DEVELOPMENT SERVICES DEPARTMENT
Building Safety Division

ACCESSIBILITY COMPLIANCE FORM FOR ALTERATIONS TO EXISTING STRUCTURES

(to be completed by the project designer)

1. Project Information:

Project Name: _____

Project Address: _____ Suite: _____

Prior Group or occupancy: _____ Current Group or occupancy: _____

2. Level of compliance – Occupancy is contingent upon an accurate assessment of the space and compliance with the requirements of the 2006 International Building Code (IBC), the 1994 ADA Standards for Accessible Design (ADAAG), and 2003 ICC/ANSI A117. City of Goodyear inspectors will determine final compliance acceptance.

Choose which item(s) apply:

☐ A. The accessible route, from the accessible parking to the altered space, including the restrooms and drinking fountains serving that space, is in full compliance with the accessibility requirements of the 2006 IBC and ADAAG.

☐ B. Upgrading the existing restrooms is technically infeasible as defined in IBC Section 3402, ADAAG 4.1.6, and the existing fixture count cannot be reduced per section 2902 of the IBC. Therefore, a unisex toilet room is provided in accordance with IBC Section 3409.8.9 and ADAAG 4.1.6(3)(e).

☐ C. The cost of providing a fully compliant accessible route exceeds 20% of the cost of the proposed alterations, including mechanical, electrical and plumbing costs (see IBC Section 3409.7 and ADAAG 4.1.6(2)). Therefore, the following items on the accessible route will be upgraded to the 20% limit:

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_____

3. Certification:

I, _____ as the designer of this project, have reviewed the construction documents
Print designer's name
and the accessible route to the space for compliance with the International Building Code's adopted by the City of Goodyear and submit the above information as being accurate.

_____ _____
Signature of designer *Date*

A copy of this form must be attached to each set of construction documents being submitted for permit.