



Building Safety Division  
 City of Bend  
 (541) 388-5580  
 building@bendoregon.gov  
 710 NW Wall Street, Bend OR 97703

## Request for Modification or Alternate Method of Compliance

This submittal form is to be completed as part of your application with the City of Bend. *Download this form before completing fillable fields*, then upload with your application through the Online Permit Center at [www.bendoregon.gov/permitcenter](http://www.bendoregon.gov/permitcenter).

NOTE TO APPLICANT: Section 104 of the Oregon Structural Specialty Code (as well as corresponding sections of all other Oregon Specialty Codes) grant the Building Official the ability to consider alternatives to or modifications of the code in unusual cases. It is the policy of the City of Bend that the use of these Sections of the Code be limited, and that individual cases be considered carefully within the context of the requirements of these provisions. Please attach supporting documentation as needed. This application is specific to and limited to the project identified below.

|   |             |              |   |                            |                    |
|---|-------------|--------------|---|----------------------------|--------------------|
| Request is for: <input type="checkbox"/> Alternate Materials <input type="checkbox"/> Design Method <input type="checkbox"/> Alternate Methods of Construction <input type="checkbox"/> Alternate Equipment |             |              |   |                            |                    |
| Address:  |             | Use:         | Type of Construction:   |                            |                    |
| Suite #:  | Building #: | #of Stories: | Sprinkled: <input type="checkbox"/> YES <input type="checkbox"/> NO | Total Sq. Ft. of Building: | Sq. Ft. Per Floor: |
| Name of Building:   |             | Date:        | Contact Person:   |                            |                    |
| Building Owner:   |             |              | Mailing Address:  |                            |                    |
| Permit # (if applicable)  |             |              | Contact Phone:  |                            |                    |
|   |             |              | Email:  |                            |                    |
| Check All Applicable: <input type="checkbox"/> Building <input type="checkbox"/> Electrical <input type="checkbox"/> Mechanical <input type="checkbox"/> Plumbing <input type="checkbox"/> Energy Fire      |             |              |   |                            |                    |



### Accommodation Information for People with Disabilities

To obtain this information in an alternate format such as Braille, large print, electronic formats, etc. please contact the Building Safety Division at building@bendoregon.gov or (541) 388-5580; Relay Users Dial 7-1-1.

Applicable code sections and code language (*Attach additional documentation if needed*):

Proposal description – Explain how it is equivalent or your practical difficulties in carrying out the provisions of this code. (*Print or type: Attach documentation or use back of this form if needed*):

Applicant’s agreement to abide by conditions:

The undersigned expressly acknowledges and agrees that acceptance of this application and any subsequent issuance of a permit(s) based upon the proposed alternative(s) or modification(s), has been made subject to certain conditions which the Building Official deems necessary. The undersigned agrees to comply strictly with all conditions imposed by the Building Official. With respect to all permit(s) issued based upon any alternative to prescriptive code language of the Oregon Specialty Codes, the undersigned’s failure to comply strictly with all conditions imposed by the Building Official is granting any permit(s) pursuant to this application will render any right to proceed with construction, occupancy or use of any property or premises pursuant to said permit void, and may subject the undersigned to revocation of said permit issued in connection with this application.



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The undersigned acknowledges that this alternate proposal application, if approved, shall apply only to the project for which that alternate was requested, Future projects requiring consideration for alternate materials, design and/or methods shall be reviewed on a case-by-case basis.

**Agreed and accepted:**

**Owners signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Applicants' signature / title:** \_\_\_\_\_ **Date:** \_\_\_\_\_  
(if applicant is not the owner or the owner's architect or engineer)

**Building Official:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Instructions for Submitting for Review:**

Alternate methods are reviewed as a separate permit prior to the submittal of the standard plan submittal for review.

1. Download a complete application sections for this document
2. Open your City View Portal account: <https://cityview.ci.bend.or.us/Portal/>
3. Click "Apply" under the "Building, Permanent Signs & SDC Estimates" section
4. For the "Application Type" select "Other Building Safety Reviews/Permits"
5. Complete other applicable sections then choose "Next Step: Permit Type"
6. On next screen, check box for "Other Building Reviews/Permits/Meetings"
7. Click "Next Step: Work Items"
8. Complete next steps until you get to step 7 "Upload Files"
9. Upload completed form into the "Alternate Methods and Materials Proposal" section



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