



A. PROJECT INFORMATION

1. ZONING DEVELOPMENT REVIEW CASE INFORMATION

Application is: ☒ Development Project ☐ Protest Appeal

BDA Case Number: BDA-2025-02740

Project Description: Approve use of existing two-story structure fronting 121 44th Street as two-unit residence

Case Review Date: April 2025

2. SITE INFORMATION

Development Address: 121 44th Street

Parcel (s): 80-P-50

Zoning Designation: R1A-VH

Neighborhood: Central Lawrenceville

Registered Community Organization: NA

Date of Development Activities Meeting: NA

B. ZBA REQUESTS

Type of Request: Review Code Section: 911.02

Description: Approve use of existing two-story structure fronting 121 44th Street as a two-unit residence within R1A-VH district.

APPLICATION FOR
OCCUPANCY PERMIT AND/OR BUILDING PERMIT

OFFICE OF ZONING ADMINISTRATOR
7th Floor Public Safety Bldg.
First Avenue & Grant Street
Pittsburgh, Pennsylvania 15219

BUREAU OF BUILDING INSPECTION
5th Floor Public Safety Bldg.
First Avenue & Grant Street
Pittsburgh, Pennsylvania 15219

THE INFORMATION BELOW SHALL BE SUPPLIED BY THE APPLICANT AND SHALL BE TRUE AND CORRECT

DATE 6/14/88 PROPERTY ADDRESS 121 44TH ST. & 12144TH REAR
LOT AREA 1 SQ. FT. BLOCK/LOT NO. 9 WARD 9 TRACT 01
FULL NAME OF OWNER AS DEEDED (Last) JAMES T. + PAUL P. NOVICK
OWNER'S ADDRESS 5130 HOLMES ST
City PA State PA Zip Code 15201 Phone 781-5122(JN)
LESSEE () Name _____ Address _____
AGENT () City _____ State _____ Zip Code _____ Phone _____
CONTRACTOR () Name _____ Address _____
PURCHASER () City _____ State _____ Zip Code _____ Phone _____
DESCRIPTION OF WORK INVOLVED _____

DESCRIPTION OF CURRENT OR FORMER USE 2-STORY ONE FAMILY DWELLING (FRONT) AND 2-STORY ONE FAMILY DWELLING (REAR)
DESCRIPTION OF PROPOSED USE SAME

Height of Existing Main Structure -- Feet _____ Stories 2 With Half-Story ()
Height of Proposed Main Structure -- Feet _____ Stories 2 With Half-Story ()
Height of Proposed Extension or Addition -- Stories _____ Feet _____
Height of Proposed () or Existing () Accessory Structure -- Stories _____ Feet _____
Number of Dwelling Units -- Existing 2 Proposed 2
COMPOSED OF: Efficiency 1-Bedroom 2-Bedroom 3-Bedroom 4 or More
Existing Dwelling Units _____
Proposed Dwelling Units _____
Do You Propose to Have or Presently Have Lodgers () No () Yes/Describe _____

Number of Parking Stalls (Min. Size 8.5' x 19') Existing _____ Proposed _____
Number of Handicapped Stalls (13 1/2' x 19' deep) Existing _____ Proposed _____
Floor Area for Non-Residential Use .. Gross Area Existing _____ Proposed _____
Net Area Existing _____ Proposed _____
Number of Loading Spaces (Min. Size 10' x 25') Existing _____ Proposed _____
Number of Employees _____ Number of Seats in Church _____

STATEMENT OF TRUTH

Commonwealth of Pennsylvania)
County of Allegheny) Dependent, being duly sworn says that he is the
() Owner of record of the property for which this application is made, and that all the statements and data furnished with this application are true and correct.
() Authorized agent for the owner of record of the property for which this application is made and as such has express authority to bind such owner to all terms and conditions of any Occupancy Permit issued pursuant to this application, and that all the statements and data furnished with this application are true and correct.

Sworn to and subscribed before me this 14 day of June 19 88

Cathy L Spangler
Notary Public
My Commission Expires _____

James T. Novick
Signature

Zoning District R2 Historic District () Yes () No Zoning Fee \$ 70
Permit to Issue for: Occupancy () New Bldg () Ext/Add () Alter/Repair ()
USE () 1. New 2. Change 3. Enlargement 4. Continuation 5. Reinstatement
() 1. Conforming 2. Non-Conforming
STRUCTURE () 1. New 2. Change 3. Enlargement 4. Continuation 5. Reinstatement
() 1. Conforming 2. Non-Conforming: Use Section Ref:
Occupancy Permit to be Issued For: 2-STORY ONE FAMILY DWELLING (FRONT) AND 2-STORY ONE FAMILY DWELLING (REAR)

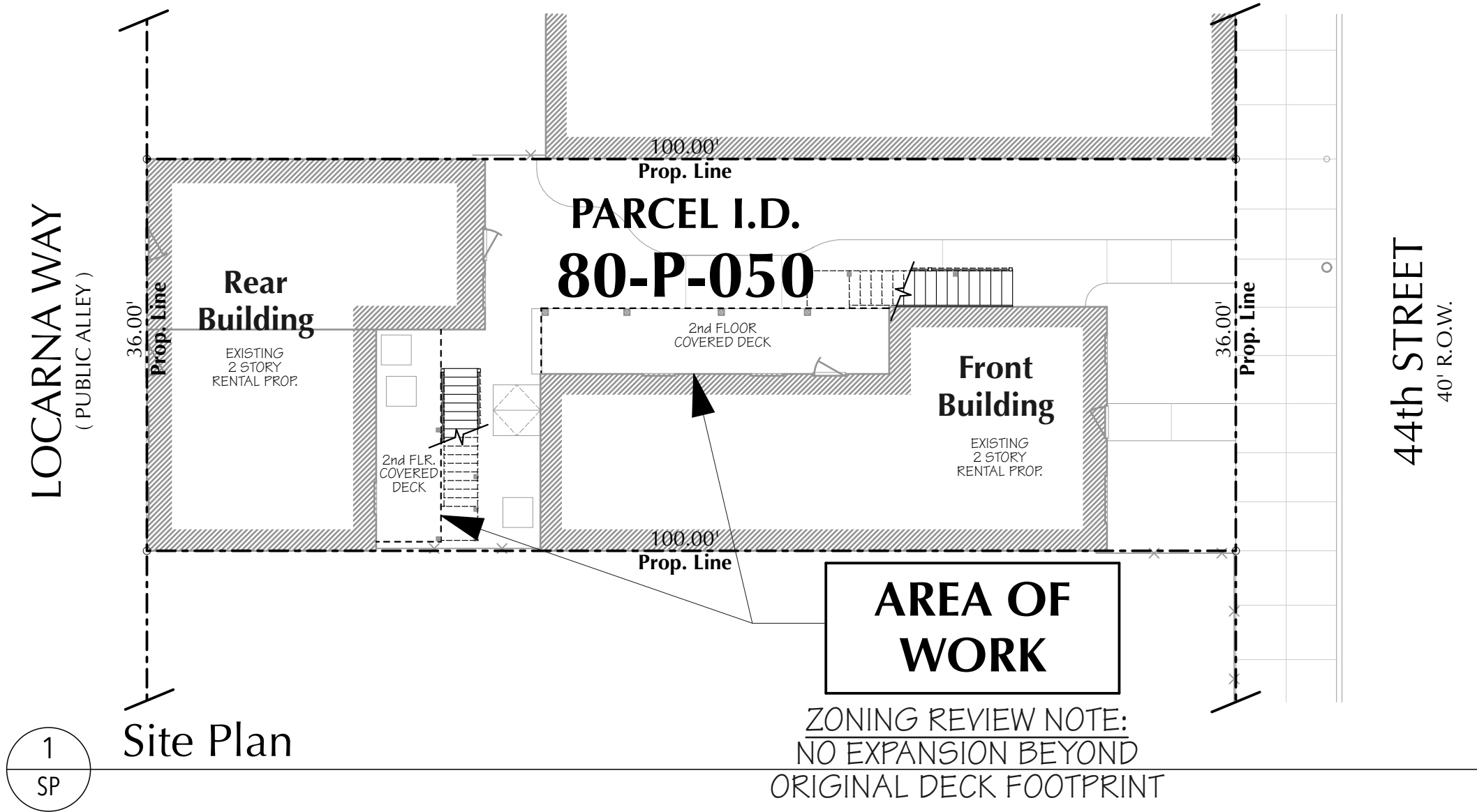
() This application is disapproved because of non-compliance with the Zoning Ordinance as described on the attached sheet.

BY: _____ FOR _____ DATE _____
Zoning Specialist Zoning Administrator

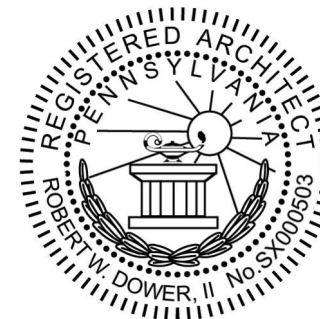
() This proposal has been authorized in whole or in part as:
() Administrator's Exception Section _____ Approved by _____ Date _____ Case Number _____
() Variance, Spec. Excep/Review _____ Administrator _____
() Bd of Adjustment _____

(X) This application is approved for Zoning () Subject to the following Conditions:

BY: Cathy L Spangler FOR _____ DATE 6/14/88
Zoning Specialist Zoning Administrator



Professional Seal:



Rob Dower

Project Name:

121 44th Street
Exterior Deck Repairs

Project No:

25108

Client:

Spaceflow, LLC
Jennelle Feghali
412.954.7944

Issue Date:

3.20.25 Issued for
Zoning Permit



Drawing No.