ROCKLIN
CALIFORNIA

Building Division
3970 Rocklin Road
Rocklin, California 95677
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ACCESSIBILITY UPGRADE WORKSHEET

Job Address _____ Date _____

Project Name _____

Applicant _____ Owner _____

1. Adjusted Construction Cost: $ _____ a. Ground floor $ _____
   b. Basement $ _____ c. Other floors ( ) $ _____
2. Adjusted Construction Cost on the same *path of travel* during the previous three years: $ _____
3. Total Adjusted Construction Cost (add amounts in 1 and 2 above): $ _____
4. Current Valuation Threshold (Effective January 2026): $209,208.00

SELECT ONE ADDITIONAL ACCESSIBILITY UPGRADE COMPLIANCE OBLIGATION BELOW

☐ A. Exempt:
- ☐ Project consists solely of accessibility upgrades or barrier removal.
- ☐ Project consists solely of existing parking lot resurfacing or restriping.
- ☐ Project does not affect the usability of the building, consisting solely of heating, ventilation, air condition, reroofing, electrical work not involving the placement of switches and receptacles, cosmetic work that does not affect items regulated by the code, and equipment not considered to be part of the building's architecture such as computer terminals and office equipment.

☐ B. The existing: Primary entrance, route of travel, toilet and bathing facilities, drinking fountains, public phones, signs, parking, storage and alarms that serve the area of alteration currently comply with all applicable accessibility provisions.

☐ C. The Total Adjusted Construction Cost (item 3 above) exceeds the current valuation threshold and the alteration occurs on the ground floor.

I will upgrade the existing: Primary entrance, route of travel, toilet and bathing facilities, drinking fountains, public phones, signs, parking, storage and/or alarms that serve the area of alteration to comply with all applicable accessibility provisions.

☐ D. The Total Adjusted Construction Cost (item 3 above) does not exceed the Current Valuation Threshold (item 4 above) or the alteration occurs on a floor other than the ground floor.

I will upgrade the existing: Primary entrance, route of travel, toilet and bathing facilities, drinking fountains, public phones, signs, parking, storage and/or alarms that serve the area of alteration to comply with all applicable accessibility provisions.

☐ E. The Total Adjusted Construction Cost (item 3 above) does not exceed the Current Valuation Threshold (item 4 above) or the alteration occurs on a floor other than the ground floor.

I will provide accessibility to the maximum extent feasible without incurring disproportionate costs (i.e. 20 percent of the amount in Item 1 $ _____). In choosing which accessible elements to provide, priority will be given to those elements that will provide the greatest access in the order provided in the *Cost Table*.

If obligation E is selected, also complete the *Cost Table*

Signed _____ Date _____
(OWNER OR APPLICANT)

Cost Table

Step A. Select the compliance status applicable to category 1. If "Existing Full" or "N/A" is selected, enter $0.00 for its category subtotal, then go to Step C, otherwise go to Step B.

Step B. Select the individual elements in this category that are to be upgraded. Provide a brief description of the upgrades, enter their costs and subtotal the category.

Step C. Go to the next category (2, 3, 4, 5 then 6) and perform Step A. Repeat until all 6 categories have been completed.

Step D. Total the "COSTS" column and enter it in the "TOTAL" box at the end of the form.

Your total costs should be approximately equal to or greater than the disproportionate costs unless full compliance for each category is achieved prior to exceeding disproportionate costs.

Disproportionate Costs for this project $ _____
(Amount from *Accessibility Upgrade Worksheet*)

CATEGORY		COSTS
1.	**PRIMARY ENTRANCE TO ALTERED AREA** **Compliance Status:** ☐ Existing Full ☐ Upgrade to Full ☐ N/A ☐ Existing Partial - Additional Upgrades Exceed Disproportionate Costs ☐ Upgrade to Partial - Additional Upgrades Exceed Disproportionate Costs	
☐ ☐ ☐ ☐ ☐ ☐	DOOR A. Change/Relocate door _____ B. Threshold _____ C. Hardware/Kick plate _____ D. Other _____ _____ SIGNS AND IDENTIFICATION A. Sign at building entrance _____ B. Other _____ _____ _____ Subtotal	$ _____ _____ _____ _____ _____ _____ $ _____
2.	**ROUTE TO THE ALTERED AREA** **Compliance Status:** ☐ Existing Full ☐ Upgrade to Full ☐ N/A ☐ Existing Partial - Additional Upgrades Exceed Disproportionate Costs ☐ Upgrade to Partial - Additional Upgrades Exceed Disproportionate Costs	
☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐	CHANGE OF ELEVATION(S) A. Ramps/Curb Ramps _____ B. Lifts/Elevator _____ DOORS A. Change/Relocate door _____ B. Threshold _____ C. Hardware/Kick plate _____ D. Strike-side clearance_____ E. Signs and identification (Braille) _____ F. Other _____ _____ _____ Subtotal	$ _____ _____ _____ _____ _____ _____ _____ _____ $ _____

CATEGORY		COSTS
3.	**RESTROOMS SERVING ALTERED AREA** **Compliance Status:** ☐ Existing Full ☐ Upgrade to Full ☐ N/A ☐ Existing Partial - Additional Upgrades Exceed Disproportionate Costs ☐ Upgrade to Partial - Additional Upgrades Exceed Disproportionate Costs	
☐	A. Enlarge restroom _____	$ _____
☐	B. Enlarge door(s) _____	_____
☐	C. Strike side clearance _____	_____
☐	D. Door symbols/Signs and identification (Braille) _____	_____
☐	E. Replacement or relocation of fixture (specify) 1. _____ 2. _____	 _____ _____
☐	F. Replacement or relocation of accessories (specify) 1. _____ 2. _____	 _____ _____
☐	G. Grab bars (bars and backing) _____	_____
☐	H. Other _____ _____	 _____
	Subtotal	$ _____
4.	**PUBLIC TELEPHONES** **Compliance Status:** ☐ Existing Full ☐ Upgrade to Full ☐ N/A ☐ Existing Partial - Additional Upgrades Exceed Disproportionate Costs ☐ Upgrade to Partial - Additional Upgrades Exceed Disproportionate Costs	
☐	A. Retrofit/Add _____	$ _____
	Subtotal	$ _____
5.	**DRINKING FOUNTAINS** **Compliance Status:** ☐ Existing Full ☐ Upgrade to Full ☐ N/A ☐ Existing Partial - Additional Upgrades Exceed Disproportionate Costs ☐ Upgrade to Partial - Additional Upgrades Exceed Disproportionate Costs	
☐	A. Replace/Relocate drinking fountain _____	$ _____
☐	B. Provide alcove _____	_____
☐	C. Add wing walls and/or floor treatment _____	_____
☐	D. Other _____ _____	 _____
	Subtotal	$ _____
6.	**PARKING, STORAGE, ALARMS** **Compliance Status:** ☐ Existing Full ☐ Upgrade to Full ☐ N/A ☐ Existing Partial - Additional Upgrades Exceed Disproportionate Costs ☐ Upgrade to Partial - Additional Upgrades Exceed Disproportionate Costs	
☐	A. Re-slope parking space & loading/unloading aisle _____	$ _____
☐	B. Paint the border of loading/unloading aisle blue _____	_____
☐	C. Other _____	_____
	Subtotal	$ _____
	TOTAL	**$ _____**

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