

DO NOT FAX THIS FORM, ORIGINAL SIGNATURE REQUIRED. THANK YOU.

**Palo Alto Fire Department – Bureau of Fire Prevention**

**APPLICATION for the USE of ALTERNATE MATERIAL, DESIGN  
or METHOD OF CONSTRUCTION**

The undersigned hereby requests approval of the following:

Alternate Material                       Alternate Design                       Alternate Method of Construction

Under the authority of:

2001 CFC Section 103.1.2

**APPLICANT:** \_\_\_\_\_ **ASSOCIATED PERMIT #:** \_\_\_\_\_

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

**Signature:** \_\_\_\_\_ (Required)

Business Name: \_\_\_\_\_

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

Telephone(s): \_\_\_\_\_

**SITE:**  
Project Name \_\_\_\_\_

Project Address \_\_\_\_\_

Describe Use \_\_\_\_\_

**REQUEST:**  
Subject of Alternative \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Code Requirement \_\_\_\_\_

\_\_\_\_\_

(Specify code, edition and section(s) you are unable to comply with.)

Alternate Proposed \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**JUSTIFICATION:** (Attach additional documents/pages if necessary)  
Justification \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

<b><u>ACTION BY OFFICE:</u></b>		
<b>Recommendation:</b>	<input type="checkbox"/> Approve	<input type="checkbox"/> Deny
		<input type="checkbox"/> Approve as Revised
Fire Marshal _____	Date _____	

Special Conditions: \_\_\_\_\_

\_\_\_\_\_