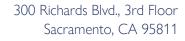


300 Richards Blvd., 3rd Floor Sacramento, CA 95811

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## 2022 California Building Code Accessibility Upgrade Requirements for Existing Non-Residential Buildings

Job Address:
Permit #:
Permit Valuation: \$
The total cost of construction is the permit valuation minus the cost of access features.  1. Total Cost of Construction: \$
<ol> <li>I understand that up to 20% of the Total Cost of Construction (\$) shall be spent toward accessible upgrades. Itemize those upgrades on the Cost Table, pages 3-4 of this form.</li> <li>I understand that the primary entrance, route of travel, restrooms, public phones and/or drinking fountains (if any) must be brought to full compliance. Please itemize required upgrades on pages 3-4 of this form.</li> <li>I certify that the path of travel to the altered area, and elements serving the altered area, comply with current State of California Title 24 Disabled Access Standards.</li> </ol>
Printed Name of Responsible Party:
Signature of Responsible Party: Date:
Building Division Use Only
In accordance with Title 24, CBC Section 11B-202, this request is:   Approved   Denied
Signature: Date:





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1.

## **Declaration of Past Alterations, Additions, and Structural Repairs** (Applicable when the path of travel to the altered area is <u>not</u> fully compliant)

- <u>This form is to be used when</u>: The cost of alteration, addition and/or structural repair, without the cost of access features, is less than the current valuation threshold. (Item 5 from page 1 is checked).
- How this is applied: If an area has been altered, within the past three years, without providing an
  accessible path of travel to that area (accessible upgrades were performed on other elements
  as noted in CBC 11B-202.4 exception 8), the total cost of alterations to areas on that path of
  travel shall be considered in determining whether the cost of making that path of travel
  accessible is disproportionate.

l,	, O'	wner or lessee of the project space referenced on page
	not, performed alteration st three years of the date	(s), addition(s) and/or structural repair(s) to the above of this permit application.
	I, provide the permit numb s from the previous permi	per, permit valuation, and the amount spent toward t(s) below.
Permit #	Valuation \$	Amount spent on upgrades \$
Permit #	Valuation \$	Amount spent on upgrades \$
Permit #	Valuation \$	Amount spent on upgrades \$
Permit #	Valuation \$	Amount spent on upgrades \$
Signature:		Date:



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## **Cost Table**

If the box in item 5 or 6 from page 1 of this form has been checked, show below the features that are being added and/or altered to meet the requirements of CBC Section 11B-202. Within the column labeled "Costs" fill in the amount spent on that specific accessible feature. Note that the total amount of money spent on accessible upgrades, as shown in the Cost Table, shall equal or exceed the amount shown in item 5 from page 1, unless full compliance is achieved without the need to spend the full amount. Complete the column labeled "Detail/Sheet #" to indicate where the upgrades can be found in the plan set.

1	PRIMARY ENTRANCE TO ALTERED AREA		COSTS	DETAIL/SHEET #
	A) Change of door			
	B) Threshold			
	C) Hardware			
	D) Maneuvering and Strike Side Clearances			
	E) Signs and Identification			
	F) Other (Please specify):			
		Subtotal:		
2	PATH OF TRAVEL			
	A) Ramps			
	B) Lifts			
	C) Elevators			
	D) Walks/Curbs/Grading			
	E) Doors			
	F) Signs and Identification			
	G) Other (Please specify):			
		Subtotal:		
3	RESTROOMS SERVING THE ALTERED AREA			
	A) Enlarge Restroom			
	B) Doors			
	C) Signs and Identification			
	D) Replacement or Relocation of Fixtures			
	E) Replacement or Relocation of Accessories			
	F) Grab Bars (bars and backing)			
	G) Other (Please specify):			
		Subtotal:		



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4	PUBLIC TELEPHONES	COSTS	DETAIL / SHEET #
	A) Provide Accessible Telephones		
	B) Signs and Identification		
	C) Other (Please specify):		
	Subtotal:		
5	DRINKING FOUNTAINS		
	A) Replace Drinking Fountain		
	B) Relocate Existing Drinking Fountain		
	C) Provide Alcove		
	D) Add Wing Walls		
	E) Other (Please specify):		
	Subtotal:		
6	PARKING, STORAGE, ALARMS		
	A) Provide Accessible Parking Stall(s)		
	B) Grading (maximum 2% slope)		
	C) Re-Stripe		
	D) Signs and Identification		
	E) Curb Ramps		
	F) Provide Visual/Audible Alarms		
	G) Provide Accessible Storage Facilities		
	H) Other (Please specify):		
	Subtotal:		
	TOTAL:		
	ditional Information/comments: e this box when necessary to clarify how compliance is achieved.)		