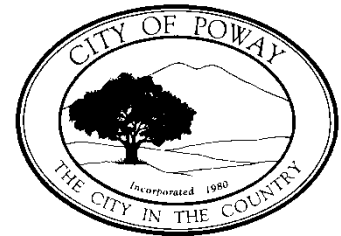


City of Poway  
 Development Services Department  
 Building Division  
 (858) 668-4645  
 (858) 668-4646 (Inspection Line)  
[building@poway.org](mailto:building@poway.org)



## Application for Unreasonable Hardship Exception to Disabled Access Requirements

|   |                                    |
|---|------------------------------------|
| <b>Please print legibly or type.</b>  |                                    |
| Project Address:  | Plan Check 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 accessibility requirements of the 2019 California Building Code, as noted specifically below. |                                    |

|   |   |  |   |
|---|---|--|---|
| <b>A. Section 1134B General Exemption</b> 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<br>\$172,418 as of January<br>2021           |
| <b>Access Features</b>  | <b>Does this feature meet the latest edition of Title 24?</b> | <b>If not, is this feature going to be made accessible as part of this permit?</b> | <b>If so, cost of making feature accessible</b><br>Attach documentation |
| <i>Item Provide description Below</i>   |   |  |   |
| 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 <i>Required</i> : _____ Date: _____ | Signature <i>Required</i> : _____ 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

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

***Building Division Counter is open between the hours of 7:30 a.m. and 5:30 p.m. (closed for lunch 11:30 a.m. - 12:30 p.m.) Monday through Thursday. City Hall and the Building Division counter are closed on alternating Fridays ([see calendar](#)). Our Friday hours are 8:00 a.m. – 5:00 p.m. (closed for lunch 11:30 a.m. - 12:30 p.m.).***

**\*\*\*Please contact the Building Division if you have any questions or concerns at (858) 668-4645 or [building@poway.org](mailto:building@poway.org)\*\*\***