



**Town of Tiburon**

Community Development Department-Building Division

1505 Tiburon Boulevard

Tiburon, California 94920

(415) 435-7380

[Building@townoftiburon.org](mailto:Building@townoftiburon.org)

**Alternative Materials, Design, and Methods of Construction Request Form**

In accordance with Section [A] 104.11 of the California Building Code, Section R 104.11 of the California Residential Code, Section 302.2 of the California Mechanical Code, Section 301.3 of the California Plumbing Code, and Articles 89.102.3 & 90.4 of the California Electrical Code, the undersigned requests approval of alternative materials and methods of construction for:

Project Name & Permit Number: \_\_\_\_\_

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

Subject of Alternative (separate forms must be completed for each different item): \_\_\_\_\_

\_\_\_\_\_

Alternate proposed: \_\_\_\_\_

\_\_\_\_\_

Justification: State evidence or proof that the alternate material, alternate design or method of construction proposed is at least the equivalent of that required in the current codes in suitability, strength, effectiveness, fire resistance, durability, safety, and sanitation (attach copies of any reference, test reports, expert opinions, etc.): \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

*Requests for Alternative Materials, Design, and Methods of Construction will be reviewed at the hourly rate of \$75, with a 1 hour minimum in accordance with the Building Division fee schedule.*

Requested by: \_\_\_\_\_

Affiliation with Project: \_\_\_\_\_

*Print Name*

*Signature*

Contact Information: \_\_\_\_\_

**Staff Findings:** \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Approval Recommended:

Not Recommended:

Staff (Reviewer): \_\_\_\_\_ Date: \_\_\_\_\_

Approval Recommended:

Not Recommended:

Building Official: \_\_\_\_\_ Date: \_\_\_\_\_