

**Georgia Department of Public Health
Environmental Health Section, Land Use Unit
2 Peachtree Street, NW. 13th Floor
Atlanta, Georgia 30303-3186
404-657-6534**

Date: _____

1. Petitioner

Name: _____

Address: _____

Property location: _____

Phone number: _____

Contact Person: _____

Attorney or person representing petitioner: _____

2. Rule(s) from which a variance or waiver is requested.

3. Type of action requested.

a. variance _____

b. waiver _____

6. List the reasons that such alternative standards would afford adequate protection for the public health, safety, and welfare.

7. List the reasons the variance or waiver requested would serve the purpose of the underlying statute upon which the Rule is based.

8. Duration of the variance or waiver.
