CITY OF BAKERSFIELD

Building Department
Phil Burns ▪ Building Director
1715 Chester Avenue, Bakersfield, Ca 93301
(661) 326-3720

CASE NUMBER: _____

PROCESSING FEE: $100/CASE AND $55/HOUR FOR ADDITIONAL REVIEW/ANALYSIS

☐ REQUEST FOR MODIFICATION OF BUILDING STANDARDS (CBC APPENDIX SECTION 104.10)

☐ REQUEST FOR ALTERNATE MATERIAL OR METHODS OF CONSTRUCTION (CBC APPENDIX SECTION 104.11)

FOR STAFF USE ONLY

Plan Check #_____ # of Stories_____

Occupancy Classification_____

Construction Type_____

Distribution:

☐ Owner ☐ File

☐ Petitioner ☐Plan Check Engineer

For above requests, complete Section 1, 2, & 3 by *Printing in ink or typing*

1. JOB ADDRESS

Site Address:	
Owner:	**Petitioner:**
Address:	**Address:**
City: **State:** **Zip:**	**City:** **State:** **Zip:**
Daytime Phone ( )	**Daytime Phone ( )**

2. REQUEST (Submit plans if necessary to illustrate request. Additional sheets of data shall be attached).

3. PETITIONER'S JUSTIFICATION/ EVIDENCE OF EQUIVALENCY CODE SECTIONS

X _____	_____	_____
Petitioner's Signature	**Title**	**Date**

FIRE DEPARTMENT ACTION (IF NECESSARY):

The request is:	☐ **Approved**	☐ **Disapproved**	☐ **Approved with Conditions**
By:		**date:**	
Conditions of Approval or Reasons for Denial:			

BUILDING DEPARTMENT ACTION:

The request is:	☐ **Approved**	☐ **Disapproved**	☐ **Approved with Conditions**
By:		**date:**	
Conditions of Approval or Reasons for Denial:			
X_____	_____	_____	
Building Director's Signature	**Title**	**Date**	

*Approval is applicable to this case only and is non-binding to any similar projects under construction or contemplated in the future.