



**COUNTY OF LOS ANGELES  
FIRE DEPARTMENT  
FIRE PREVENTION DIVISION**

Date: \_\_\_\_\_

8/15/22

**REQUEST FOR MODIFICATIONS OR ALTERNATE MATERIALS AND  
METHODS REVIEW**

*Building Code Sections 104.2.7-Modifications and 104.2.8-Alternate Materials, Design, and Methods of Construction  
Fire Code Sections 104.8 – Modifications and 104.9 – Alternate Materials and Methods*

**SECTION 1 – APPLICANT**

**INSTRUCTION:** Applicants are Project Owners or Owner’s designee (with written authorization from Project Ownership accompanying this form). Please complete SECTION 1 and submit this form and all supporting documents (building plans, calculations, specifications, test reports, etc.) to the applicable Fire Prevention Engineer or Fire Inspector for review of this document. An Alternate Materials and Methods Review fee is required upon submittal and prior to the review.

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

City: \_\_\_\_\_ Incorporated  Unincorporated Area

Owner: \_\_\_\_\_ Applicant’s Name: \_\_\_\_\_

Owner’s Address: \_\_\_\_\_

Applicant’s Contact Phone Number: (\_\_\_\_) \_\_\_\_\_ Applicant’s Email: \_\_\_\_\_

Plan-check Number: \_\_\_\_\_ Fire Prevention Office: \_\_\_\_\_

Type of Construction: \_\_\_\_\_ Occupancy: \_\_\_\_\_ Stories: \_\_\_\_\_ Fire Sprinklered?  YES  NO

Is this referral for:

- Modifications       Alternate Materials       Alternate Methods of Construction  
or Protection

Project description:

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

Modification Request - Explain the practical difficulties involved in carrying out the provisions of the Code and proposed application. –OR– Alternate Request - Explain the materials, designs, or methods of construction not specifically prescribed in the Code and proposed application. (Attach additional documents as necessary):

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

Applicable Code References: (List all applicable Code Sections)

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

Justification – Demonstrate conformity and equivalence with that prescribed in the Code.  
(Attach additional documents as necessary):

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

**SECTION 2 – FIRE PREVENTION UNIT SUPERVISOR**

INSTRUCTION: Please verify Alternate Materials and Methods Review fee is paid. Ensure the submittal package is complete and all pertinent information is included. Complete SECTION 2 and forward this form and all supporting documents to the Section Chief.

Reviewed By: \_\_\_\_\_ Date: \_\_\_\_\_  
(print name)

Comments: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**SECTION 3 – SECTION CHIEF**

Reviewed By: \_\_\_\_\_ Date: \_\_\_\_\_  
(print name)

Comments: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**SECTION 4 – FINAL DETERMINATION:** This request is:

- APPROVED** (Provide Conditions of Approval, if any)      **APPROVED BY:** \_\_\_\_\_  
(print name)
- NOT APPROVED** (Provide comments, if any)      **NOT APPROVED BY:** \_\_\_\_\_  
(print name)

Comments: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**IF APPROVED, ROUTE TO:** City Building Official, in the City of: \_\_\_\_\_

**SECTION 5 – USE**

INSTRUCTION: To Contractors: Conditions of approval must be incorporated into the plans by attachment to the plans or electronically scanned into future plan submissions. All Approvals must be presented to Department Inspectors at the time of the project inspection.