



# Alternative Compliance Living Building, Petal, or Net Zero Energy Certification



For OSE Use Only

Please use this form to request alternative compliance from a Seattle Building Tune-Ups compliance cycle for Living Building, Petal, or Net Zero Energy Certification.

Buildings owners must submit a signed request form, along with required documentation as specified on the form, no later than 180 days prior to a building's Tune-Up compliance date. For more information on Living Building, Petal, and Net Zero Energy Certification requirements and timeframe eligibility, please visit [seattle.gov/buildingtuneups](http://seattle.gov/buildingtuneups).

<b>A.</b>	<b>General Building Information</b> <i>Required for all applications</i>
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### BUILDING DETAILS

Building Name: \_\_\_\_\_ Building Address: \_\_\_\_\_

Portfolio Manager ID: \_\_\_\_\_ Seattle Building ID: \_\_\_\_\_ Compliance Year: \_\_\_\_\_

Nonresidential Sq Footage: \_\_\_\_\_ Parking Sq Footage: \_\_\_\_\_

### BUILDING OWNER

First name: \_\_\_\_\_ Last Name: \_\_\_\_\_

Company/Organization/LLC: \_\_\_\_\_

Email: \_\_\_\_\_ Phone: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

### BUILDING OWNER REPRESENTATIVE — *Required if submitting on behalf of the building ownership.*

First name: \_\_\_\_\_ Last Name: \_\_\_\_\_

Role with building (e.g. property manager): \_\_\_\_\_

Company/Organization/LLC: \_\_\_\_\_

Email: \_\_\_\_\_ Phone: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

### Questions? We Can Help!

Call the Seattle Building Tune-Ups Help Desk at (206) 727-8863 (TUNE) or email [buildingtuneups@seattle.gov](mailto:buildingtuneups@seattle.gov)

**B. Certification Type** *Required for all applications*

Please select the building certification applicable to your building. The certificate must be received no later than three years before the buildings compliance deadline.

- Living Building Challenge Certification
- Petal Certification with the Net Positive Energy Imperative
- Net Zero Energy Building Certification

Date of Certification: \_\_\_\_\_

**ATTACH REQUIRED DOCUMENTATION:** One of the following:

- Living Building Challenge Certificate, Petal Certificate, or Net Zero Energy Building Certificate
- Summary Report from ILFI that accompanies certificate, if applicable

**C. Statement of Owner or Building Representative**

By checking the box below, I, the undersigned representative of the building affirm and attest to the accuracy, truthfulness and completeness of the statements of material fact provided in this form. I understand these statements are subject to verification.

- Pursuant to RCW 9A.72.085, I certify under penalty of perjury under the laws of the State of Washington that the foregoing is true and correct. By clicking this box, I intend to submit my signature.

\_\_\_\_\_  
Name

\_\_\_\_\_  
Date