



# BUILDING SERVICES

- ALTERNATE MATERIALS, DESIGN AND METHODS OF CONSTRUCTION REQUEST
- CODE INTERPRETATION

Upon submittal of this request, a minimum plan check fee equal to the current hourly rate will be due. If the review time exceeds one hour then additional plan check fees will be assessed and payable prior to final inspection. Once the alternate material submittal or code interpretation has been reviewed and approved, documents shall remain on the job site along with the approved set of building plans.

Under authority of Section 104.1 and 104.11 of the California Building Code and Section R104.1 and R104.11 of the California Residential Code, the undersigned requests approval of alternate materials, design and methods of construction and code interpretation for:

**Project Name:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Permit Number:** \_\_\_\_\_ **Assessor's Parcel Number (APN):** \_\_\_\_\_

**Project Address:** \_\_\_\_\_

**Subject of Alternative or Interpretation:** \_\_\_\_\_

**Code Requirement** (specify code edition and section): \_\_\_\_\_

**Alternate or Interpretation Proposed:** \_\_\_\_\_

**Justification** (attach copies of any references, test reports, expert opinions, etc.): \_\_\_\_\_

**Requested by:**

Name: \_\_\_\_\_  Architect/Engineer  Contractor  Owner  
 Address: \_\_\_\_\_  
 Signature: \_\_\_\_\_ Telephone: \_\_\_\_\_

**(Staff Use Only)**

Building Inspector / Plans Examiner Comments: \_\_\_\_\_

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

Recommend Approval  Recommend Denial

Supervising Building Inspector Comments: \_\_\_\_\_

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

Recommend Approval  Recommend Denial  Fee Amount \$ \_\_\_\_\_ Paid: Yes  No

**The Alternate Materials, Design, and Methods of Construction, Code Interpretation herewith described has been:**

Approved  Approved w/ Conditions  Denied

Building Services Division Manager Comments: \_\_\_\_\_

Building Services Division Manager	Date	Fire Marshal (if applicable)	Date
Jeff Thomas			