

Application for:

Unreasonable Hardship to Disabled Access Requirements Form "A"

(For Existing Buildings Where Cost of Construction does not exceed \$172,418 (2021)/Sec. 11B 202.4 Exc.8)

Project Address:			Plan Check #	
Project Description:			Total Construction Cost (project valuation) \$	
It is requested that the above project be granted an exemption from the requirements of the State of California Title 24, Accessibility Regulations, as specifically listed below. The specific accessibility features that create a hardship may be exempted but not all of them. The area of alteration itself may NOT be exempted.				
Access Features Item - Provide description below	Does this feature meet latest edition of Title 24?	If not, is this feature going to be made accessible as part of this permit?	If so, cost of making feature accessible? (Documentation may be required)	
1. Path of travel to entrance			\$	
2. Entrance to building			\$	
Path of travel within building/facility to area of remo	del		\$	
4. Elevator			\$	
5. Restrooms			\$	
6. Public telephones (if provided)			\$	
7. Drinking fountains (if provided)			\$	
8. Other (parking, etc.)			\$	
Total cost of access features pro-	vided (A)		\$	
Total valuation of construction (B)			\$	
(A divided by B) x 100% (20% minimum expenditure is required)			\$	
Has the same tenant performed v	work in the same tenant space	e, within the last three years?		
Description of access features to be provided				
Applicant Information I certify that the above noted info	rmation is true and correct			
Name (print)		Signature		
FOR DEPARTMENT USE (Approved by		Title	Date	
Denied by		Title	Date	
This document shall be part of th	e Building plans and shall be	entered in the job file of the e	nforcing agency.	