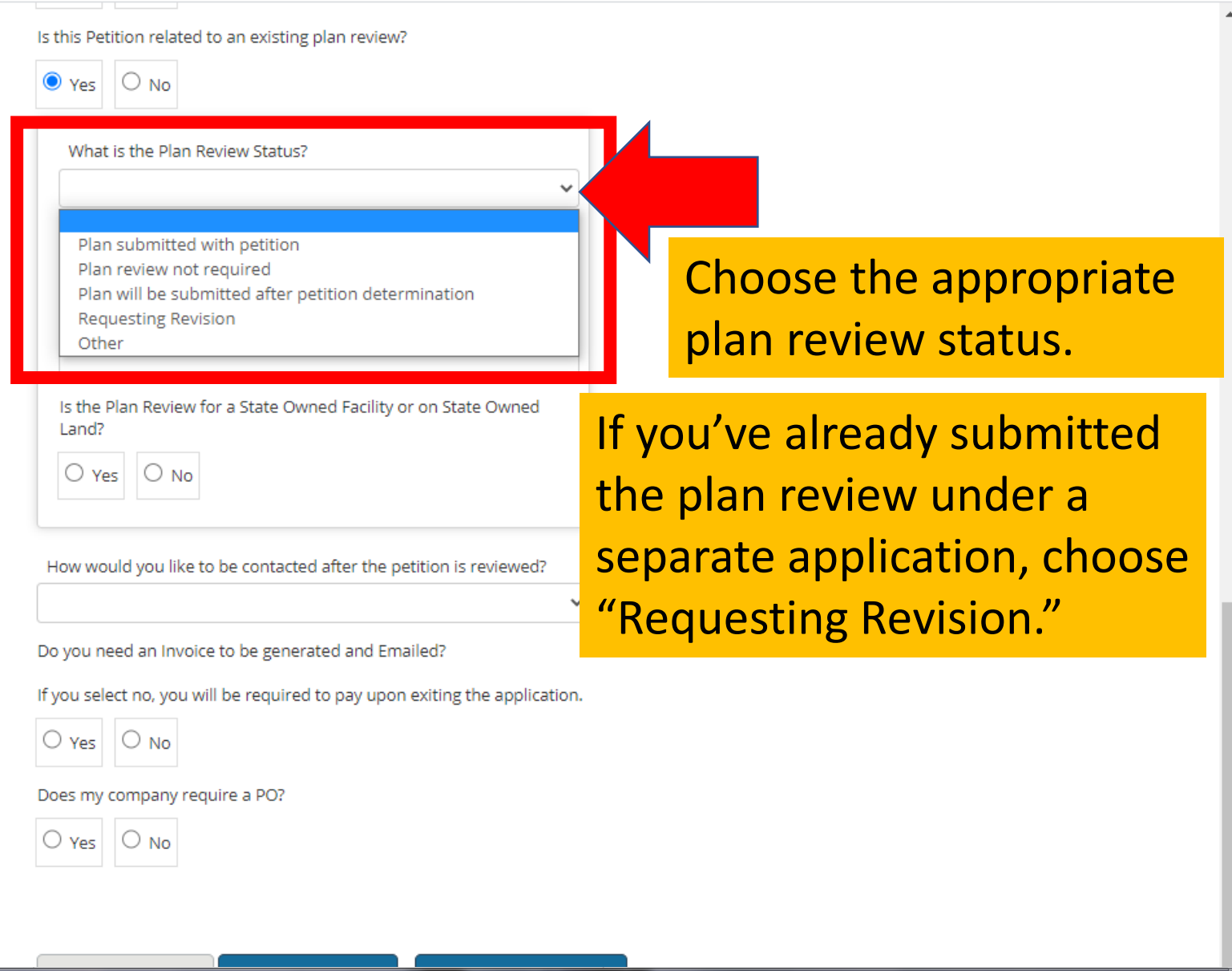
Is this Petition related to an existing plan review?

◉ Yes ○ No

What is the Plan Review Status?

2:54 PM 1/2/2020

If you answer “Yes” to the question: Is this related to an existing plan review, you are required to answer the additional questions.

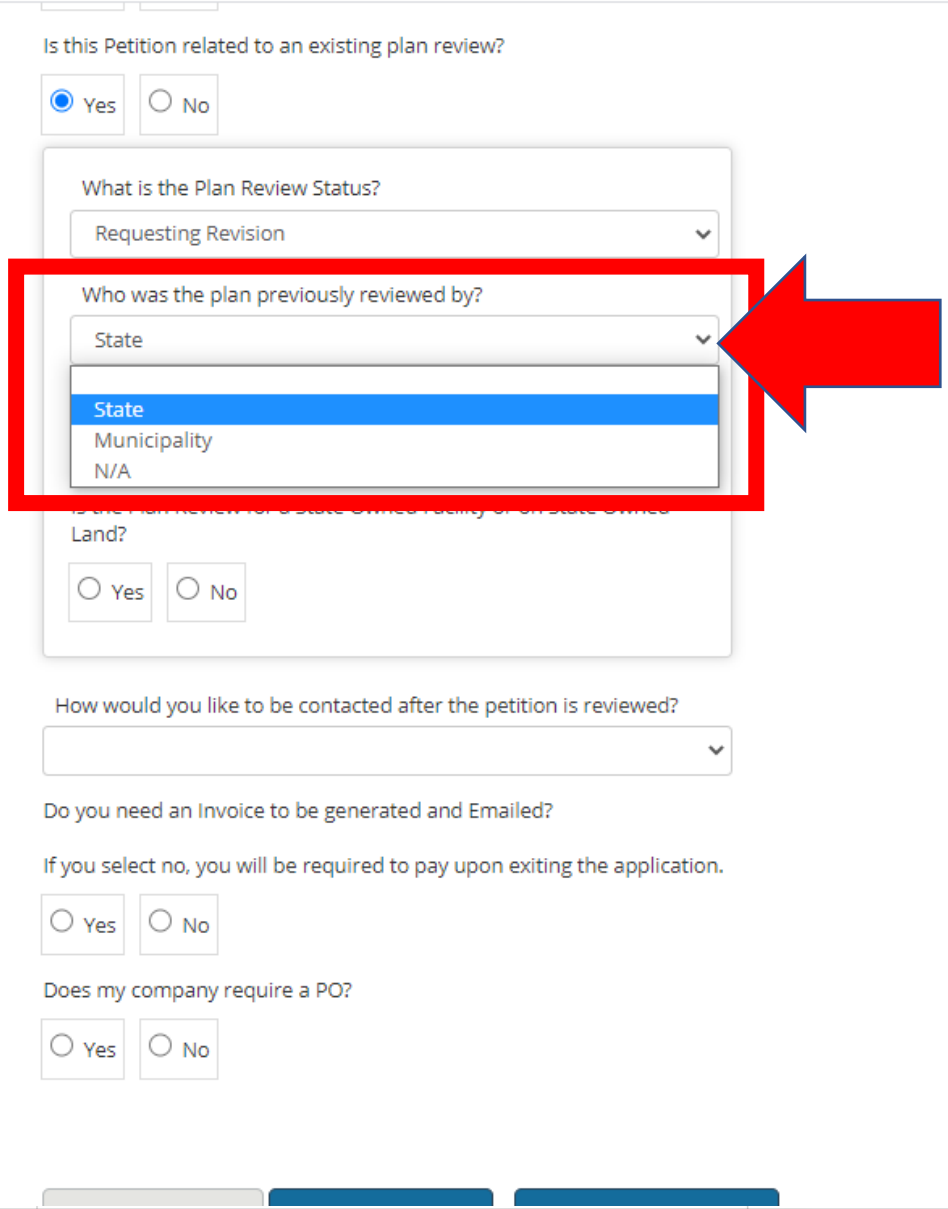


Choose the appropriate plan review status.

If you’ve already submitted the plan review under a separate application, choose “Requesting Revision.”

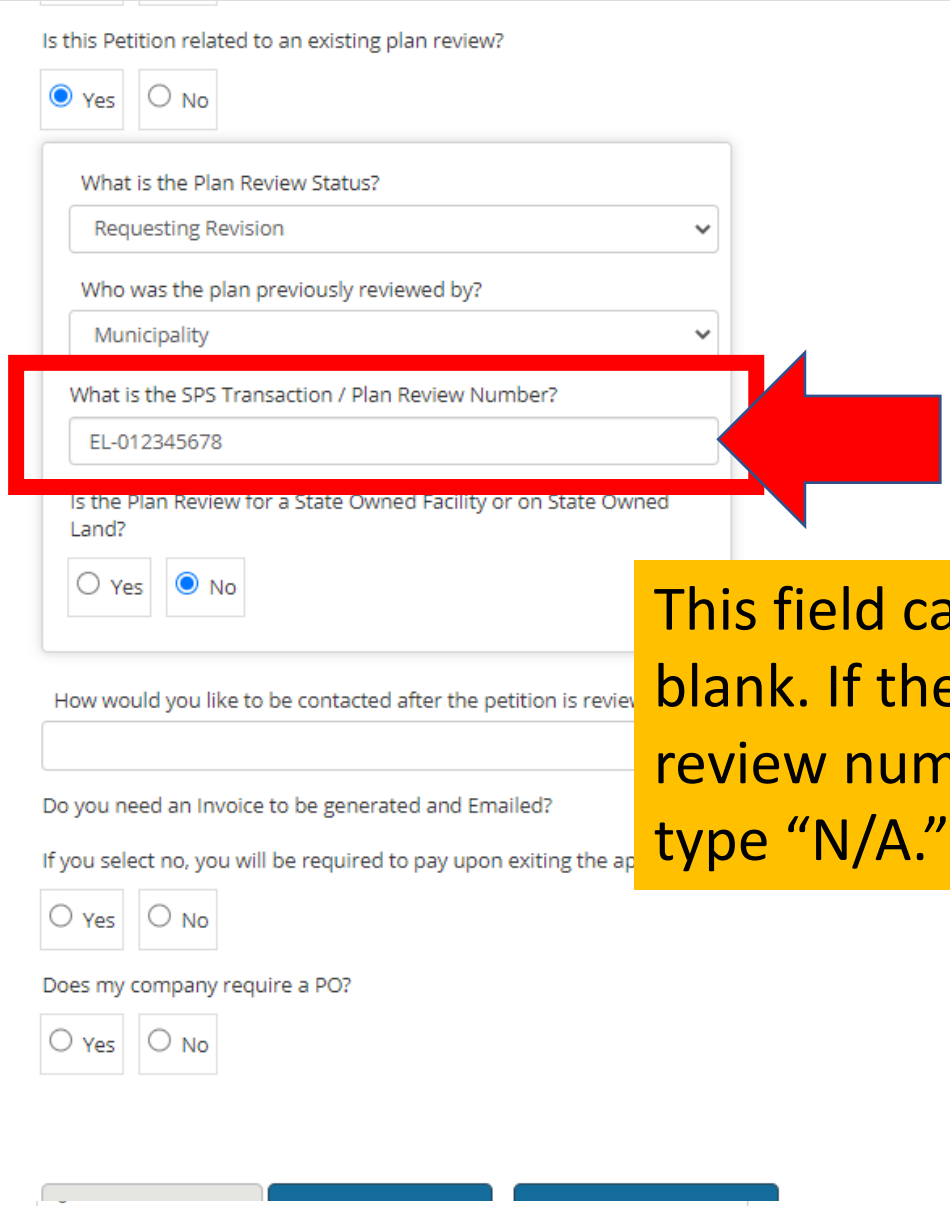
If you've already submitted the plan review under a separate application, select who reviewed the plan.

If you are submitting the plan for review with this petition for variance, submitting the plan for review at a later time, or not submitting for plan review at all, select "N/A."

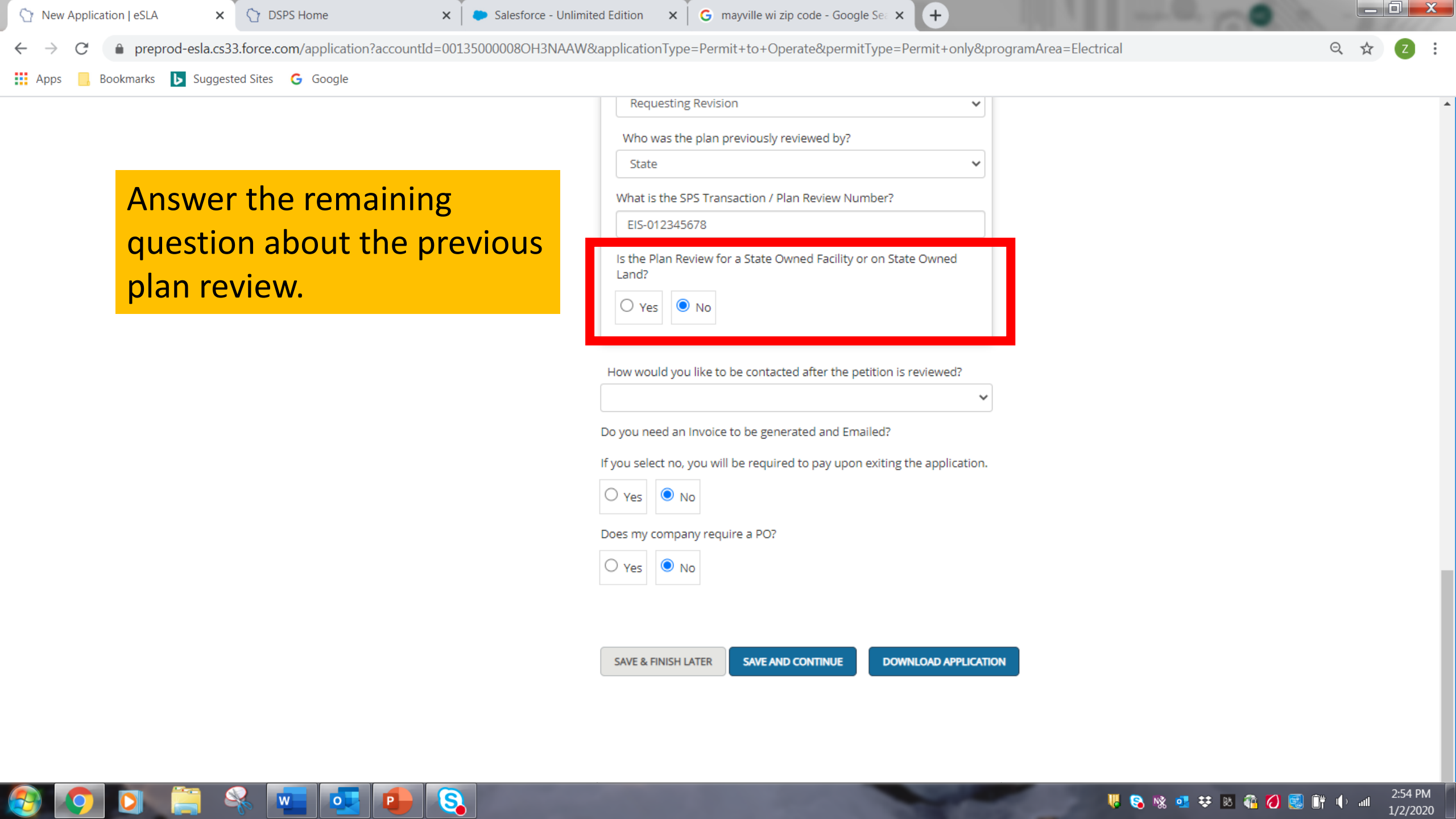


If the plan was previously reviewed by, or submitted to, the State, type the EL- or DIS- number associated with the plan review submittal.

If the plan was previously reviewed by a municipality, type the review number associated with the plan review submittal.



This field cannot be left blank. If there is no plan review number to provide, type “N/A.”



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Answer the remaining question about the previous plan review.

Requesting Revision

Who was the plan previously reviewed by?

State

What is the SPS Transaction / Plan Review Number?

EIS-012345678

Is the Plan Review for a State Owned Facility or on State Owned Land?

○ Yes ◉ No

How would you like to be contacted after the petition is reviewed?

Do you need an Invoice to be generated and Emailed?

If you select no, you will be required to pay upon exiting the application.

○ Yes ◉ No

Does my company require a PO?

○ Yes ◉ No

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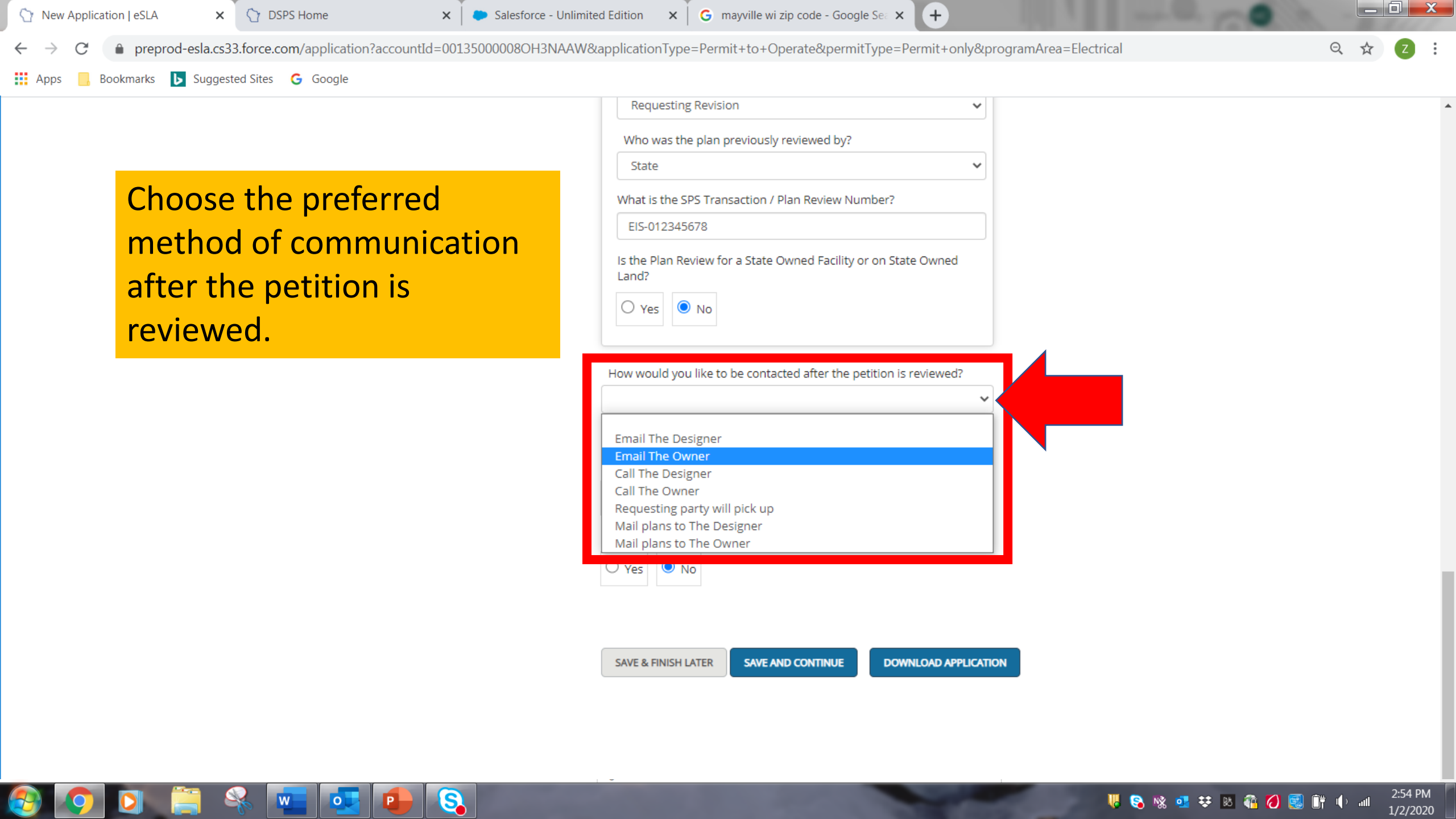
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Apps
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Choose the preferred method of communication after the petition is reviewed.
Requesting Revision
Who was the plan previously reviewed by?
State
What is the SPS Transaction / Plan Review Number?
EIS-012345678
Is the Plan Review for a State Owned Facility or on State Owned Land?
Yes
No
How would you like to be contacted after the petition is reviewed?
Email The Designer
Email The Owner
Call The Designer
Call The Owner
Requesting party will pick up
Mail plans to The Designer
Mail plans to The Owner
Yes
No
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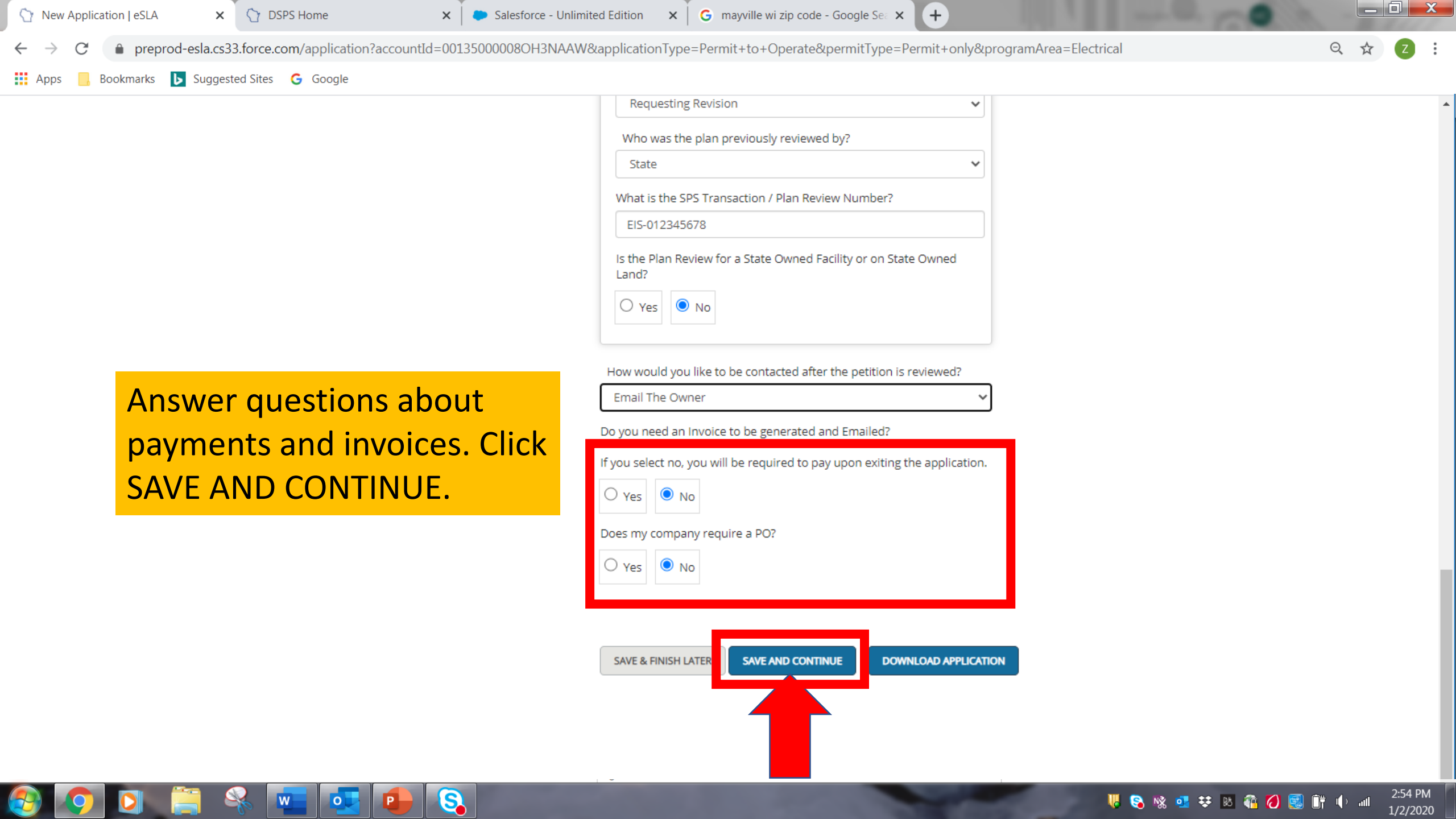
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Apps
Bookmarks
Suggested Sites
Google
Requesting Revision
Who was the plan previously reviewed by?
State
What is the SPS Transaction / Plan Review Number?
EIS-012345678
Is the Plan Review for a State Owned Facility or on State Owned Land?
Yes
No
How would you like to be contacted after the petition is reviewed?
Email The Owner
Do you need an Invoice to be generated and Emailed?
If you select no, you will be required to pay upon exiting the application.
Yes
No
Does my company require a PO?
Yes
No
SAVE & FINISH LATER
SAVE AND CONTINUE
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Answer questions about payments and invoices. Click SAVE AND CONTINUE.
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Attachments

If applicable, upload the attachments for your application by clicking the Add Attachment button(s). If you have multiple files to upload, you should create a zip file on your computer, then click ADD ATTACHMENT button on this page, select the zip file from your computer. If uploading an attachment as a submission, it is necessary that the name of the file attachment is less than 80 characters in length for it to be received successfully. The character limit does include the file attachment extension, such as (.doc) and (.pdf). The file must be no more than 25 MB in size. For documentation that needs to be submitted directly or by hardcopy, please acknowledge by clicking the Attest button(s). If no attachment or attestation items appear, please click the Save and Continue button

Local Government Inspection Recommendation*

Upload a copy of the local government inspection recommendation.

ADD ATTACHMENT

Fire Department Position Statement*

Upload a copy of the Fire Department Position Statement.

ADD ATTACHMENT

Public Health/Life Safety Position Statement*

Upload a copy of the Public Health/Life Safety Position Statement.

ADD ATTACHMENT

Supporting Petition Documents*

Upload any supporting documents (i.e., section being petitioned, the specific condition or issue you are requesting model code sections, reason why compliance with the code cannot be attained without the variance, State your proposed means and rationale of providing equivalent degree of health, safety, or welfare as addressed by the code section petitioned, test reports, research articles, expert opinion, previously approved variances, pictures, plans, sketches, etc.)

ADD ATTACHMENT

Depending on which questions you answered “Yes” on the Questions page, you will be required to attach additional information. To add an attachment, click on the “Add Attachment” button.

You must include attachments for each item listed on your Attachments page.

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Follow the prompts to browse for the files and upload the attachments.

Upload any supporting documents (i.e., section being petitioned, the specific condition or issue you are requesting model code sections, reason why compliance with the code cannot be attained without the variance, State your proposed means and rationale of providing equivalent degree of health, safety, or welfare as addressed by the code section petitioned, test reports, research articles, expert opinion, previously approved variances, pictures, plans, sketches, etc.)

ADD ATTACHMENT

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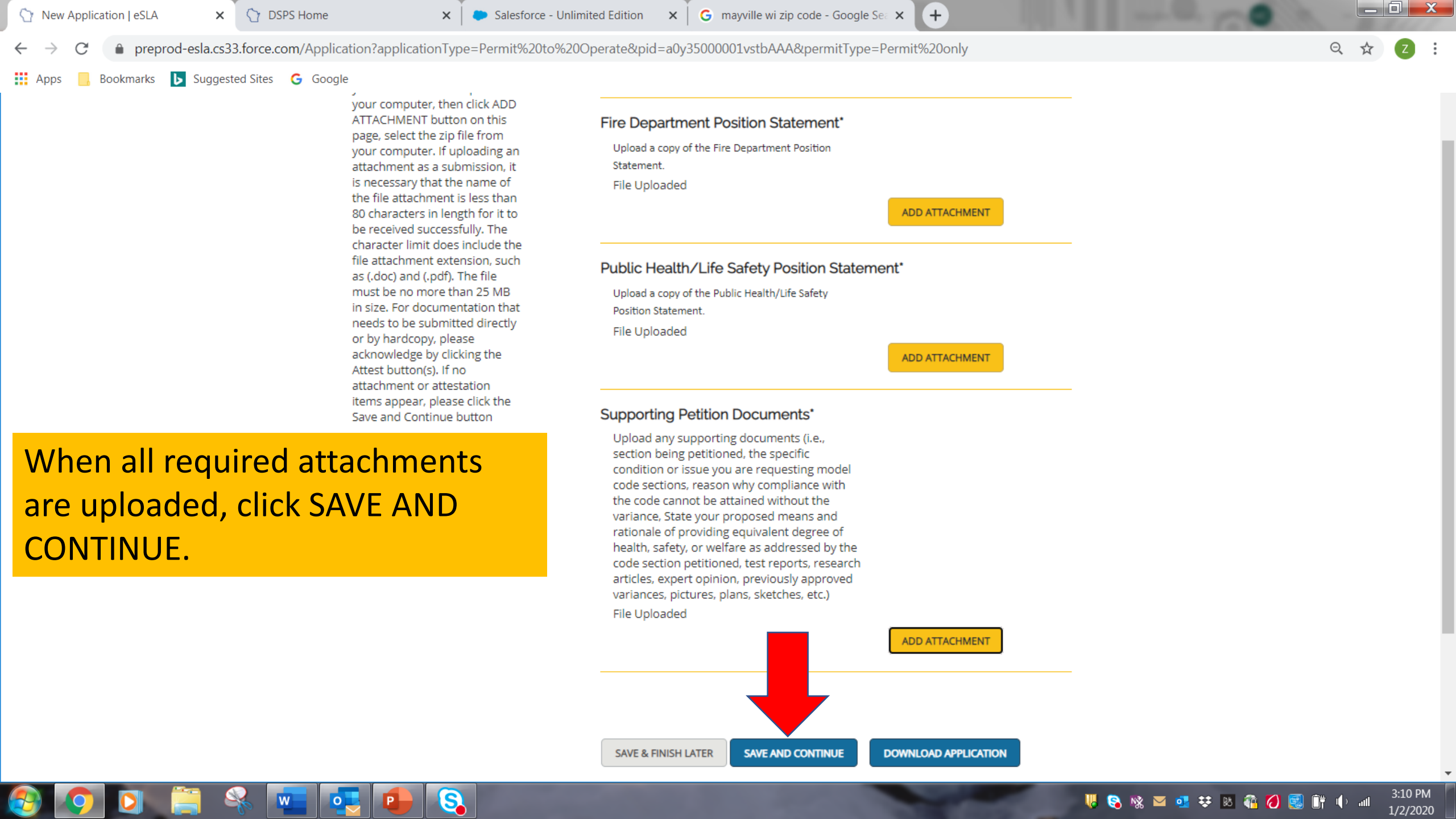

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your computer, then click ADD ATTACHMENT button on this page, select the zip file from your computer. If uploading an attachment as a submission, it is necessary that the name of the file attachment is less than 80 characters in length for it to be received successfully. The character limit does include the file attachment extension, such as (.doc) and (.pdf). The file must be no more than 25 MB in size. For documentation that needs to be submitted directly or by hardcopy, please acknowledge by clicking the Attest button(s). If no attachment or attestation items appear, please click the Save and Continue button

When all required attachments are uploaded, click SAVE AND CONTINUE.

Fire Department Position Statement*

Upload a copy of the Fire Department Position Statement.

File Uploaded

ADD ATTACHMENT

Public Health/Life Safety Position Statement*

Upload a copy of the Public Health/Life Safety Position Statement.

File Uploaded

ADD ATTACHMENT

Supporting Petition Documents*

Upload any supporting documents (i.e., section being petitioned, the specific condition or issue you are requesting model code sections, reason why compliance with the code cannot be attained without the variance, State your proposed means and rationale of providing equivalent degree of health, safety, or welfare as addressed by the code section petitioned, test reports, research articles, expert opinion, previously approved variances, pictures, plans, sketches, etc.)

File Uploaded

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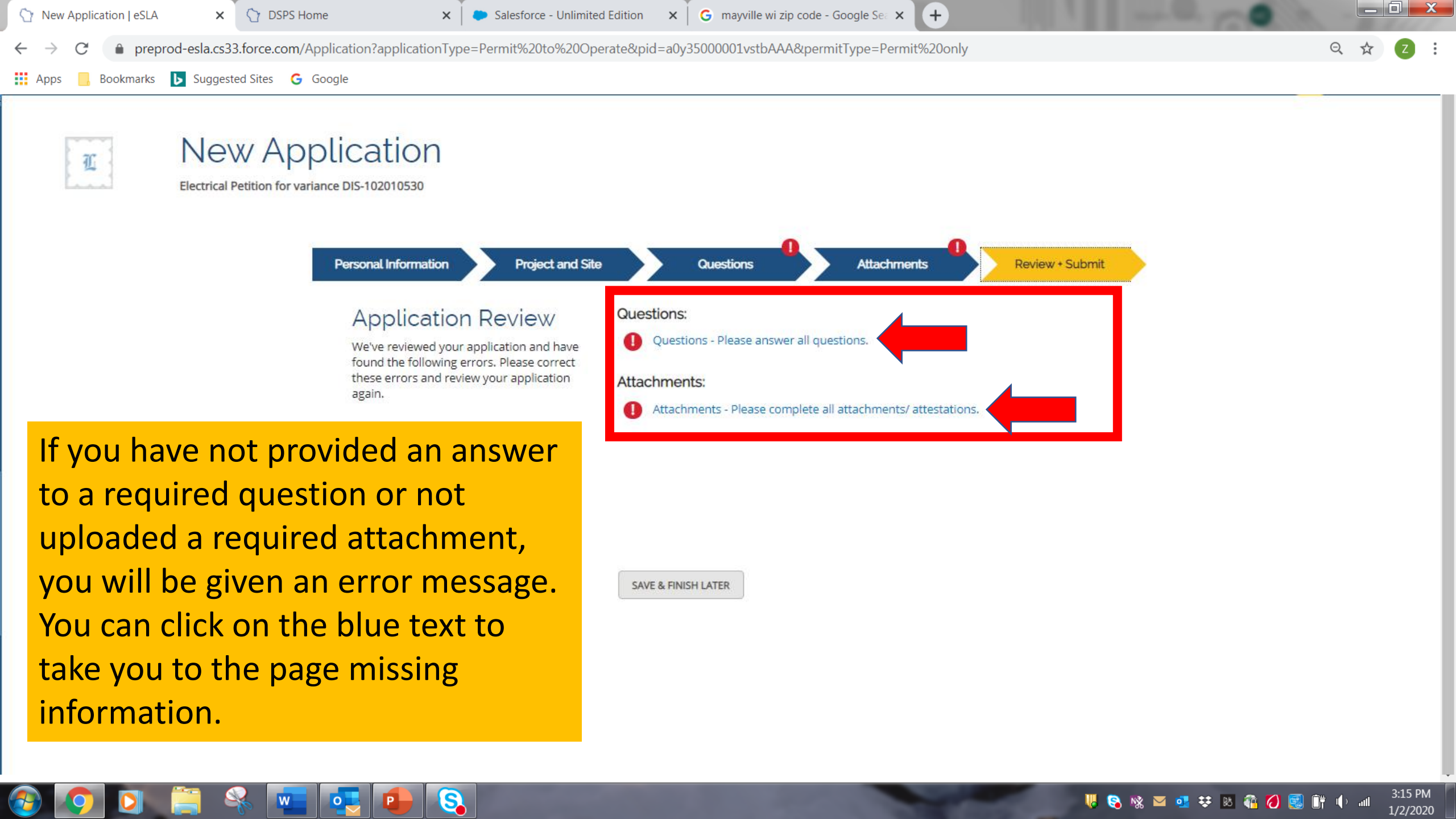
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New Application
Electrical Petition for variance DIS-102010530
Personal Information
Project and Site
Questions
Attachments
Review + Submit
Application Review
We've reviewed your application and have found the following errors. Please correct these errors and review your application again.
Questions:
Questions - Please answer all questions.
Attachments:
Attachments - Please complete all attachments/ attestations.
SAVE & FINISH LATER
If you have not provided an answer to a required question or not uploaded a required attachment, you will be given an error message. You can click on the blue text to take you to the page missing information.
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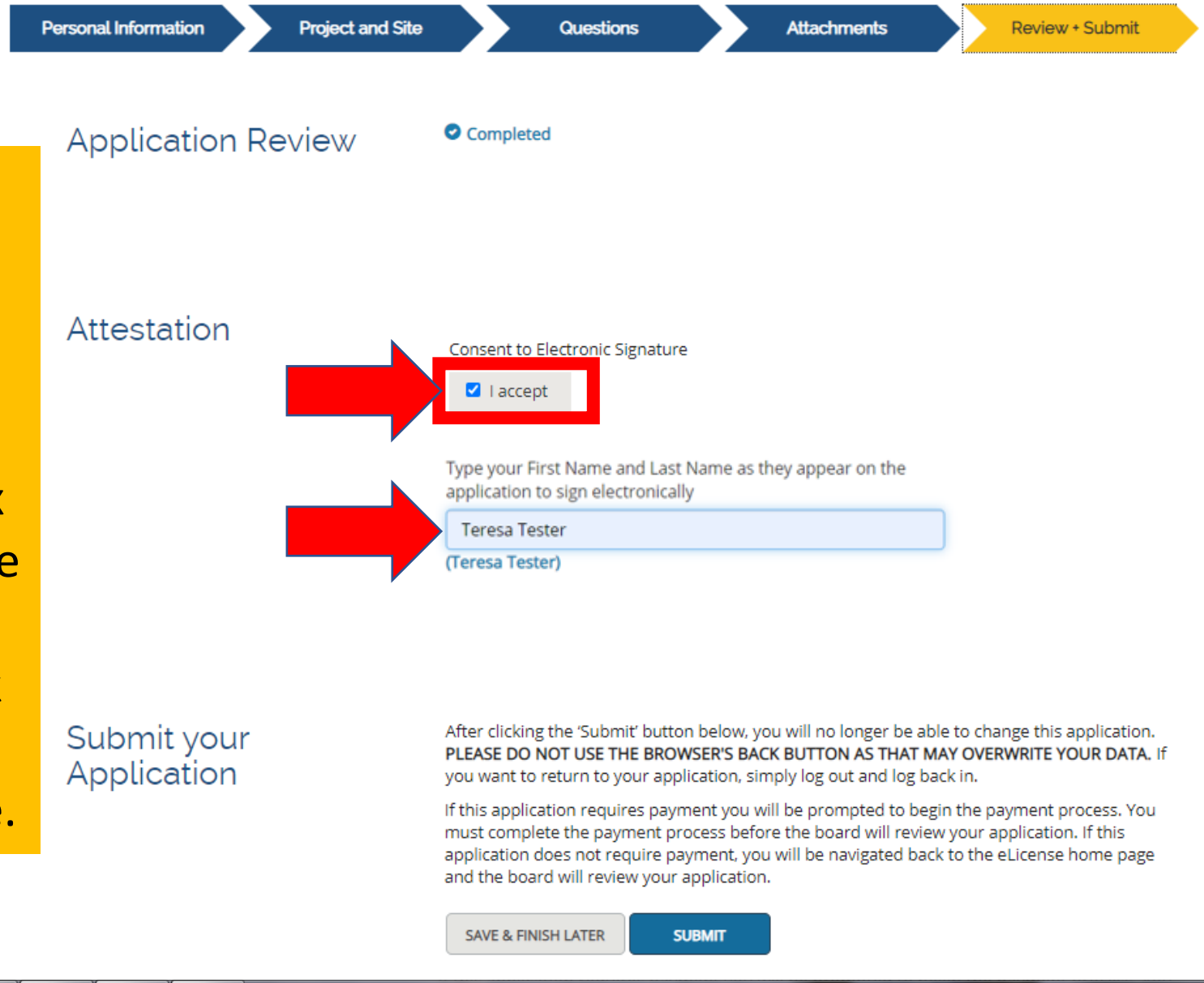
When all the information is correct, click the “Review and Submit” tab. Click the acceptance box and type your name in the electronic signature box. Click submit at the bottom of the page.



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DASHBOARD | PUBLIC LOOKUP | 2 | TESTER, TERESA

Teresa Tester's Cart

PLEASE DO NOT USE THE BROWSER'S BACK BUTTON AS THAT MAY OVERWRITE YOUR DATA.
To continue paying, select the fees you wish to pay and then press the continue button.

ITEMS » CHECKOUT » CONFIRMATION

Pay For:

None

None

Plan Review

You will be taken to your cart to pay the application fee. Click on "Plan Review".

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DASHBOARD PUBLIC LOOKUP 2 TESTER, TERESA

Teresa Tester's Cart

Click on the check box for the plan review that you want to pay. Note the total amount due and click CONTINUE.

PLEASE DO NOT USE THE BROWSER'S BACK BUTTON AS THAT MAY OVERWRITE YOUR DATA.
To continue paying, select the fees you wish to pay and then press the continue button.

ITEMS » CHECKOUT » CONFIRMATION

Pay For:

Plan Review

Select All

an Review Fee for DIS-102010530

Type	Amount	Amount Outstanding	Due Date
Electrical Petition for Variance Fee	$300.00	$300.00	

Total Amount Outstanding : $300.00

CONTINUE

Total Due: **$300.00**

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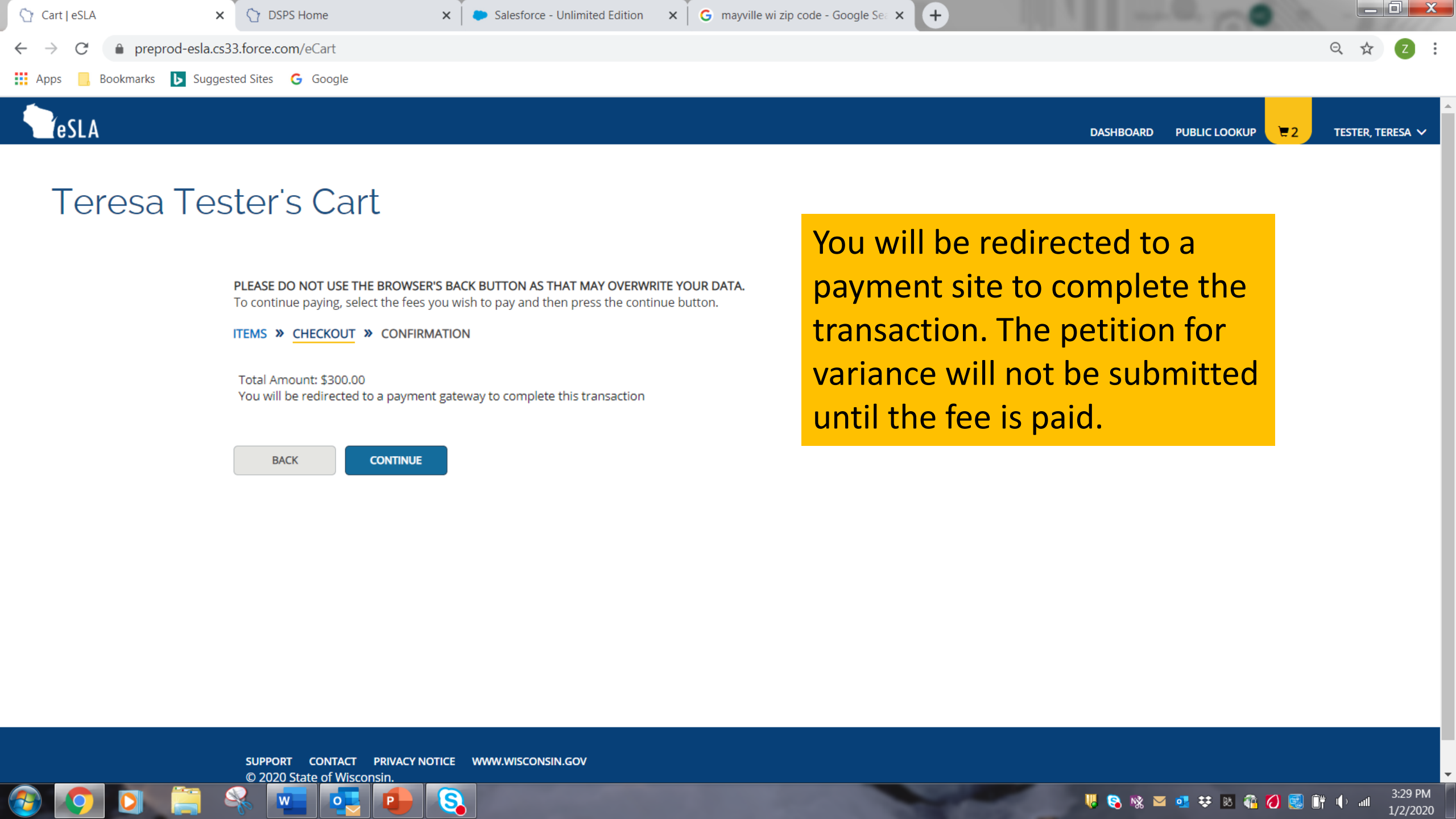

You will be redirected to a payment site to complete the transaction. The petition for variance will not be submitted until the fee is paid.