



STATE OF IDAHO
DIVISION OF OCCUPATIONAL AND PROFESSIONAL LICENSES
11341 W CHINDEN BLVD BLDG 4
BOISE ID 83714
elevators@dopl.idaho.gov



ALTERNATE CONSTRUCTION OR MATERIALS REQUEST

REQUESTING OWNER/COMPANY: _____ DATE: _____

CONTACT NAME: _____ PHONE: _____

STATE ID: _____ EMAIL: _____

BLDG NAME & ADDRESS: _____

CODE REQUIREMENTS:

DESCRIPTION OF ALTERNATE CONSTRUCTION OR MATERIALS REQUESTED:

*Attach any additional paperwork as needed

Building Owner or Owner Representative SIGNATURE: _____

DOPL RECOMMENDATION: _____

DISPOSITION: ☐ APPROVE ☐ APPROVE WITH MODIFICATIONS ☐ DISAPPROVE

Elevator Program Supervisor

Date

NOTICE: The approval of this variance does not constitute agency policy nor does it set precedent. Variances are site/time-specific and cannot be applied to projects or installations that are not named in this letter. By granting this variance the Division of Occupational and Professional Licenses assumes no liability for damage to life or property that may result from this installation.