

ANNE ARUNDEL COUNTY DEPARTMENT OF
INSPECTIONS AND PERMITS

2664 Riva Road
Annapolis, MD 21401

REQUEST FOR MODIFICATION

Date: _____

Location Address: _____

Permit Number(s): _____

Applicant: _____

Mailing Address: _____

Inspector/Plan Reviewer: _____

The Director of Inspections and Permits has the authority to approve certain modifications to construction codes and accept alternative materials and methods of construction, provided the intent of the code is maintained. Since the codes specify minimum requirements, modifications are considered only for exceptional circumstances. Modifications which alter any fire or life safety requirements, or reduce any structural loads or working stresses, or has the potential to cause environmental harm will not be considered. Further, modifications for items which arise as a result of preventable or correctable error will not be granted.

In order for a modification to be granted, the following information must be provided. Additional supporting documentation, drawings, details, and produce literature is recommended.

1. Nature of Request - List applicable code requirements and proposed modification.
2. Describe the unique or exceptional circumstances which are involved in this request.
3. Cite any hardship (other than financial) resulting in strict application of the code.

4. Describe any alternative designs or compensatory provisions.

5. Explain why this request is not detrimental to the overall safety of this structure and its occupants.

6. Explain why this request is not detrimental to the integrity of the approved grading permit and plans and will not have a negative impact on the environment.

NOTE: By acceptance of this modification, if granted, you are indemnifying and holding harmless the County, its officers, and any employees from any suits, actions, or liabilities which may occur as a result of the granting of this modification. (Modification for residential construction must be acknowledged below by the owner or buyer of the property.)

Owner

Builder or Authorized Agent

STATE OF MARYLAND, COUNTY OF _____ to wit, THIS CERTIFIES, that the State of Maryland, personally appeared _____ and made oath in due form of law that the information provided herein is true to the best of his/her knowledge.

My commission expires: _____

Notary Public Signature

Notary