



**CITY OF PICO RIVERA  
 COMMUNITY DEVELOPMENT DEPARTMENT  
 BUILDING DIVISION  
 DOCUMENTATION OF UNREASONABLE HARDSHIP EXEMPTION ACTION**

PROJECT ADDRESS: \_\_\_\_\_ Fee: \_\_\_\_\_

Applicant: \_\_\_\_\_ Plan Check Number: \_\_\_\_\_

Project Description: \_\_\_\_\_ Phone Number: \_\_\_\_\_

1. Estimated cost of all construction: \$ \_\_\_\_\_

2. Identify accessibility features requested to be exempt and include estimated cost of each item:

1. \_\_\_\_\_ \$ \_\_\_\_\_

2. \_\_\_\_\_ \$ \_\_\_\_\_

3. \_\_\_\_\_ \$ \_\_\_\_\_

4. \_\_\_\_\_ \$ \_\_\_\_\_

TOTAL: \$ \_\_\_\_\_

3. The financial feasibility of the accessibility improvements is disproportionate for the following reason(s):  
 \_\_\_\_\_

4. **I Declare that an unreasonable hardship exists and that compliance with the Building Standard would make the specific work of the project affected by the Building Standard unfeasible (State of California Title 24, Section 3112(A)(a-ii), Exception 1)**

Applicant Signature \_\_\_\_\_ Date: \_\_\_\_\_

5. This documentation and determination of unreasonable hardship was developed in consultation with:  
 Architect/Engineer: \_\_\_\_\_ Date: \_\_\_\_\_

Name Signature Date: \_\_\_\_\_

Business Owner: \_\_\_\_\_ Date: \_\_\_\_\_

Name Signature Date: \_\_\_\_\_

Building Owner: \_\_\_\_\_ Date: \_\_\_\_\_

Name Signature Date: \_\_\_\_\_

Building Contractor: \_\_\_\_\_ Date: \_\_\_\_\_

Name Signature Date: \_\_\_\_\_

Consultant: \_\_\_\_\_ Date: \_\_\_\_\_

Name Signature Date: \_\_\_\_\_

Plans Examiner: \_\_\_\_\_ Date: \_\_\_\_\_

Name Signature Date: \_\_\_\_\_

The above named project is hereby granted an exception from the requirements of the State of California Title 24 Accessibility Standards based upon the criteria noted below:

- |   |  |
|---|--|
| <input type="checkbox"/> Parking \$ _____                             | <input type="checkbox"/> Path of travel to drinking fountain(s) \$ _____ |
| <input type="checkbox"/> Path of travel to the entrance \$ _____      | <input type="checkbox"/> Drinking fountain(s) \$ _____                   |
| <input type="checkbox"/> Entry ( ) ramp ( ) door ( ) landing \$ _____ | <input type="checkbox"/> Path of travel to public phone(s) \$ _____      |
| <input type="checkbox"/> Path of travel within facility \$ _____      | <input type="checkbox"/> Public phone(s) \$ _____                        |
| <input type="checkbox"/> Path of travel to Restroom(s) \$ _____       | <input type="checkbox"/> Other: _____ \$ _____                           |
| <input type="checkbox"/> Restroom(s) \$ _____                         |  |

TOTAL: \$ \_\_\_\_\_

Note: Only the accessibility features listed in Section 2 are exempt.

Building official: \_\_\_\_\_ Date: \_\_\_\_\_

Remarks:  
 \_\_\_\_\_  
 \_\_\_\_\_

## UNREASONABLE HARDSHIP CONDITIONS

- If the cost of the project is less than \$79,119, an unreasonable hardship exemption may be considered.
- An unreasonable hardship may exist if the cost of the accessible features exceeds 20% of the project cost. At least 20% of the project cost must be spent in making the building partially accessible.

Example of Minimum Cost:

Project Cost:	\$79,119	(Established by “ENR US 20 Cities” 1994 Average Construction Cost Index)
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Cost of Access Features	\$15,824 (20%)
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- In choosing which accessible elements to provide, priority should be given to those elements that provide the greatest access in the following order:
  1. Accessible parking
  2. Accessible entrance
  3. Accessible route to altered area
  4. Accessible restroom(s)
  5. Accessible telephone(s)
  6. Accessible drinking fountain(s)