



**Division of Hotels and Restaurants
Bureau of Elevator Safety**

2601 Blair Stone Road, Tallahassee, FL 32399-1013
Phone: 850.487.1395 • Fax: 850.922.6208 • Email: dhr.elevators@myfloridalicense.com

PETITION FOR VARIANCE FROM RULE

NOTE: The Bureau of Elevator Safety provides this form for assistance only. This form is not required for submitting a variance request, but its proper completion will facilitate processing of your variance request. All requirements set forth in Chapter 120, Florida Statutes (FS), apply to any variance petition.

Type of Variance Requested: Routine (Completed within 90 days) Emergency (Completed within 30 days)

Variance Duration: Permanent Temporary: if temporary, date you will be in compliance

Petitioner or Legal Representative Name: _____ Title: _____

Mailing Address: _____

Name as it appears on the license: _____

License Location Address: _____

License Number(s):					
--------------------	--	--	--	--	--

PETITION FOR VARIANCE FROM RULE 61C-5.001, FAC, AND

Consult your registered elevator company or certified elevator inspector with questions about the specific rule(s) to cite.

ASME Rule:	<input type="checkbox"/> A17.1, ____ (edition)	<input type="checkbox"/> A17.3, ____ (edition)	<input type="checkbox"/> A18.1, ____ (edition)	Other
ASME Rule:	<input type="checkbox"/> A17.1, ____ (edition)	<input type="checkbox"/> A17.3, ____ (edition)	<input type="checkbox"/> A18.1, ____ (edition)	Other
ASME Rule:	<input type="checkbox"/> A17.1, ____ (edition)	<input type="checkbox"/> A17.3, ____ (edition)	<input type="checkbox"/> A18.1, ____ (edition)	Other
ASME Rule:	<input type="checkbox"/> A17.1, ____ (edition)	<input type="checkbox"/> A17.3, ____ (edition)	<input type="checkbox"/> A18.1, ____ (edition)	Other
Florida Administrative Code	61C-5.____	61C-5.____	61C-5.____	61C-5.____

I request a variance from the above stated rule(s) adopted under Section 399.02, Florida Statutes.

I cannot meet the requirements of the rule(s) because: _____

I intend to meet the intent of the rule and underlying statute by: _____

It would be a substantial hardship for me to meet the minimum requirements of the rule because: _____

This request is being made on an emergency basis because (if applicable): _____

If you are not the owner or owner’s legal representative, please attach a letter from the owner authorizing you to act on their behalf and stating that they agree to be held to any provisos required by any order granting a variance.

Signature: _____ Date: _____

Attach additional pages if necessary to provide all pertinent information.