

Mayor's Office on Disability Project Intake Form



London N. Breed
Mayor

Nicole Bohn
Director

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"/>
Use of facility:		Park <input type="checkbox"/>
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
Adaptable or Covered (FHA Guidelines, CBC Chapter 11A)		
Units with Mobility Features (FHA Guidelines, 2010 ADA Standard and CBC Chapter 11A)		
Units with Communication Features (FHA Guidelines, 2010 ADA Standard, CBC Chapter 11A)		
Multistory units with a visitable level (CBC Chapter 11A)		
Inaccessible		
Total Units in Project:		

14. PROJECT VALUATION / TYPE / FUNDING

Dollar valuation of project	\$
Check one that applies:	
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

