



Community Development Department
Building Inspections Division
21 S. Bruffey Street
P.O. Box 869
Salem, VA 24153
Phone: 540-375-3036 Fax: 540-375-4042

CODE MODIFICATION REQUEST FORM

PERMIT # _____

Date: _____

Applicant Name: _____

Applicant Address: _____

Email: _____

Phone: _____

In accordance with the Virginia Statewide Building Code (VUSBC) 2012 Section 106.3 Issuance of Modifications, I desire to apply for a modification to one of the provisions of the code. I understand that the Building Official may, but is not required, to approved this modification provided that the spirit and functional intent of the VUSBC are observed and public health, welfare and safety are assured. Regardless of the Building Officials decision, this application & subsequent written decision will be made a permanent record of the City of Salem Building Inspections Division.

I hereby request to modify the Virginia Uniform Statewide Building Code in accordance with the following:

Property Owner(s) Name: _____

Property Address: _____

Occupancy Group: _____ Construction Type: _____

Code/Edition/Year Subject to Modification: _____

Section/Subsection: _____

Problem: _____

Proposed Alternative(s): _____

I have reviewed the VUSBC requirements for code modifications. I understand that this request applies only to this specific situation and permit, and does not apply to other situations and permits. This modification is subject to any conditions contained below.

Applicant Signature: _____

Applicants please provide any information or relevant evidence for your modification request.

BUILDING DEPARTMENT ACTION:	
<input type="checkbox"/> Approved	<input type="checkbox"/> Not Approved
Building Official Signature: _____	
Troy D. Loving, CBO	