



**Accessibility Compliance Form
for
Alterations to Existing Structures**
(to be completed by the project designer/owner)



1. Project Information:

Project Name: _____

Project Address: _____

Permit Number: _____ Submittal Date: _____

2. Level of compliance (choose item(s) which apply):

A. The accessible route to the areas being altered is in full compliance with the accessibility requirements of the Virginia Uniform State-Wide Building Code (VUSBC).

B. Improvement to the accessible route will provide full compliance with the accessibility requirements of the VUSBC and will include the following items:

C. Alteration is not to a primary function area.

D. The cost of providing a fully compliant accessible route exceeds 20% of the cost of the proposed alterations to this space. Compliance will only be provided up to the 20% limit and will include upgrading the following items: **(The accessible route includes any restrooms and drinking fountains that serve the primary function area.)**

Hard Construction Cost: _____ Twenty Percent Amount: _____

Improvements to be made: _____

3. Certification:

I _____, as the designer/ owner of this project, have reviewed the
Print designer's/ owner's name
Construction documents for conformance to the applicable codes and standards as indicated above.

signature of designer/owner

date

A copy of this form must be attached to each set of construction documents.

The City of Falls Church is committed to the letter and spirit of the Americans with Disabilities Act. This document will be made available in alternate format upon request. Call 703 248-5080, (TTY 711).