



# City of Malibu

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## Summary of Accessibility Upgrades for Commercial Projects

The provisions of Section 11B-202.4, Exception 8, apply to existing buildings or facilities used as public buildings, public accommodations, commercial buildings, or public housing. When these buildings or facilities undergo alterations, structural repairs, or additions, an accessible path of travel must be provided to the specific area of construction.

When the adjusted construction cost<sup>1</sup> of alterations, structural repairs, or additions to existing buildings and facilities does not exceed a valuation threshold of \$209,208, the cost of compliance with Section 11B-202.4 of the 2026 County of Los Angeles Building Code shall be limited to 20% of the adjusted construction cost.

Full compliance shall be provided when the adjusted construction cost exceeds the current valuation threshold of \$209,208; unless the Building Official determines full cost of compliance as an unreasonable hardship. In the case of an unreasonable hardship, compliance shall be provided by equivalent facilitation or to the greatest extent possible without creating an unreasonable hardship; but in no case shall the cost of compliance be less than 20% when the adjusted construction cost exceeds the current valuation threshold.

In choosing which accessible elements to provide, priority should be given to those elements that will provide the greatest access in the following order:

1. An accessible entrance;
2. An accessible route to the area of alteration, structural repair, or addition (see Section 202 and 11B-206.2.1 for more information on accessible routes and site arrival points);
3. At least one accessible restroom for each sex or one accessible unisex (single-user or family) serving the area of alteration, structural repair, or addition;
4. Accessible telephones, if provided, serving the area of alteration, structural repair, or addition;
5. Accessible drinking fountains, if provided, serving the area of alteration, structural repair, or addition; and
6. Additional accessible elements such as additional parking, signs, storage and alarms, when feasible.

When submitting for plan review, complete the attached worksheet and prepare a site and floor plan of the existing and proposed accessibility improvements along the accessible route to the area of alteration; submit the requested documents with your tenant improvement plans to Building Safety staff.

Additionally, barrier removal is an ongoing obligation for ADA compliance. Approval of this application does not exempt the applicant of any barrier removal requirements done in a reasonable time frame. By signing this document, you declare an understanding that the 20% of the adjusted construction cost is only for these alterations.

\*If an area has been altered without providing an accessible path of travel to that area, and subsequent alterations of that area or a different area on the same path of travel are undertaken within three years of the original alteration, the total cost of alterations to the areas on that path of travel during the preceding three-year period shall be considered in determining whether the cost of making that path of travel accessible is disproportionate.

<sup>1</sup> Adjusted construction cost includes all costs related to the construction of the project, including labor, material, equipment, services, utilities, contractor financing, contractor overhead and profit, and construction management costs. The costs shall not be reduced by the value of components, assemblies, building equipment or construction not directly associated with accessibility or usability. The adjusted construction cost shall not include project management fees and expenses, architectural and engineering fees, testing and inspection fees, and utility connection or service district fees. The adjusted construction cost of alterations, structural repairs or additions shall not include the cost of alterations to the path of travel elements required to comply with Section 11B-202.4.

<b>Project Address:</b>	<b>Application No.</b>
<b>Project Description/Location:</b>	<b>Permit Valuation:</b>
<b>Type:</b> <input type="checkbox"/> Alteration <input type="checkbox"/> Structural Repair <input type="checkbox"/> Addition	<b>Adjusted Cost of Proposed Construction:</b>

**PATH OF TRAVEL REQUIREMENTS FOR AREA OF ALTERATION, STRUCTURAL REPAIR, OR ADDITION**

Accessible Features	Does existing feature meet accessibility standards of Chapter 11B of the current LACBC?	Will this feature be replaced or altered to meet Chapter 11B of the current LACBC?	If so, how much will be spent to make this feature accessible?
1. Accessible entrance			
2. Accessible route to the altered area			
3. Accessible restroom for each sex or a unisex restroom serving the area			
4. Accessible telephones			
5. Accessible drinking fountains			
6. Other (Any of the below)			
A. Accessible parking spaces			
B. Signs			
C. Alarms			
D. Other:			
Cost of All Features Provided (A)	Summary of costs of Accessible Features Nos. 1-6 provided above.		
Total Cost on Same Path of Travel (B)*	Construction cost for all proposed work on this permit application <u>except</u> proposed and previous path of travel improvements.		
Percentage Upgrades Provided (A / B)	Cost of all Features Provided / Total Cost on Same Path of Travel.		

**Description of Access Features Provided:**


**Hardship Request:**


**Applicant Certification**

I certify that the above information is true and correct to the best of my knowledge and belief.

Signature:		Date:		Company:	
Name: (print)		Address:			
Title:		City, State Zip:			
Agent for:	<input type="checkbox"/> Owner <input type="checkbox"/> Architect <input type="checkbox"/> Engineer <input type="checkbox"/> Contractor			Phone No.:	

**For Building Official Use Only**

Approved by:	Title:	Date:
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## Example Form

<b>Project Address:</b> 123 John Street	<b>Application No.</b> B1409-241
<b>Project Description/Location:</b> Office tenant improvement (2,040 SF) at 5th floor Suite No. 502	<b>Permit Valuation:</b> \$180,000.00
<b>Type:</b> <input checked="" type="checkbox"/> Alteration <input type="checkbox"/> Structural Repair <input type="checkbox"/> Addition	<b>*Adjusted Cost of Proposed Construction:</b> \$144,000.00

### PATH OF TRAVEL REQUIREMENTS FOR AREA OF ALTERATION, STRUCTURAL REPAIR, OR ADDITION

Accessible Features	Does existing feature meet accessibility standards of Chapter 11B of the current LACBC?	Will this feature be replaced or altered to meet Chapter 11B of the current LACBC?	If so, how much will be spent to make this feature accessible?
1 Accessible entrance	NO	YES	\$ 2,400.00
2 Accessible route to the altered area	NO	PARTIAL	\$ 26,000.00
3 Accessible restroom for each sex serving the area	NO	YES	\$ 8,000.00
4 Accessible telephones	N/A	N/A	
5 Accessible drinking fountains	N/A		
6 Other (Any of the below)			
E. Accessible parking spaces	NO	YES	\$ 1,100.00
F. Signs	NO		
G. Alarms	N/A		
H. Other:			
Cost of All Features Provided (A)	Summary of costs of Accessible Features Nos. 1-6 provided above.		\$ 37,500.00
Total Cost on Same Path of Travel (B )	Cost of Proposed Construction and Cost of Preceding Alterations.		\$ 144,000.00
Percentage Upgrades Provided (A / B)	Cost of all Features Provided / Total Cost on Same Path of Travel.		26%

#### Description of Access Features Provided:

New entrance landing, new accessible fixtures for the restrooms, properly mark and identify the accessible parking area, and 27 cubic yards of concrete (289 feet of sidewalk)

**Hardship Request:** 345 lineal feet of exterior sidewalk that exceeds 2.08% cross slope which is 3.4% - 3.8%. Without this request approval the project will not be able to happen due to lack of finances. Please see attached implementation plan and my justification for approval.

#### Applicant Certification

I certify that the above information is true and correct to the best of my knowledge and belief.

Signature:	Jim Small	Date:	07 /10/2016	Company:	Jim Small & Son Plumbing
Name: (print)	Jim Small	Address:	123 Rivet Lane		
Title:	Architect of Record	City, State Zip:	Elon, CA, 95967		
Agent for:	<input checked="" type="checkbox"/> Owner <input checked="" type="checkbox"/> Architect <input type="checkbox"/> Engineer <input type="checkbox"/> Contractor	Phone No.:	424-000-0000		

#### For Building Official Use Only

Approved by:	Title:	Date: / /
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