

Construction Board of Appeals BUILDING CODE VARIANCE INSTRUCTIONS

The Construction Board of Appeals will consider building code variances only for those projects that have been reviewed and disapproved by the Building Official or Floodplain Administrator. The application may be made when the enforcement thereof would do manifest injustice and would be contrary to the spirit and purpose of this and other technical codes adopted by the City.

The following data is required to be submitted to request a variance of the building code:

1. A letter addressed to the Chairman of the Construction Board of Appeals, and sent in care of the Building Official, 6703 Sullivan Rd, Central, LA 70739, requesting the variance, stating the section(s) of the Building Code involved, and giving detailed written reasons why a variance is requested. A \$45.00 fee is to accompany the letter and must be signed by the Owner, Architect/Engineer or Contractor.
2. Variance Request Form (attached).
3. A Flood Elevation Certificate.

If the Board of Appeal approves the request for the variance, a Hold Harmless and Indemnity Agreement holding the City and the Board of Appeal free and harmless of liability due to the granting of the variance, is to be filed and recorded with the Clerk of Court. The Owner is required to sign the Hold Harmless and Indemnity Agreement. A certified copy with recording data is to be furnished to the Inspection Division before the permit will be issued. This form will be sent to you within the week following the meeting.

The Board meetings are held on the 3rd Wednesday of each month at 2:00 p.m. at the Municipal Service Center, 6703 Sullivan Rd, Central, LA 70739. The Owner, Architect/Engineer or Contractor must attend the meeting to present their case. The above data must be submitted by the Thursday prior to the meeting date.

Please call 262-5000 if you have any questions.



Construction Board of Appeals Building Variance Request Form

1. Name of Applicant: _____

Current Mailing Address: _____
Street Address City State Zip Code

Phone Number: _____

2. Name of Owner (if different from #1 above): _____

Mailing Address: _____
Street Address City State Zip Code

Phone Number: _____

3. Location of Property: _____
Street Address Central LA
City State Zip Code

Lot and/or Tract Number: _____ Subdivision: _____

Business Name (if applicable): _____

4. Type of Construction: a. Residential Commercial Mobile Home Other

b. Remodel New

c. Size of Proposed Construction/Project: _____ square feet

d. Size of Existing Structure: _____ square feet

5. Describe Project and/or Reason for Variance Request: _____

6. Signature of Applicant: _____ Date: _____

(Please attach a copy of the Proposed Elevation Certificate in order for this request to be processed if applicable)

STAFF/OFFICE USE ONLY:

Building Code (Standard Building or CABO Code): _____

Section Number: _____

Required Lowest Floor Elevation: _____ NAVD

Requested Lowest Floor Elevation: _____ NAVD

Existing Lowest Floor Elevation: _____ NAVD

Staff Reviewed by: _____

Date: _____

Date Received for Processing: _____

Permit Number: _____