

**TYPE OF REQUEST:**
 Alternative Materials     
  Designs     
  Methods     
  Special Approval

**ALL ITEMS TO BE FILLED IN COMPLETELY**

Date of Request:	Project Name:
Permit #:	Address:

**APPLICANT STATEMENT: STATE THE REQUIREMENTS OF THE CODE FROM WHICH A USE OF ALTERNATIVE MATERIALS AND METHODS IS SOUGHT.**

Code:	Section:

**STATE THE PROPOSED ALTERNATIVE TO THE CODE THAT WILL PROVIDE EQUIVALENT PROTECTION TO THE PUBLIC:**


Applicant Signature:	Phone:
Print Name:	

**NOTE TO APPLICANT**

- Please substantiate claims for alternative systems in construction. You may provide testing documentation or proof in writing from an approved agency in support of claims when required by the Building Official.
- Any alternative material or method must be at least equal to and meet the intent of the standards for the corresponding use intended.
- Materials and assemblies shall be tested and certified in accordance with 104.11 FBC.
- Attach any test results received from a third party agency.

 APPROVED     
  APPROVED WITH COMMENTS     
  DENIED


Building Official:	Date:
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