

# COUNTY OF MONTEREY

## HOUSING AND COMMUNITY DEVELOPMENT



Planning – Building - Housing  
 1441 Schilling Place, South 2nd Floor  
 Salinas, California 93901-4527  
 (831) 755-5025

[Please Review Instructions First.](#)

- Request For Modification Of Code
- Request For Alternate Material, Design Or Method Of Construction
- Request For Soils Waiver

To apply for this request, complete sections 1, 2, & 3

SITE ADDRESS		APN	
CITY	ZIP	CROSS STREET	
Owner.....		PC #: .....	Type: .....
Address.....City/Zip .....		Permit #: .....	Stories: .....
<b>1</b>	Email.....Phone.....	PA #: .....	Occupancy: .....
Applicant.....Title.....		Div./Dept. ....	Occ. Load: .....
Address.....City/Zip .....		Job Status: .....	Use of Bldg:.....
Email.....Phone.....			

<b>2</b>	<b>REQUEST:</b> For code modifications, please state the applicable code requirement and the extent of relief desired. For alternate requests, state the type of system proposed and design methods. Submit plans if necessary to illustrate request. Additional sheets or data may be attached.

<b>3</b>	<b>JUSTIFICATION/FINDINGS OF EQUIVALENCY:</b> For code modifications, applicant shall demonstrate that special, individual reasons exist that make compliance with the strict letter of the ordinance impractical and that equivalency is provided. For alternate requests, applicant shall demonstrate suitability, strength, effectiveness, fire resistance, durability, safety and sanitation that is equivalent to the code for a similar use.	Code Section(s):
Attach additional sheets if necessary.		

Petitioner's Signature: .....	Position:.....	Date: .....	Reviewed By:.....	Date:.....
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**DEPARTMENT ACTION:** After determination, copies to: 1) applicant, 2) permit file

The Request is: <input type="checkbox"/> GRANTED <input type="checkbox"/> DENIED	Dept. Comments:
CONDITIONS OF APPROVAL:	
	No. of Items: .....
	Fee Due: \$.....
	Date Paid: .....
	Receipt No.: .....
	Processed by: .....

Building Official:.....Print Name:..... Date: .....