



100 Civic Center Mall
 Indio, CA 92201
 (760)342-6541

DOCUMENTATION OF UNREASONABLE HARDSHIP

PROJECT INFORMATION:

Address: _____
 Description: _____
 Floor Area: _____ Valuation: _____ Current Valuation Threshold: \$101,199

APPLICANT DATA:

Name: _____ Title: _____
 Address: _____ Phone Number: _____

DISABLED FEATURES/COMPLIANCE:

	<u>FEATURES TO BE ACCESSIBLE PER CBC 1134B.2.1</u>	<u>ACCESSIBLE?</u>	<u>UPGRADE COST</u>
1.	Accessible path of travel to and including building entrance:	Yes/No	\$ _____
2.	Accessible path of travel within building to area of remodel:	Yes/No	\$ _____
3.	Accessible sanitary facilities for each sex:	Yes/No	\$ _____
4.	Accessible drinking fountains and public telephones :	Yes/No	\$ _____
5.	Other accessible features:	Yes/No	\$ _____

Total Cost for Upgrade of Accessible Features in Excess of 20% of Construction Costs= \$ _____

Applicant Signature/Certification and Title _____ Date _____

Building Department Signature _____