

Application for Unreasonable Hardship Determination for Accessibility Upgrades – Over Valuation Threshold



Purpose: When the adjusted construction cost, as defined, exceeds the current valuation threshold, as defined, and the enforcing agency determines the cost of compliance with Section 11B-202.4 is an unreasonable hardship, as defined, full compliance with Section 11B-202.4 shall not be required. Compliance shall be provided by equivalent facilitation or to the greatest extent possible without creating an unreasonable hardship; **but in no case shall the cost of compliance be less than 20 percent of the adjusted construction cost of alterations, structural repairs or additions.** The details of the finding of unreasonable hardship shall be recorded and entered into the files of the enforcing agency and shall be subject to Chapter 1, Section 1.9.1.5, Special Conditions for Persons with Disabilities Requiring Appeals Action Ratification.

VALUATION THRESHOLD AMOUNT: \$166,157.00

YEAR: 2020

To Apply: The owner/applicant shall have a design professional (licensed architect or civil engineer) complete and submit this form to City of Meniffee Building/Safety Department staff who will forward the hardship request to the Building Official for a determination. A review fee is required for this service.

PROJECT INFORMATION

Date	Site Address	
Building Permit Number	City	Zip
Owner	Applicant	
Phone Number	Phone Number	

Definition of Unreasonable Hardship

CBC SECTION 202 Unreasonable Hardship exists when the enforcing agency finds that compliance with the building standards would make the specific work of the project affected by the building standard unfeasible, based on an overall evaluation of the following factors:

1. The cost of providing access
2. The cost of all construction contemplated
3. The impact of proposed improvements on financial feasibility of the project
4. The nature of the accessibility which would be gained or lost
5. The nature of the use of the facility under construction and its availability to persons with disabilities

List applicable sections below for which either an unreasonable hardship exception or a request for equivalent facilitation is being requested:

Chapter 11 Applicable Section	Requires Determination of Unreasonable Hardship	OR	Request for Equivalent Facilitation

UNREASONABLE HARDSHIP DETERMINATION (add additional sheets as required)

1. Total Cost of providing access (attach itemized cost estimate): \$_____

2. Total project construction cost: \$_____

3. Describe the impact of the proposed improvements on the financial feasibility of project:

4. Describe the nature of the access features that would be gained or lost:

5a. What is the nature of the use of the facility under construction?

5b. What is the availability of facility or facilities to persons with disabilities?

EQUIVALENT FACILITATION REQUESTED TO BE PROVIDED

Describe in detail, the means by which equivalent facilitation will be provided (reference applicable details on construction documents):

I declare under penalty of perjury that the foregoing is true and correct.

Executed this **day of** _____, **20** .

Owner/Applicant (please print)

Design Professional (please print)

Signature

Signature

Date

Date

Note: The City will not check the plans for compliance with the Americans with Disabilities Act (ADA). It is the Owner's responsibility to ensure compliance with these regulations. The City does not have any legal authority to enforce or interpret the ADA regulations with regard to private facility plan checks (**except to the extent that it enforces Civil Code sections 54 and 54.1 as to facilities it owns or leases**). Note, however, that the State of California has incorporated many, **but not all**, of the ADA provisions into Title 24 effective April 1, 1994.

----- DO NOT WRITE BELOW THIS LINE – TO BE COMPLETED BY STAFF -----

An application for a hardship exception has been filed with this office. The following action was taken:

- The above named project has been denied an unreasonable hardship exemption for the following reason(s): _____
- The above named project has been **granted** an unreasonable hardship exemption from the requirements of the State of California CCR-Title 24 (Regulation for the Accommodation for the Disabled) pursuant to the 2016 CBC.

Conditions of Approval:

Date of Approval/Denial

Building Permit Number

Building Official/Signature