

**ATTACHMENT A**



**DEPARTMENT OF BUILDING INSPECTION**  
**City & County of San Francisco**  
**49 South Van Ness Ave, 5th Floor, San Francisco, California 94103**

**REQUEST FOR APPROVAL OF LOCAL EQUIVALENCY FOR MODIFICATION  
OR ALTERNATE MATERIALS, DESIGN OR METHODS OF CONSTRUCTION**

DATE SUBMITTED \_\_\_\_\_

[Note: This form shall be recorded as part of the permanent construction records of the property]

If no permit application has been filed, a Preapplication Review Fee is required for review of a request for local equivalency or modification, per SFBC Table 1A-B, Item 5. Additional fees may be required by Fire Department and other City review agencies.

If a permit application has been filed, no additional fees are required for this review.

Permit Application # \_\_\_\_\_

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

Block and Lot: \_\_\_\_/\_\_\_\_ Occupancy Group: \_\_\_\_\_ Type of Construction: \_\_\_\_\_ No. of Stories: \_\_\_\_\_

Describe Use of Building \_\_\_\_\_

Under the authority of the San Francisco Building Code, Sections 104A.2.7 and 104A.2.8; the San Francisco Mechanical Code, Section 302.2; the San Francisco Electrical Code, Section 89.117; and the San Francisco Plumbing Code, Section 301.3; the undersigned requests modifications of the provisions of these codes and/or approval of alternate materials, designs or methods of construction. Two copies of supporting documents, including plans showing the proposed modifications or alternate materials, design or methods of construction, are attached.

Regular Code Requirement (specify Code and Sections)

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_



