



City of Hughson
Building Safety Division

7012 Pine Street
Hughson, CA 95326
(209) 883-0811

Disabled Access Unreasonable Hardship Application

Project Address:	
Owner:	Telephone: (Contact Person)
Applicant:	Permit Number:

Part I:

I am the owner/agent for the above referenced property and attest that ALL required accessible features meet the latest edition of Title 24. Therefore, an unreasonable hardship for disabled access is not applicable to this property or this project.

SIGNATURE

DATE

PRINT NAME: _____

Part II:

1) What is the cost of the project (valuation)? \$ _____

2) What is the cost to provide ALL required access features? \$ _____

3) To provide ALL required access features would increase construction cost by how much? (%) _____

4) What is the amount necessary to qualify for the exception? (20% of valuation) _____

(Same amount as shown in Section G, Part III)

I am the owner/agent of the above referenced property and attest that the above costs are accurate and true. I also agree to allocate expenditures for the accessible features as described on the back of this application.

SIGNATURE

DATE

PRINT NAME: _____

Applicant – SEE BACK PAGE

