



Attachment B

Compliance Affidavit
Mandatory Disability Access Improvement Program
CATEGORY CHECKLIST COMPLIANCE FORM
PRIMARY ENTRY COMPLIANCE FORM – NO FEE

Note to the Owner or Tenant: Ordinance No. 51-16, effective May 22, 2016, requires all non-exempt “Public Accommodations” either to have all primary entries and paths of travel into the building accessible or receive a determination of equivalent facilitation, technical infeasibility or unreasonable hardship from the Department of Building Inspection within a specified time period. If you are uncertain if you are exempt, please complete the *Pre-Screening Form*. You may not need to hire a licensed design professional or Certified Access Specialist (CAsp). The *Pre-Screening Form* may be found in Information Sheet DA-17, Attachment A.

Submittal of this Compliance Form is required for any building or portion of a building with a Place of Public Accommodation. This **Category Checklist Compliance Form** is for buildings with a primary entry or entries that are categorized in any of the four categories as specified in the Ordinance. (Ordinance No. 51-16 may be found at <http://sfbos.org/ordinances-2016>).

The building owner shall obtain an inspection of elements on the Compliance Form by a California licensed design professional or Certified Access Specialist (CAsp). This form is intended to assist in compliance with the Ordinance and must be filled out by a licensed design professional or CAsp. A separate document, *Technical Specifications Guidelines*, provides explanation, instructions, and minimum standards to be used in completing this form.

Multiple Businesses in One Building: Please submit one Compliance Form for the building with multiple businesses. The Accessible Business Entrance (ABE) Program applies just to the main lobby entry (does not apply to the elevators and the individual offices tenant entry doors) and any ground floor retail spaces fronting the public way. If a (public accommodation) building provides parking for its customers, then the path from the accessible parking stall to the primary entry is required to comply with the ordinance.

Submit the completed Category Checklist Compliance Form either:

- As a pdf attachment to dbi.businessentrance@sfgov.org, with “Category Checklist Submittal” in subject line; or,
- As a hardcopy in person or by U.S. mail to Disability Access Compliance Unit, Department of Building Inspection, 1660 Mission Street, 1st Floor, San Francisco, CA 94103.

SECTION 1 – ADMINISTRATIVE INFORMATION

BLOCK / LOT NUMBER _____

BUILDING ADDRESS(ES) _____

If this property has multiple addresses, please provide here or as an attachment.

ENTRY ADDRESS _____ # of entries total _____

OWNER INFORMATION

Owner name(s) _____

Owner mailing address _____

Owner telephone _____

Owner email _____

TENANT INFORMATION

Tenant name(s) _____

Tenant mailing address _____

Tenant telephone _____

Tenant email _____

Any required work will be done by (*check one*) Owner Tenant Both Tenant and Owner

Does this Category Checklist Compliance Form replace or supplement a previously submitted Form for the same building and Place of Public Accommodation? Yes No

SECTION 2 – STREET VIEW OF ENTRY

Attach digital photographs of unobstructed street view of primary entry or entries.
Photo taken on: _____
Date

SECTION 3 – PRIMARY ENTRY COMPLIANCE CHECKLIST

CBC Section 202: ENTRANCE. Any access point to a building or portion of a building or facility used for the purpose of entering. An entrance includes the approach walk, the vertical access leading to the entrance platform, the entrance platform itself, vestibule if provided, the entry door or gate, and the hardware of the entry door or gate.

CBC Section 202: PRIMARY ENTRANCE. The principal entrance through which most people enter the building, as determined by the Building Official.

(Note: The architect/engineer/CASp shall make a good faith effort to identify the primary entry and when they submit the building permit, to comply with the ABE ordinance, the plan checker will determine then if that is the primary entry. DBI will not “pre-determine” for the licensed design professional.

This section is an inventory of **existing conditions** and is intended to assist in determining which Compliance Category the entrance will be classified as and identify the barrier removal work required. Complete this section for the primary entry to all public accommodations.)

Check ONE box for each item listed below. For a complete description of Items 1 through 19, please consult the *Technical Specifications Guidelines* Section indicated below.

CODE REQUIREMENTS	DOES THE ENTRY COMPLY?		
1) Site Arrival – Accessible route from public transportation, and parking spaces/facilities See Technical Specifications: Section 1: Site Arrival Point – Accessible Routes	<u>Yes</u> <input type="checkbox"/>	<u>No</u> <input type="checkbox"/>	<u>N/A</u> <input type="checkbox"/>
2) Site Arrival – Sidewalks: Free of excessive damage; changes in level > ½”; grates and other openings > ½” ; cross slope greater than 1:48 See Technical Specifications: Section 2: Site Arrival Point – Sidewalks	<u>Yes</u> <input type="checkbox"/>	<u>No</u> <input type="checkbox"/>	<u>N/A</u> <input type="checkbox"/>
3) Entry Approach – Exterior Ramps See Technical Specifications: Section 3: Entry Approach – Exterior Ramps	<u>Yes</u> <input type="checkbox"/>	<u>No</u> <input type="checkbox"/>	<u>N/A</u> <input type="checkbox"/>
4) Entry Approach – Exterior Lifts See Technical Specifications: Section 4: Entry Approach – Exterior Elevator & Lifts	<u>Yes</u> <input type="checkbox"/>	<u>No</u> <input type="checkbox"/>	<u>N/A</u> <input type="checkbox"/>
5) Level landings both sides of door. ** See Technical Specifications: Section 5: Level Landings – Exterior / Interior ** Power door operator as per Information Sheets DA-04/05 may be considered equivalent	<u>Yes</u> <input type="checkbox"/>	<u>No</u> <input type="checkbox"/>	<u>N/A</u> <input type="checkbox"/>
6) Threshold max ½” (1/4” vertical max; ¼” max at a slope of 2:1 maximum) See Technical Specifications: Section 6: Thresholds	<u>Yes</u> <input type="checkbox"/>	<u>No</u> <input type="checkbox"/>	<u>N/A</u> <input type="checkbox"/>
7) Floor levels within ½” both sides of door, no vertical elevation or drop-off adjacent to threshold. See Technical Specifications: Section 7: Floor Levels at Doors	<u>Yes</u> <input type="checkbox"/>	<u>No</u> <input type="checkbox"/>	<u>N/A</u> <input type="checkbox"/>
8) Doorway sized to permit a door that is 36” wide and 6’8” in height. Net clear door opening = 32” min. See Technical Specifications: Section 8: Doorway Size	<u>Yes</u> <input type="checkbox"/>	<u>No</u> <input type="checkbox"/>	<u>N/A</u> <input type="checkbox"/>
9) Door has a smooth, uninterrupted surface at bottom 10” of push side of door. ** See Technical Specifications: Section 9: Doors – Smooth Surface. ** Power door operator as per Information Sheets DA-04/05 may be considered equivalent	<u>Yes</u> <input type="checkbox"/>	<u>No</u> <input type="checkbox"/>	<u>N/A</u> <input type="checkbox"/>

<p>10) Hardware operable with one hand, single motion, no grasping, pinching, or twisting of the wrist. See Technical Specifications: Section 10: Doors – Hardware</p>	<p><u>Yes</u> <input type="checkbox"/></p>	<p><u>No</u> <input type="checkbox"/></p>	<p><u>N/A</u> <input type="checkbox"/></p>
<p>11) Door hardware located between 30” and 44” above the floor on both sides of door.¹ See Technical Specifications: Section 11: Doors – Hardware Height</p>	<p><u>Yes</u> <input type="checkbox"/></p>	<p><u>No</u> <input type="checkbox"/></p>	<p><u>N/A</u> <input type="checkbox"/></p>
<p>12) Door operating force maximum 8.5lbs (fire door-15lbs max) ¹** See Technical Specifications: Section 12: Door Operating Force <i>** Power door operator as per Information Sheets DA-04/05 is considered equivalent</i></p>	<p><u>Yes</u> <input type="checkbox"/></p>	<p><u>No</u> <input type="checkbox"/></p>	<p><u>N/A</u> <input type="checkbox"/></p>
<p>13) Panic Hardware* See Technical Specifications: Section 13: Panic Hardware</p>	<p><u>Yes</u> <input type="checkbox"/></p>	<p><u>No</u> <input type="checkbox"/></p>	<p><u>N/A</u> <input type="checkbox"/></p>
<p>14) Maneuvering space both sides of door. ** See Technical Specifications: Section 14: Maneuvering Space – Exterior / Interior <i>** Power door operator as per Information Sheets DA-04/05 is considered equivalent</i></p>	<p><u>Yes</u> <input type="checkbox"/></p>	<p><u>No</u> <input type="checkbox"/></p>	<p><u>N/A</u> <input type="checkbox"/></p>
<p>15) Recessed doormats, adequately anchored See Technical Specifications: Section 15: Recess Doormats</p>	<p><u>Yes</u> <input type="checkbox"/></p>	<p><u>No</u> <input type="checkbox"/></p>	<p><u>N/A</u> <input type="checkbox"/></p>
<p>16) Vestibules and doors in series See Technical Specifications: Section 16: Vestibules and Doors in Series</p>	<p><u>Yes</u> <input type="checkbox"/></p>	<p><u>No</u> <input type="checkbox"/></p>	<p><u>N/A</u> <input type="checkbox"/></p>
<p>17) Automatic / Power doors¹ tested and in operating condition. (required and non-required) ** See Technical Specifications: Section 17: Automatic Doors <i>** Power door operator as per Information Sheets DA-04/05 is considered equivalent</i></p>	<p><u>Yes</u> <input type="checkbox"/></p>	<p><u>No</u> <input type="checkbox"/></p>	<p><u>N/A</u> <input type="checkbox"/></p>
<p>18) Turnstiles, rails, and pedestrian controls ; Security doors/ gates/ roll up doors See Technical Specifications: Section 18: Turnstiles, Rails, Pedestrian Controls, Security Doors, and Gates</p>	<p><u>Yes</u> <input type="checkbox"/></p>	<p><u>No</u> <input type="checkbox"/></p>	<p><u>N/A</u> <input type="checkbox"/></p>
<p>19) Historic Buildings-entry approved per CHBC* See Technical Specifications: Section 19: Historic Buildings-CHBC Approved under PA# _____</p>	<p><u>Yes</u> <input type="checkbox"/></p>	<p><u>No</u> <input type="checkbox"/></p>	<p><u>N/A</u> <input type="checkbox"/></p>

<p>20) CONCLUSION: All responses to proceeding questions either Yes or N/A?</p>	<p><u>Yes</u> <input type="checkbox"/></p>	<p><u>No</u> <input type="checkbox"/></p>
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¹These requirements differ from the current or subsequent CBC or 2010 ADAS requirements. See *Technical Specifications Guidelines* for discussion of the differences.

* Document how CHBC was used and which elements would be threatened by strict compliance with the CBC in Section 5. See *Technical Specifications Guidelines*, Section 19 for further information.

** Information Sheets may be found at <http://sfdbi.org/information-sheets>

SECTION 4 – CATEGORY DETERMINATION

Determine which Compliance Category the primary entry most closely falls into and check the appropriate box below:

- CATEGORY ONE:** If all of the checklist items in SECTION 3 were checked either Yes or N/A and there are no steps or other barriers, check this box.

- CATEGORY TWO:** If any of the checklist items in SECTION 3 were checked No and there are no steps, check this box. *(Note: A ramp that has a slope greater than 1:10 for a distance of more than 5 feet, or a slope greater than 1:6 for a distance of more than 13 inches shall be considered a step. See Below.)*

If there are only minor corrections such as changing the door hardware or removing a door stop in the 10 inch smooth surface, please correct these items and submit as Category One.

- CATEGORY THREE:** If the entry has one step, check this box. *(Note: A ramp that has a slope greater than 1:10 for a distance of more than 5 feet, or a slope greater than 1:6 for a distance of more than 13 inches shall be considered a step.)*
 Check here if entry has a ramp that qualifies as a step.

- CATEGORY FOUR:** If the entry has more than one step or any other major barriers, check this box.

CATEGORY ONE: If you checked the box for Category One, complete the information asked in SECTIONS 1, 2, 3, 4, and 6 and submit this form (see page 1 for instructions). After review and approval, the Department will mail the owner and/or tenant a Certificate of Final Completion. Be sure to include a photograph of the entry.

CATEGORIES TWO THROUGH FOUR: Continue to complete SECTION 5 with the list of deficiencies and proposed remediation. Full plans are not required at this time, but we will need sufficient information to determine the feasibility and validity of the proposed remediation. Complete the information asked in ALL SECTIONS and submit this form by the date of compliance schedule (see page 1 for instructions). If required, plans will be submitted with a permit application according to the time schedule for the Category determined.

SECTION 5 – PROPOSED BARRIER REMEDIATION

SECTION 6 –VERIFICATION AND SIGNATURES

6.1 LICENSED DESIGN PROFESSIONAL/CASp

Under penalty of perjury, I certify that the information provided in Sections 3, 4, and 5 of this form is based on my personal review of the building and its records, or review by others acting under my direct supervision, and is correct to the best of my knowledge.

Professional name

Professional telephone Professional email

Signature Date

[Professional Stamp Here]

(NOTE: In lieu of stamp, provide certification number and expiration date)

6.2 OWNER / AGENT

Under penalty of perjury, I certify that the information provided in Sections 1 and 2 of this form is correct to the best of my knowledge.

Signature Date

- Owner
- Agent

FOR DBI USE ONLY

DBI has received the materials submitted and filed under “Mandatory Disability Access Improvement Program” per Ordinance No. 50-16.

Date received by DBI: