CITY OF TEMPE Community Development Building Safety Division 31 East 5th Street Tel: 480-350-8341 Fax: 480-350-8677

REQUEST FOR MODIFICATION / ALTERNATE MATERIALS DESIGN OR METHOD OF CONSTRUCTION



| Date: | | | | |
|---|---|-----------|---|--|
| Project Name: | | | DS# | |
| Project Address: | | | | |
| Applicant (| (print): | | | |
| Applicant A | Address: | | | |
| City State | | State | Zip | |
| Applicant's Relationship to Project: | | | | |
| Applicant's | s Email Address: | | | |
| Applicant Phone: | | Fax Num | Fax Number: | |
| Attach Re | equest with AT LEAST the following info | ormation: | | |
| 1) Specify the code, code section and the prescriptive requirements related to this request. | | | | |
| 2) State special individual reasons why conformance with prescriptive requirements is impractical. | | | | |
| 3) Describe the proposed modification or alternative. | | | | |
| 4) Explain how the proposed modification or alternative is equivalent to the prescriptive requirements of the code and how it will not lessen health, accessibility, life and fire safety, or structural code requirements. Describe how is it at least the equivalent of that prescribed in the technical codes for quality, strength, effectiveness, fire resistance, durability and safety. | | | | |
| 5) Attach supporting documents, tests results, research reports, etc. | | | | |
| | | | | |
| | Applicant Signature | | Applicant Title | |
| For Official | | ••••• | ••••••••••••••••••••••••••••••••••••••• | |
| | PPROVED | Г | RESIDENTIAL REQUEST - \$205 | |
| AF | PPROVED WITH STIPULATIONS | | COMMERCIAL REQUEST - \$410 | |
| DE | ENIED | | PAID | |
| П м | OD. NO | | | |
| Date | | | Building Official | |