



City of Santa Barbara  
 Building & Safety Division  
**Request For Relief From  
 Unreasonable Hardship**

Community Development  
 630 Garden Street  
 805-564-5485

(Above Valuation Threshold)  
 2013 California Building Code, 11B-202.4, Exception 8.

1. Address of building or tenant space involved: \_\_\_\_\_

2. **BLD2015-0** \_\_\_\_\_

3. Occupancy Classification: \_\_\_\_\_

4. Expected or potential use by persons with accessibility needs: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

5. Reason for Hardship Request: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

6. Total adjusted cost of project (less accessibility requirements): \$ \_\_\_\_\_ (A)

20% of total cost of project: \$ \_\_\_\_\_ (20%A)

7. Path of Travel features to be constructed:

| FEATURE                                       | REMARKS | COST     |
|---|---------|----------|
| Accessible entrance                           | _____   | \$ _____ |
| Accessible route to altered area              | _____   | \$ _____ |
| Parking                                       | _____   | \$ _____ |
| At least one accessible restroom for each sex | _____   | \$ _____ |
| Accessible telephones                         | _____   | \$ _____ |
| Drinking fountain                             | _____   | \$ _____ |
| When possible, additional accessible elements | _____   | \$ _____ |

Total: \$ \_\_\_\_\_ (B)

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Address: \_\_\_\_\_

**BLD2015-0** \_\_\_\_\_

8. Accessibility features subject to unreasonable hardship:

| FEATURE                                       | REMARKS | COST                |
|---|---------|---------------------|
| Accessible entrance                           | _____   | \$ _____            |
| Accessible route to altered area              | _____   | \$ _____            |
| Parking                                       | _____   | \$ _____            |
| At least one accessible restroom for each sex | _____   | \$ _____            |
| Accessible telephones                         | _____   | \$ _____            |
| Drinking fountain                             | _____   | \$ _____            |
| When possible, additional accessible elements | _____   | \$ _____            |
|   |         | Total: \$ _____ (C) |

9. The accessibility features, that will be constructed, increase construction by \_\_\_\_\_%. (B divided by A) Must be greater than 20% of A.

10. The accessibility features, subject to unreasonable hardship, would increase construction by \_\_\_\_\_%. (C divided by A)

11. Additionally, barrier removal is ongoing obligation for the Americans with Disabilities Act and the granting of an unreasonable hardship does not exempt the obligation of removing barriers in a reasonable time frame. By signing this document, you acknowledge that the project will be in reasonable compliance with Chapter 11B of the California Building Code, but will not necessarily fully comply with the Americans With Disabilities Act.

12. Name of Owner: \_\_\_\_\_

Signature: \_\_\_\_\_

Telephone number: \_\_\_\_\_

|                          |              |
|--------------------------|--------------|
| <b>(office use only)</b> |              |
| Building Division        |              |
| Approved by: _____       | Title: _____ |
| Signature: _____         | Date: _____  |