



CITY OF ATASCADERO

COMMUNITY DEVELOPMENT DEPARTMENT

Application and Declaration of Unreasonable Hardship Exception to Accessibility Requirements for Existing Buildings

Owner's Name _____ Phone Number _____ BLD-201 __ - _____

Project Address _____

Project Description _____

CBC 1134B regulates accessibility requirements for existing buildings. All new work shall comply with current code provisions. However, projects that do not exceed a construction cost valuation of \$147,863.00 qualify for unreasonable hardship, in which case an additional 20% (minimum) of the construction costs shall be applied to accessible features.

I understand that in complying with CBC 1134B, an unreasonable hardship exists where the cost of providing additional accessibility features exceeds 20% of the cost of the project without these features. I also understand I need to expend a minimum of 20% of the cost of the project on additional accessibility features and that priority should be given to those elements that will provide the greatest access.

I hereby declare that an unreasonable hardship condition exists for my proposed project and it would be unfeasible for me to make improvements to this property if all accessibility barriers were required to be removed. The following analysis demonstrates the unreasonable hardship condition. I understand final review and determination is the responsibility of the Building Official.

The following costs shall include detailed estimates for all elements and shall be attached to this form:

- A. Cost of Construction for the proposed project \$ _____
- B. Total amount spent on other projects at this area of work within the past 3 years \$ _____
- C. Total Cost (Line A + Line B) \$ _____

If Line C exceeds \$143,303.00, full compliance is required of all accessibility elements listed in items 1 through 6 below.

If Line C is less than \$143,303.00, then $0.20 \times (\text{amount in Line A}) = \$$ _____

This is the minimum amount to be spent on accessible elements in the order of priority listed below:

	Currently complies?	If not, will this feature comply?	Cost of compliance
1. Entrance (door, threshold, approach)	yes <input type="checkbox"/> no <input type="checkbox"/>	yes <input type="checkbox"/> no <input type="checkbox"/>	\$ _____
2. Route to the altered area	yes <input type="checkbox"/> no <input type="checkbox"/>	yes <input type="checkbox"/> no <input type="checkbox"/>	\$ _____
3. At least one accessible restroom for each sex	yes <input type="checkbox"/> no <input type="checkbox"/>	yes <input type="checkbox"/> no <input type="checkbox"/>	\$ _____
4. Accessible telephones (when provided)	yes <input type="checkbox"/> no <input type="checkbox"/>	yes <input type="checkbox"/> no <input type="checkbox"/>	\$ _____
5. Accessible drinking fountains (when provided)	yes <input type="checkbox"/> no <input type="checkbox"/>	yes <input type="checkbox"/> no <input type="checkbox"/>	\$ _____
6. Additional elements such as parking, storage & alarms	yes <input type="checkbox"/> no <input type="checkbox"/>	yes <input type="checkbox"/> no <input type="checkbox"/>	\$ _____

Note: If an accessible element does not fully comply, partial upgrades and/or equivalent facilitation may be provided in order to achieve the greatest access. Include detailed plans to correspond with all proposed work.

Requested by: Print _____ Signature _____ Date _____

Owner Agent Tenant Phone Number _____

Licensed professional in responsible charge: Name _____ Signature _____

For Staff Use: Accepted Denied By: _____ On: _____