



CHICO FIRE DEPARTMENT

P.O. BOX 3420
Chico, California 95927
(530) 897-3400

Request for Alternate Means of Protection or Methods of Construction

Date Submitted: _____ Planning/Building Dept. Appl. Number: _____

In accordance with section §104.9, California Fire Code, the undersigned requests approval of alternate means of protection for:

Project Name: _____

Project Address: _____

Subject of Alternative (separate forms must be completed for each different subject):

Code Requirement Requesting Mitigation For (specify code edition and section):

Proposed Mitigations (may also attach separate justifying documents):

Alternate Requested By: _____
Print Name Signature

Requestor Address: _____

Requestor Phone: _____ **Email:** _____

For Staff Use Only

Date Reviewed: _____ **AMP #:** _____

Findings: _____

Approved [] **Denied** [] **Review Fee Paid:** _____

Fire Marshal: _____