

City of Fairfax, Virginia

FIRE DEPARTMENT / CODE ADMINISTRATION

10455 Armstrong Street • Room 208 • Fairfax, VA 22030-3630 **P** 703.385.7830 • www.fairfaxva.gov/code



Accessibility Compliance Form

Alterations to Existing Structures

See the 2018 IBC for specific accessibility requirements.

Project Name:		
Project Address:		
Building Permit Number:	Date:	
☐ The accessible route*, from	CHECK APPLICABLE BOX In the building entrance to the primary function the accessibility requirements of the 2018 Interr	
proposed alterations to this sp	y compliant accessible route* exceeds 20% of pace. At least 20% of the total project cost will aclude upgrading the following items on the accessibility).	be for ADA
*The accessible route includes altered area.	restrooms, drinking fountains, and telepho	nes serving the
The undersigned,(Print name	me and title) et address, city, state, and zip code)	
of(Print street as owner/tenant/designer of this pr	et address, city, state, and zip code) roject hereby certifies the content of this certific	cate.
_	(Signature of owner/tenant/designer)	
City/County of	Commonwealth of Virginia his day of	. 20
Notary Public	uu, oi	_,
My Commission Expires		ada.doc