



FIRST CLASS CITY
FIRST CLASS SERVICE

CITY OF ROCHESTER
BUILDING SAFETY DEPARTMENT
HOUSING INSPECTION SERVICES DIVISION
4001 West River Parkway NW Ste. 100 Rochester, MN 55901
Phone: 507-328-2600
Office Hours: Monday – Friday 8 am – 5 pm
rbsrental@rochestermn.gov
www.rochestermn.gov/BuildingSafety
www.rochestermn.gov/CitizenAccess

REQUEST FOR ADMINISTRATIVE MODIFICATION

This worksheet is designed to help you request an Administrative Modification by outlining the information that is required to assess your request. You may use this form or provide your own letter incorporating the same information. The following information should be included:

Owner of rental property _____
Owner’s address _____
Contact phone number _____
Contact email address _____
Rental property address _____
Type of rental unit (i.e. single family dwelling, duplex, apt. bldg.) _____
Year structure was built? (approximately, if not known) _____
Type of construction (i.e. wood frame, masonry) _____

CITY OF ROCHESTER HOUSING CODE CHAPTER 7-1 SEC. 7-1-9:

Modifications. *Whenever there are practical difficulties involved in carrying out the provisions of the Housing Code, the Director of Building Safety shall have the authority to grant modifications for individual cases, provided the Director shall first find that a special individual reason makes the strict letter of the Housing Code impractical and the modification is in compliance with the intent and purpose of the Housing Code and that such modification does not lessen health, life, and fire safety requirements. The details of action granting modifications shall be recorded and entered in the Department files.*

Indicate which Housing Code provision you are requesting be modified for this property:
<i>[Please attach Inspector’s Corrections Order Notice if available]</i>

