

**IONIA COUNTY
CONSTRUCTION CODE DEPARTMENT
175 E. ADAMS STREET
IONIA, MICHIGAN 48846**

**PHONE NUMBER
(616) 527-5374**

**FAX NUMBER
(616) 527-0863**

**CONSTRUCTION BOARD OF APPEALS (CBA)
APPLICATION**

1. Name of applicant: _____
2. Status of applicant (owner, contractor, engineer, etc.) _____
3. Date of CBA application: _____
4. Job address related to request: _____
5. Date of building/trade permit (if issued): _____
6. "Specific Variance" from the Code (list code section or sections):

7. State the reason(s) for the variance request from the above noted Code section(s): _____

8. If this is not a "Specific Variance" request and if the building department has refused to grant an application for a building permit, or if the building department has made any other decision pursuant to or related to the Stille-DeRossett-Hale Single State Construction Code Act 230 of 1972 or the State Construction Codes, please state the reason(s) for the appeal:

9. Applicant's signature: _____
Date: _____

FEE: \$75 cash or check made payable to: ICCD