

City of Placerville Building Department

2019 CALIFORNIA BUILDING CODE, SECTION 1134 B

Subject to Revision. Rev. 1/20/2022

ACCESSIBILITY UPGRADE REQUIREMENTS FOR EXISTING NON-RESIDENTIAL BUILDINGS

Job Address:			Date:		
Project Name:	Permit Valuation: \$				
Permit No:	CBC Occupancy Group:				
Owner:		Applicant:			
1. Total Cost of Constru	action, Labor and	l Materials: \$			
a. Ground floor: \$_		b. Basement: \$	c. Other floor(s): \$		
unattached fixtures and cost of heating, ventilati	cases, and cosme on, air condition	etic work that normally would not	ninus the cost of access features, demolition, require a building permit. Also, subtract the k not involving placement of switches and		
2. Total cost of construct Additions form):	etion within the p	•	on of Past Alterations, Remodels or		
3. Total Cost (add costs	in 1 and 2 above	e): \$	_		
4. Current Valuation Th	reshold:	\$ 186,172.00	(January 2022)		
	· -		eshold (Item 4 above) and the alteration le by a complying elevator), go to Item 8		
6. When the Total Cost		The state of the s	above) and the alteration occurs on the floor		
_		non-elevator building, skip to Iten	n 9 below. ion Threshold (Item 4 above) for the ground		
	· -	erations, go to Item 9 below.	non Threshold (hem 1 doove) for the ground		
		-	at least one set of complying restrooms,		
		ains (if any) must be brought up to	of till compliance. (Item 3 above) must be spent on upgrading		
the primary entra	nce, path-of-trav		ny), and drinking fountains (if any), and		
Total Cost (Item 3 a	bove) \$	x .2	20 = \$		
I agree to comply.	Signature:		Date:		
Building Official	g:		D /		
Approval:	Signature:		Date:		

COST TABLE

Fill in COSTS column of the table with dollar amounts for those features that require upgrades. Follow the order shown and continue until the total equals or exceeds the amount from line 9 above. If an item causes the total amount to exceed the amount from line 9 of the worksheet, you may eliminate that item. If you eliminate an item, consider other items in its place. Your final total should be approximately equal to or greater than the amount from line 9 above. The cost table shall be reviewed and approved by the Building Official.

PRIMARY ENTRANCE TO REMODELED AREA		
	DOOR	
	A. Change of door	
	B. Threshold	
	C. Hardware	
	D. Kick plate	
	E. Strike-side clearance	
	F. Other	
	SIGNS AND IDENTIFICATION	
	G. Sign at building entrance	
	H. Sign in building lobby	
	I. Other	
-		
	Cultantal	Φ.
	Subtotal:	\$
	PATH OF TRAVEL TO REMODELED AREA	ī
	CHANGE OF ELEVATION(S)	
	A. Ramps	
	B. Lifts	
	C. Elevators	
	D. Other	
		_
	DOORS	
	E. Change of door	
	F. Threshold	
	G. Hardware	
	H. Kick plate	
	I. Strike-side clearance	
	J. Signs and identification (Braille)	
	K. Other	
	Subtotal:	\$
	Subiotai.	Ψ

RESTROOMS SERVING REMODELED AREA	COSTS
A. Enlarge restroom	
B. Enlarge door(s)	
C. Strike-side clearance	
D. Door symbols	
E. Signs and identification (Braille)	
F. Replacement or relocation of fixture (specify)	
1.	
2.	
3.	
G. Replacement or relocation of accessories (specify)	
1.	
2.	
3.	
H. Grab bars (bars and backing)	
I. Other	
Subtotal:	\$
PUBLIC TELEPHONES SERVING REMODELED AREA	
A. Mounting height	
B. Equipment for hearing impaired Subtotal:	\$
DRINKING FOUNTAINS SERVING REMODELED AREA	
A. Replace drinking fountain	
B. Relocate existing drinking fountain	
C. Provide alcove	
D. Add wing walls and / or floor treatment	
E. Other	
Subtotal:	\$
PARKING, STORAGE, ALARMS SERVING REMODELED AREA	
A. Addition of accessible spaces	
B. Access aisle	
C. Space signage	
D. Tow-away sign	
E. Curb cut	
Subtotal:	\$