ACCESSIBILITY – COST DOCUMENTATION FORM
CITY OF WATSONVILLE – Community Development Department

250 Main Street
Watsonville CA 95076
(831) 768-3050 (831) 768-6154 fax

The following application form is provided for cost documentation for accessibility requirements at existing buildings. As an applicant, you must complete the attached forms as prescribed and incorporate all requested information before the application is accepted for processing by the Community Development Department.

CBC 11B-202.4 regulates accessibility requirements for existing public and commercial buildings. All new work shall comply with current code provisions. However, projects that are less than or equal to a construction cost valuation of $161,298.00 need only apply an additional 20% (minimum) of the construction costs to existing features in order to make them accessible.

GENERAL INFORMATION

BUILDING PERMIT APPLICATION NO.

PROJECT DESCRIPTION

SITE ADDRESS

PROPERTY OWNER NAME

PROPERTY OWNER ADDRESS

APPLICANT NAME

APPLICANT ADDRESS

APPLICANT: □ OWNER □ AGENT □ TENANT SIGNATURE __________________________ DATE __________________________

COST INFORMATION

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 $161,298, then full compliance is required of all accessibility elements listed in items 1 through 6 below.

If Line C is less than $161,298, then 0.20 x (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 □ no □ yes □ no □ $________________________
2. Route to the altered area yes □ no □ yes □ no □ $________________________
3. At least one accessible restroom for each sex yes □ no □ yes □ no □ $________________________
4. Accessible telephones (when provided) yes □ no □ yes □ no □ $________________________
5. Accessible drinking fountains (when provided) yes □ no □ yes □ no □ $________________________
6. Additional elements such as parking, storage and alarms yes □ no □ yes □ no □ $________________________

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.

For Staff Use:

Accepted □ Denied □ by: __________________________ date: __________________________

P:\FORMS\Cost Documentation Form - Accessibility.docx