Alternate Method or Material Type: PUBLIC WORKS

Subtype: NON-RESIDENTIAL

City of Tukwila - Permit Center 6300 Southcenter Blvd, Suite 100, Tukwila, WA 98188 Tukwila Permit Center



Request for Alternate Method or Material

Permit Number:				
Site Address:				
Applicant:		Phone:		
Signature:		Date:		
Plans Examiner or Inspe	ector who identified the requ	irement you are requesting an alternate for:		
applicable codes and sta		ler an alternate approach to compliance with the tive is intended to achieve an equivalent level of prescriptive provisions.		
Section:	of the	Code.		
Proposed Alternate: (Inc	clude drawings to clearly illustr	rate request, before and after if appropriate)		

Every effort will be made to provide a verbal interpretation within one working day upon receipt of this request. Appeals from accessibility requirements do not relieve applicant from the obligations to provide access under the Federal ADA laws.

Request for Alternate Method or Material

(Staff Use Only)

Date Received:					
Evaluation of Proposal b	y Plans Examii	ner and/or li	nspector:		
Suitability:					
Strength:					
Effectiveness:					
Fire Resistance:					
Durability:					
Safety:					
Sanitation:					
Recommended Action:	Approve	Deny	by:		
Conditions:					
Additional Information on I	Proposed Altern	nate:			
Supervisor Concurrence:_				Date:	