



Application for Alternate Material, Design, or Method of Construction

Street Address of Subject Property:

Permit Number:

The undersigned hereby requests the following:

- | | |
|----------------------------------------------|------------------------------------------------------------|
| <input type="checkbox"/> Alternate Material* | <input type="checkbox"/> Alternate Method of Construction* |
| <input type="checkbox"/> Alternate Design* | <input type="checkbox"/> Modification of Technical Codes* |

*Under provisions set forth within Section 104 of CBC and CRC

Codes Affected:

- | | |
|-------------------------------------|-------------------------------------|
| <input type="checkbox"/> Building | <input type="checkbox"/> Plumbing |
| <input type="checkbox"/> Electrical | <input type="checkbox"/> Mechanical |

Specific sections involved:

Code Edition:

Brief Description of Request:

Applicant's Name:

Phone Number:

Applicant's Address:

In order to grant the request, the Building Official must find that the material, design, method of work offered and/or modification is, for the purpose intended, at least equivalent of that prescribed in the above technical codes in quality, strength, effectiveness, durability, safety and/or fire safety.

Please supply such information to support your request.

Quality

Justification:

Strength

Justification:

Effectiveness

Justification:

Durability

Justification:

Safety, other than fire safety

Justification:

Fire Safety

Justification:

Additional evidence or proof in support of the request:

Name (Please Print):

Signature:

Contact Information

Permit Center: 408-615-2420 | **Email:** permitcenter@santaclaraca.gov

Building Division: 408-615-2440 | **Email:** building@santaclaraca.gov

For Office Use Only

Building Division

Building Plan Check Fee

Fire - Hazmat

- [Current Building Fee Schedule](#)

In accordance with Section 104 of the California Building Code and/or California Residential Code, the foregoing application and accompanying material has been reviewed and accepted.

Fire Prevention and Hazmat Division:

Date:

Building Official:

Date: