Cost Documentation for
Accessibility Requirements at Existing Buildings

Valuation Threshold:
2019 - $166,157
2020 - $170,466
2021 - $172,418

Building Permit Application Number ____________ Owner’s Name ________________
Phone Number __________________

Project Description ____________________________________________________________
Project Address ______________________________________________________________

CBC 11B-202.4 regulates accessibility requirements for existing public and commercial buildings. All new work shall comply with current code provisions. However, projects with an adjusted construction less than or equal to the valuation threshold, need only apply an additional 20% (minimum) of the construction costs to existing features in order to make them accessible.

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
   (without additional accessible features) $___________________
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 the valuation threshold, then full compliance is required of all accessibility elements listed in items 1 through 6 below.

If Line C is less than the valuation threshold, then 0.20 x (Line A amount)= $___________________
This is the minimum amount to be spent on accessible elements in the order of priority listed below

<table>
<thead>
<tr>
<th>Currently complies?</th>
<th>If not, will this feature comply?</th>
<th>Cost of compliance</th>
</tr>
</thead>
<tbody>
<tr>
<td>yes □ no □</td>
<td>yes □ no □</td>
<td>$_________</td>
</tr>
<tr>
<td>1. Entrance (door, threshold, approach)</td>
<td>yes □ no □</td>
<td>yes □ no □</td>
</tr>
<tr>
<td>2. Route to the altered area</td>
<td>yes □ no □</td>
<td>yes □ no □</td>
</tr>
<tr>
<td>3. At least one accessible restroom for each sex</td>
<td>yes □ no □</td>
<td>yes □ no □</td>
</tr>
<tr>
<td>4. Accessible telephones (when provided)</td>
<td>yes □ no □</td>
<td>yes □ no □</td>
</tr>
<tr>
<td>5. Accessible drinking fountains (when provided)</td>
<td>yes □ no □</td>
<td>yes □ no □</td>
</tr>
<tr>
<td>6. Additional elements such as parking, storage and alarms</td>
<td>yes □ no □</td>
<td>yes □ no □</td>
</tr>
</tbody>
</table>

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 Name: ___________________ Signature ___________________ Date__________________

owner □    agent □   tenant □    Phone Number____________________________

For Staff Use

Accepted □   Denied □   by:_____________________________ on:__________________________

(01/14/2020)