



Application for Unreasonable Hardship Exception to Disabled Access Requirements

City of Coronado Community Development
 1825 Strand Way Coronado, CA 92118
 Phone: (619)522-7326 Fax: (619) 522-2418

Please print legibly or type.

Project Address:	Plan File Number:
Owner:	Telephone <i>Include Area Code</i>
Applicant:	Telephone <i>Include Area Code</i>

It is requested that the above named project be granted an exception from the accessibilities requirements of the 2007 California Building Code, as noted specifically below.

A. Section 1134B General Exemption Applicable to existing buildings where the construction cost at this tenant space over the last three years does not exceed the valuation threshold amount. The specific accessibility features that create a hardship may be exempted but not all accessibility features. The area of alteration itself may not be exempted.

Valuation threshold Amount
 \$126,764.66 Valid until
 1/2010

Access Features Item Provide description Below	Does this feature meet the 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 Attach documentation
1. Path of travel to entrance _____	_____	_____	\$ _____
2. Entrance _____	_____	_____	\$ _____
3. Path of travel within building/facility to area of remodel _____	_____	_____	\$ _____
4. Elevator _____	_____	_____	\$ _____
5. Sanitary Facilities _____	_____	_____	\$ _____
6. Public Phones <i>if provided</i> _____	_____	_____	\$ _____
7. H2O fountains <i>if provided</i> _____	_____	_____	\$ _____
8. Other (<i>Parking, signs</i>) _____	_____	_____	\$ _____
Total cost of access features provided (A)			\$ _____
Total cost of construction of this project and all other work performed Over the last 3 years in this tenant space			\$ _____
*Percentage of the total cost of project (20% minimum): (A/B) x 100%			% _____

Description of access features to be provided:

Alterations performed over the last three years in this tenant space. Include in total valuation B above unless 20% of valuation of individual remodel has already been expanded on access feature (provide documentation).

Permit Number	Date	Description	Valuation
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

B. Specific Exceptions

Do not use this portion if part A has been completed

This part is generally used for remodels exceeding the threshold amount and where Title 24 provides an exemption from specific accessibility features.

Exceptions Requested	Code Section/Exception	Cost of Making Features Accessible <i>Attach Documentation</i>
_____	_____	_____
_____	_____	_____
_____	_____	_____
		Total \$ _____

Description:

The cost of all construction contemplated is \$: _____
 The access feature increases the cost of construction by *Percentage of construction cost*: _____
 The impact on financial feasibility of the project, if the requested exemption is not approved is: _____
 The facility is used by the general public for the purpose of: _____

The following individuals provided information listed above:

Architect/Designer:	Owner/Tenant:
Address:	Address:
Signature Required: Date:	Signature Required: Date:

For City Use Only-

Date Received: _____ Received by: _____

Findings and decisions of the Enforcing Official:

Request Granted

- General Unreasonable Hardship Exception request is approved based on Section 1134B.2.1 of the California Building Code Access features listed in part A of this form shall be provided as part of this permit.
- Specific Exception(s) request is approval based on Section(s) _____. All other access features shall be provided as specified in the California Building Code.
- Ratification required. This decision must be ratified by the Board of Building Appeals and Advisors. An application must be completed and a filing fee paid before the board can hear the request.
- Request denied.** If you disagree with this determination, you may seek an appeal through the Board of Building Appeals and Advisors.
- An application must be completed and a filing fee paid before the board can hear the request.

Name of enforcing official *Please Print* _____ Signature of enforcing official _____ Date _____