



**CITY OF CALISTOGA
Planning and Building Division**

Please fully complete and submit **two (2)** copies of all documents, including plans showing the proposed alternate. Under the authority of the CBC, CRC, CPC, CMC, and CEC, the undersigned requests approval of alternate materials and methods of construction for:

PROJECT INFO

Project Name and Address:			Permit No:
Occupancy Group:	Type of Construction:	Fire Sprinklers (Y/N):	No. of Stories:
Total Floor Area:	Floor Area Per Floor:	Tenant Floor Area:	
Describe Use:			

SUBJECT OF ALTERNATIVE

(Separate forms should be filled out for each different item):

CODE REQUIREMENT

(Specify code edition and section):

ALTERNATE PROPOSED

(Attach detail if necessary):

JUSTIFICATION

(Attach copies of any reference, test reports, expert opinions, etc. The Building Official may require that a consultant be hired by the applicant to perform test, research and analysis and submit a full report of evaluation to the Planning, Building & Environmental Services Department; Building Division for consideration and approval):

REQUEST BY *(Architect or engineer must wet stamp and sign below)*

Owner: (Print Name)	(Signature)	
Architect:		
Engineer:		
Contractor:		
Contact Name:	Contact Phone:	Request Date:

For Office Use Only		
CBO Signature:	Approved: _____ Denied: _____	
Date:		