

**REQUEST FOR UNREASONABLE HARDSHIP
STATE ACCESSIBILITY STANDARDS**

Project Address: _____ **Permit Number:** _____

Project Description: _____ **Date:** _____

1. The cost of all construction contemplated is \$ _____.
(If the project is an addition, a dollar valuation is indicated on the permit application. For alterations or structural repairs, an itemized cost breakdown shall be provided at the request of the building official).
2. The cost of providing access is \$ _____.
(An itemized cost breakdown shall be provided at the request of the building official).
3. The access features increase the cost of construction by _____%.
4. The impact of proposed improvements on financial feasibility of the project is _____

5. The nature of accessibility which would be gained or lost is _____

6. The nature of the use of the facility under construction and its availability to handicap persons is _____

7. 20% of all construction contemplated (Item 1 above) is \$ _____.
This amount must be spent on providing access features outside the area for alteration, structural repair or addition. In choosing which accessible elements to provide, priority should be given to those which will provide the greatest access as required per CBC Section 11B-202.4 and shall be approved by the building official. Please list access features and corresponding cost.

ACCESS FEATURES

COST

| | |
|-------|----------|
| _____ | \$ _____ |
| _____ | \$ _____ |
| _____ | \$ _____ |
| _____ | \$ _____ |

The following persons provided the above information:

Name: _____

Name: _____

Company: _____

Company: _____

Address: _____

Address: _____

Signature: _____

Signature: _____