

**APPEAL TO THE ABATEMENT APPEALS BOARD  
OF THE CITY AND COUNTY OF SAN FRANCISCO  
FROM THE BUILDING INSPECTION DEPARTMENT DIRECTOR'S ORDER**

**Check Type of Appeal:** ☐ Appeal of Director's Order ☐ Request for Jurisdiction ☐ Re-hearing

**Appellant Name:** \_\_\_\_\_  
**Director's Order No** \_\_\_\_\_  
**Date Appeal Filed:** \_\_\_\_\_

**Appeal Number:** \_\_\_\_\_  
**Complaint Tracking No(s)** \_\_\_\_\_  
**Filing Fee:** \$534.00

**Instructions:** Please (1) answer all the questions on pages 1 and 2 for appeals of Director's Orders, and complete pages 1 through 3 for Requests for Jurisdiction, (2) sign the bottom of page 2 (and 3 if applicable), and (3) include the requisite filing fee of **\$534.00** (checks are payable to the San Francisco Department of Building Inspection). Please attach additional pages as necessary and print legibly.

**Jurisdiction of the Abatement Appeals Board (AAB):** Under Section 105A.2 of the San Francisco Building Code (SFBC), and Chapter 77 of the San Francisco Administrative Code, the AAB has the power to hear and decide appeals from Orders of Abatement and hear direct appeals pursuant to SFBC Section 102A.. The Board may "uphold, modify, or reverse such orders, provided that the public health, safety and public welfare are secured most nearly in accordance with the intent and purpose of this code and the San Francisco Housing Code." (SFBC 105A.2.3).

**Appellant Questionnaire & Declaration:** The undersigned appellant hereby appeals to the AAB and makes the following allegations in connection therewith:

- (1) The Order appealed from was made at a public hearing by the Director of Building Inspection, of the City and County of San Francisco, on \_\_\_\_\_.
- (2) The affected premises are located at \_\_\_\_\_, San Francisco. They contain \_\_\_\_\_ dwelling units and \_\_\_\_\_ guest rooms.
- (3) State in ordinary and concise language the specific nature of the action appealed from, together with any material facts relating thereto.  
\_\_\_\_\_  
\_\_\_\_\_
- (4) State the relief you seek and reasons why you claim the appealed action should be modified or reversed by this board. (Attach additional sheet(s) if necessary.).  
\_\_\_\_\_  
\_\_\_\_\_
- (5) Please state /check appellant's relationship to the property: ☐ property owner ☐ owner's agent ☐ attorney ☐ architect ☐ engineer ☐ contractor ☐ other \_\_\_\_\_  
If the appellant is an agent of the owner(s) of record, please attach documentation delineating representation

**Abatement Appeals Board (AAB) Tel. (628) 652-3517 - (628) 652-3426  
49 South Van Ness Avenue Suite 400, San Francisco, CA 94103**

Abatement Appeals Board Appeal Application Form

(6) **Appellant's Information:**

Print Appellant's Name: \_\_\_\_\_

Appellant's Mailing Address: \_\_\_\_\_

Phone Number: \_\_\_\_\_

Email Address: \_\_\_\_\_

- (7) Please state any work that you are aware of that was performed at the subject property without required ☐ building, ☐ plumbing, ☐ electrical permits:

\_\_\_\_\_

- (8) Did the current owner(s) of record own the property when this work was performed?  
☐ Yes ☐ No

- (9) If no, explain property purchases and approximate time when work was performed:

\_\_\_\_\_

- (10) Please state any work completed to correct the related code violations:

\_\_\_\_\_

- (11) What was the extent of the work performed? How much remains to be completed?

- (12) When was the work done? \_\_\_\_\_

- (13) Who did the work? \_\_\_\_\_

- (14) What is your occupation? If you are a co-owner, list all other co-owners and other occupants.

\_\_\_\_\_

- (15) Do you own other properties in San Francisco? ☐ Yes ☐ No

- (16) If yes, do any of these properties have active Department of Building Inspection code enforcement cases or Orders of abatement? ☐ Yes ☐ No

- (17) If Yes, please list Complaint Tracking or Order numbers

\_\_\_\_\_

- (18) Have you owned property in San Francisco before? ☐ Yes ☐ No

- (19) Are you aware that building, plumbing, and/or electrical permits may be required to abate the subject code violations? ☐ Yes ☐ No

- (20) Have you applied for the required permits to abate the subject code violations? ☐ Yes ☐ No  
If yes, please list permit applications:

☐ Building Permit Application Nos. \_\_\_\_\_

☐ Plumbing Permit Application Nos. \_\_\_\_\_

☐ Electrical Permit Application Nos. \_\_\_\_\_

- (21) What other permits have you been granted by the City? \_\_\_\_\_

- (22) What other facts do you want the Board to consider?

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

I declare under penalty of perjury and the laws of the State of California that the foregoing is true and correct.

Print Name: \_\_\_\_\_

Signature: \_\_\_\_\_

Date Signed: \_\_\_\_\_

Signatory is ☐ property owner ☐ agent ☐ other \_\_\_\_\_

**Instructions:** If you are requesting that the AAB take jurisdiction of an appeal after the requisite appeal period has expired please complete the following questionnaire:

**Jurisdiction of the Abatement Appeals Board & Filing Time Periods:** Pursuant to Chapter 77.5 of the San Francisco Administrative Code, the AAB has the power to grant jurisdiction after the appeal period has expired only upon a showing by the appellant that the delay in filing the appeal was due to misrepresentation, mistake, or other error on the part of the City. (Admin. Code Chp. 77.5(b)(2)). A Request for Jurisdiction shall be filled within fifteen (15) days from the date the Board Secretary has rejected an appeal, or fifteen (15) days after the appellant has actual or constructive knowledge of the right to appeal.

- (1) Date of Request: \_\_\_\_\_
- (2) Date AAB Secretary rejected appeal or date appellant made aware of right to appeal  
\_\_\_\_\_
- (3) Please explain why there was a delay in filing the appeal:  
\_\_\_\_\_  
\_\_\_\_\_
- (4) Please describe the alleged misrepresentation, mistake, or other error on the part of the City that caused the delay (attach additional sheet(s) if necessary):  
\_\_\_\_\_  
\_\_\_\_\_
- (5) What other facts do you want the Board to consider regarding the request for jurisdiction?  
\_\_\_\_\_  
\_\_\_\_\_

I declare under penalty of perjury and the laws of the State of California that the foregoing is true and correct.

Print Name: \_\_\_\_\_ Signature: \_\_\_\_\_

Date Signed: \_\_\_\_\_ Signatory is ☐ property owner ☐ agent ☐ other \_\_\_\_\_

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