

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

File No: \_\_\_\_\_

Coordinating Registered Professional (CRP)  
(name, Phone No. & email address)

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Alternative Solution RP  
(name, Phone No. & email address)

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Project Address: \_\_\_\_\_

Project Name: \_\_\_\_\_

Code Edition \_\_\_\_\_

Reference Article(s): \_\_\_\_\_

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(affix Alternative Solution RP Seal)

**Alternate Solution Synopsis (Basic Description Only):**

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**THIS AREA FOR OFFICE USE ONLY**

## AGREEMENT OF ACCEPTANCE

**City File No.** \_\_\_\_\_ **Conditions on Accepting Alternative Solution**

Acceptance of this Alternative Solution is site specific to this project and will not be considered to establish a precedent or acceptance for the use in any other project or part thereof.

Acceptance of this Alternative Solution is subject to the following:

1. Receipt of letter of Commitment for Field Review of the Alternative Solution features,
2. Verification of Review of all drawings and features applicable to the Alternative Solution,
3. Submission of items 1 & 2 prior to Building Permit issuance,
4. Review and stamping of all applicable shop drawings prior to submission for sub-trade permits, and
5. A final Letter of Compliance verifying the Alternative Solution has been completed in accordance with the Design and Report sealed by the RP of record and initialed by the CRP (Included in Occupancy Application Package).

Accepted: \_\_\_\_\_

Chief Building Official

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