



# City of Henderson

Building and Fire Safety Department  
240 Water Street P.O. Box 95050  
Henderson, Nevada 89009-5050

Building (702) 267-3650

Fire Safety (702) 267-3630

## REQUEST FOR CODE MODIFICATION

Permit Number: \_\_\_\_\_

### PRACTICAL DIFFICULTIES (Meets Intent of Code)

APPROVED

DISAPPROVED

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

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

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

Owners Name: \_\_\_\_\_

Owners Address: \_\_\_\_\_

#### INTRODUCTION:

Type of Construction: \_\_\_\_\_ Occupancy Classification: \_\_\_\_\_

Number of Stories: \_\_\_\_\_ Size of Building: \_\_\_\_\_ square feet

Sprinkler - Hazard Classification: \_\_\_\_\_ Design Density: \_\_\_\_\_

Permit Number(s) to be referenced: \_\_\_\_\_

#### REQUEST:

Code and Code Section Affected:

Code Edition: \_\_\_\_\_ Code Title: \_\_\_\_\_

Section Number: \_\_\_\_\_ Section Title: \_\_\_\_\_

Code Requirement:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

What is the special individual reason that makes the strict letter of the code impractical?

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Modification Being Requested: (This is for the request only. Provide justification in the next portion)

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

# REQUEST FOR CODE MODIFICATION

Page 2 of 2

JUSTIFICATION: (Provide supporting data, technical reports, data sheets, modeling, calculations, sketches, drawings, etc. Upload documents with this form to the permit application.)

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**SUBMITTED BY:** (If prepared by a registered professional provide a "wet seal")

Signature \_\_\_\_\_ Date \_\_\_\_\_

**Name** \_\_\_\_\_ **Title** \_\_\_\_\_

Company Name: \_\_\_\_\_

Company Address: \_\_\_\_\_

Company Telephone: \_\_\_\_\_ Fax: \_\_\_\_\_

**Owner or Authorized Representative's acknowledgement of this request**

Signature \_\_\_\_\_ Date \_\_\_\_\_

**Name** \_\_\_\_\_ **Title** \_\_\_\_\_

Company Name: \_\_\_\_\_

Company Address: \_\_\_\_\_

Company Telephone: \_\_\_\_\_ Fax: \_\_\_\_\_

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**DETERMINATION:** (Mark check box on page one)

Reviewed By:

Name \_\_\_\_\_ Title \_\_\_\_\_ Date \_\_\_\_\_

Conditions of approval:

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