

# Office on Disability and Accessibility

## Project Intake Form

### BASIC INFORMATION

1. Project Name:			
2. Project Address:		3. Block / Lot:	
4. Date Submitted:			
5. Intake form submitted by		Signature:	

### CONTACT INFORMATION

6. City Dept./Managing Agency: <input type="checkbox"/> MOHCD <input type="checkbox"/> OCII <input type="checkbox"/> OEWD <input type="checkbox"/> TIDA <input type="checkbox"/> Other	Contact Person:	Phone:	Email:
7. Project Manager/Firm:	Contact Person:	Phone:	Email:
8. Owner/Organization:	Contact Person:	Phone:	Email:
9. Architectural Firm:	Contact Person:	Phone:	Email:

### PROJECT DESCRIPTION

10. Provide Brief Narrative Description:  <input type="checkbox"/> 100% Affordable Housing (ED1301) <input type="checkbox"/> Housing Development Agreement (ED1702)
11. If project contains residential use, identify any special population(s) served : <input type="checkbox"/> seniors <input type="checkbox"/> formerly homeless <input type="checkbox"/> veterans <input type="checkbox"/> other _____

### 12. BUILDING / SITE DESCRIPTION

Occupancy Type : (list all that apply)			Playground <input type="checkbox"/> Park <input type="checkbox"/>
Use of facility:			
Number of floors:	Mezzanine(s) included?		
Existing elevator in path of travel?	Yes / No	Comments	
New elevator being added?	Yes / No		
Off street parking provided?	Yes / No		
Commercial use included?	Yes / No		
Public accommodation included?	Yes / No		

### 13. RESIDENTIAL PROJECT INFORMATION Residential Dwelling Units? Yes / No (Please count each unit in only one category)

Dwelling Unit Types (regulations applicable)	# Single story Units	#Multistory units
<b>Adaptable or Covered</b> (FHA Guidelines, CBC Chapter 11A)		
<b>Units with Mobility Features</b> (FHA Guidelines, 2010 ADA Standard and CBC Chapter 11A)		
<b>Units with Communication Features</b> (FHA Guidelines, 2010 ADA Standard, CBC Chapter 11A)		
<b>Multistory units with a visitable level</b> (CBC Chapter 11A)		
<b>Inaccessible</b>		
Total Units in Project:		

**14. PROJECT VALUATION / TYPE / FUNDING**

Dollar valuation of project	\$
<b>Check one that applies:</b>	
New construction	Use Table I for fee calculation
Barrier removal only	Use Table II for fee calculation
Alterations under Title 24 threshold	
Alterations over Title 24 threshold	

Project Funding Sources (check all that apply)	Amount	Type of Funds (CDBG, TARP, HOME, etc )
Federal:	\$	
State:	\$	
City:	\$	
Other:	\$	
TOTAL:	\$	

**15. FEE TABLE I - New Construction**

Total Project Valuation	Fee	# of Plan Reviews included in fee	# of Site Inspections included in fee	Additional Plan Reviews or Site Inspections
Up to \$200,000	Hourly rate of \$150/hour	2	2	\$150/hour
\$200,000 - \$999,999	\$2200 + \$310 per each additional \$100,000 over the initial \$200,000	3	3	\$150/hour
\$1 - \$5 million	\$4400 + \$75 per each additional \$100,000 over the initial \$1 million	3	4	\$150/hour
\$5 - \$10 million	\$7400 + \$22 per each additional \$100,000 over the initial \$5 million	3	5	\$150/hour
\$10 million and up	\$8500 + \$13.50 per each additional \$100,000 over the initial \$10 million	3	9	\$150/hour

**16. FEE TABLE II – Alterations**

Total Project Valuation	Fee	# of Plan Reviews included in fee	# of Site Inspections included in fee	Additional Plan Reviews or Site Inspections
Up to \$200,000	Hourly rate of \$150/hour	2	2	\$150/hour
\$200,000 - \$999,999	\$2640 + \$340 per each additional \$100,000 over the initial \$200,000	3	3	\$150/hour
\$1 - \$5 million	\$5040 + \$85 per each additional \$100,000 over the initial \$1 million	3	4	\$150/hour
\$5 - \$10 million	\$8440 + \$24 per each additional \$100,000 over the initial \$5 million	3	5	\$150/hour
\$10 million and up	\$9640 + \$15 per each additional \$100,000 over the initial \$10 million	3	9	\$150/hour

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## Invoice

Project Name:	
Project Address:	
Date Submitted:	

### Fee calculation example #1 (new construction / use Table I)

\$1,500,000 new construction project valuation

$$\$4400 + \$75 \times \frac{\$1,500,000 - \$1,000,000}{\$100,000} = \$4400 + \$375 = \$4775$$

### Fee calculation example #2 (alteration / use Table II)

\$1,500,000 alteration project valuation

$$\$5040 + \$85 \times \frac{\$1,500,000 - \$1,000,000}{\$100,000} = \$5040 + \$425 = \$5465$$

Construction cost type (check one): ☐ New Construction/Use Table I  
☐ Alterations/Use Table II

Fee Calculation:	\$	+	\$	x	\$	=	\$
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Please make check payable to:

**City and County of San Francisco**

Deliver project (with payment) to:

Office on Disability and Accessibility  
1455 Market Street, 1 Suite 13B  
San Francisco, CA 94103  
Phone: (415) 554-0670  
Email: [ODA@sfgov.org](mailto:ODA@sfgov.org)

Projects submitted to ODA must include payment. Projects submitted without payment will not be processed.

Fee Amount:	\$	Check #:		Date Submitted:	
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