

## Application for an Alternative Solution

When a design differs from the acceptable solutions of the Building Code then it should be treated as an Alternate Solution. A proponent of the Alternate Solution must demonstrate that the Alternate Solution addresses the same issues as the applicable acceptable solution in the BC Building Code. These usually require a report from a registered architect or professional engineer. For more information about building requirements, visit [www.portcoquitlam.ca/business](http://www.portcoquitlam.ca/business).

### TO BE COMPLETED BY APPLICANT

*I/We hereby make application and provide drawings under the provisions of the pertinent Bylaws for permission to construct, repair or alter the following building or structure and agree to comply with all requirements of the Bylaws and to indemnify and keep harmless the City against all claims, liabilities, judgments, costs, and expenses of whatever kind, which may in any way accrue against the said City in consequence of, and incidental to, the granting of this Permit, if issued.*

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

Building Site Address: (include postal code) \_\_\_\_\_

Partial Legal Description: Lot # \_\_\_\_\_ Plan # \_\_\_\_\_

I/We hereby make application under the British Columbia Building Code for an alternative solution to:  
BUILDING CODE/REGULATION REFERENCE:

Property Owner: \_\_\_\_\_

Owner Address (incl. postal code): \_\_\_\_\_

Owner Email: \_\_\_\_\_ Owner Phone: \_\_\_\_\_

Registered Professional: \_\_\_\_\_

Registered Professional Address (incl. postal code): \_\_\_\_\_

Registered Professional Email: \_\_\_\_\_ Registered Professional Phone: \_\_\_\_\_

**Applicant (Primary Contact)** ☐ Owner (info above) ☐ Registered Professional (info above)

Applicant Name: \_\_\_\_\_

Applicant Address (incl. postal code): \_\_\_\_\_

Applicant Phone: \_\_\_\_\_ Applicant Email: \_\_\_\_\_

## OFFICE USE ONLY

Application # \_\_\_\_\_ Fee Paid: \_\_\_\_\_ Receipt: # \_\_\_\_\_  
☐ Cheque    ☐ Cash    ☐ Visa    ☐ MC    ☐ AMX    ☐ Interac

## APPLICANT ACKNOWLEDGEMENT

*The undersigned make this application to the Director of Development Services, have fulfilled the complete application requirements, and agree to pay any additional costs incurred by the City for services in processing the application.*

Authorized Signature: \_\_\_\_\_ Date: \_\_\_\_\_  
Print Name: \_\_\_\_\_

*Note: Any documentation of information relating to the application that is in the custody or control of the City is subject to the Freedom of Information and Protection of Privacy Act (B.C.)*