



Building Safety Division  
City of Bend  
(541) 388-5580  
building@bendoregon.gov  
710 NW Wall Street, Bend OR 97703

This submittal form is to be completed as part of your application with the City of Bend. *Download this form before completing fillable fields*, then upload with your application through the Online Permit Center at [www.bendoregon.gov/permitcenter](http://www.bendoregon.gov/permitcenter).

## ARCHITECTURAL BARRIER BUILDING SURVEY

Application Number: \_\_\_\_\_

### Parking

#### Stalls

	Yes	No	Measure
1. Are there designated accessible parking stalls? (OSSC 1106.1)	<input type="checkbox"/>	<input type="checkbox"/>	
a. Total number of stalls:			_____
b. Number of accessible stalls:			_____
c. Number of van accessible stalls			_____
2. Are the accessible spaces closest to the site entrance? (OSSC 1106.6)	<input type="checkbox"/>	<input type="checkbox"/>	
3. Are accessible spaces marked with Oregon Transportation Commission compliant signs? (ORS 447.233, OSSC 1106.7.2)	<input type="checkbox"/>	<input type="checkbox"/>	
4. Are accessible stalls at least 9' wide? (ORS 447.233 (2)c)	<input type="checkbox"/>	<input type="checkbox"/>	_____
5. Are accessible stalls at least 20' long?	<input type="checkbox"/>	<input type="checkbox"/>	_____
6. Is at least one stall designated as "Van Accessible"? (ORS 447.233 and OSSC Table 1106.1)	<input type="checkbox"/>	<input type="checkbox"/>	

Identify the slopes for the accessible parking elements:

Parking Stall:	Running: _____
	Cross: _____
Access Aisle:	Running: _____
	Cross: _____



#### Accommodation Information for People with Disabilities

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Access Aisles

	Yes	No	Measure
1. Is the access aisle shared between two spaces?	<input type="checkbox"/>	<input type="checkbox"/>	
a. If no, is the access aisle on the passenger side of the vehicle? (ORS 447.233)	<input type="checkbox"/>	<input type="checkbox"/>	
b. Is the access aisle 6' wide for standard stalls? (ORS 447.233)	<input type="checkbox"/>	<input type="checkbox"/>	_____
c. Is the access aisle 8' wide for van accessible stalls? (ORS 447.233)	<input type="checkbox"/>	<input type="checkbox"/>	_____

**Exterior Path of Travel (Parking Entrance)**

*Accessible Path of Travel*

	Yes	No	Measure
1. Is there a route of travel that doesn't require stairs? (OSSC 1104.2)	<input type="checkbox"/>	<input type="checkbox"/>	
2. Is the route of travel stable, firm and slip resistant? (A117.1 302.1)	<input type="checkbox"/>	<input type="checkbox"/>	
3. Is the route of travel at least 36" wide? (A117.1 403.5.2)	<input type="checkbox"/>	<input type="checkbox"/>	_____
a. If <60", is there a passing space of 60" at least every 200'? (A117.1 403.5.2)	<input type="checkbox"/>	<input type="checkbox"/>	
4. Are there any protruding objects in the route of travel? (OSSC 1003.3.3.4) (>4" from a wall, <80" high, >27" from the ground=protruding object)	<input type="checkbox"/>	<input type="checkbox"/>	
5. Does the accessible path of travel have a running slope ≤5%? (A117.1 403.3)	<input type="checkbox"/>	<input type="checkbox"/>	_____
6. Does the accessible path of travel have a cross slope ≤2%? (A117.1 403.3)	<input type="checkbox"/>	<input type="checkbox"/>	_____

*Curb Ramps*

	Yes	No	Measure
1. Is the width of the curb ramp at least 36" wide? (A117.1 406.4)	<input type="checkbox"/>	<input type="checkbox"/>	_____
2. Is the maximum running slope of the ramp ≤8%? (OSSC 1010.3)	<input type="checkbox"/>	<input type="checkbox"/>	_____
3. Is the maximum cross slope of the ramp ≤2%? (OSSC 1010.4)	<input type="checkbox"/>	<input type="checkbox"/>	
4. Are side flares in the pedestrian path of travel?	<input type="checkbox"/>	<input type="checkbox"/>	
a. If yes, is the slope of the flares ≤10%? (A117.1 406.3)	<input type="checkbox"/>	<input type="checkbox"/>	_____
5. Is there a landing present at the top of the ramp? (OSSC 1010.7, A117.1 406.7)	<input type="checkbox"/>	<input type="checkbox"/>	
- Landings are 2% in each direction, at least 60" in direction of ramp run, and will be 60" x 60" if there is a change of direction.			



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## Exterior Path of Travel (Right of Way to Entrance)

### Accessible Path of Travel

	Yes	No	Measure
1. Is there a route of travel that doesn't require stairs? (OSSC 1104.1)	<input type="checkbox"/>	<input type="checkbox"/>	
2. Is the route of travel stable, firm and slip resistant? (A117.1 302.1)	<input type="checkbox"/>	<input type="checkbox"/>	
3. Is the route of travel at least 36" wide? (A117.1 403.5)	<input type="checkbox"/>	<input type="checkbox"/>	_____
a. If <60", is there a passing space of 60" at least every 200'? (A117.1 403.5.2)	<input type="checkbox"/>	<input type="checkbox"/>	
4. Are there any protruding objects in the route of travel? (OSSC 1003.3.3.4) (>4" from a wall, <80" high, >27" from the ground=protruding object)	<input type="checkbox"/>	<input type="checkbox"/>	
5. Does the accessible path of travel have a running slope ≤5%? (A117.1 403.3)	<input type="checkbox"/>	<input type="checkbox"/>	_____
6. Does the accessible path of travel have a cross slope ≤ 2%? (A117.1 403.3)	<input type="checkbox"/>	<input type="checkbox"/>	_____

### Curb Ramps

	Yes	No	Measure
1. Is the width of the curb ramp at least 36" wide? (A117.1 406.4)	<input type="checkbox"/>	<input type="checkbox"/>	_____
2. Is the maximum running slope of the ramp ≤8.33%? (OSSC 1010.3)	<input type="checkbox"/>	<input type="checkbox"/>	_____
3. Is the maximum cross slope of the ramp ≤2%? (OSSC 1010.4)	<input type="checkbox"/>	<input type="checkbox"/>	
4. Are side flares in the pedestrian path of travel?	<input type="checkbox"/>	<input type="checkbox"/>	
a. If yes, is the slope of the flares ≤10%? (A117.1 406.3)	<input type="checkbox"/>	<input type="checkbox"/>	_____
5. Is there a landing present at the top of the ramp? (OSSC 1010.7, A117.1 406.7)	<input type="checkbox"/>	<input type="checkbox"/>	
- Landings are 2% in each direction, at least 60" in direction of ramp run, and will be 60" x 60" if there is a change of direction.			



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## Accessible Entrance Review

	Yes	No	Measure
1. Are there stairs at the main entrance? (OSSC 1105.1)	<input type="checkbox"/>	<input type="checkbox"/>	
a. If there are stairs at the main entrance, is there an alternative accessible entrance with directional signage? (OSSC 1105.1)	<input type="checkbox"/>	<input type="checkbox"/>	
2. Is there a ramp at the main entrance? (If yes, answer a-c below)	<input type="checkbox"/>	<input type="checkbox"/>	
a. Does the running slope exceed 8.33%? (OSSC 1010.3, A117.1 405.2)	<input type="checkbox"/>	<input type="checkbox"/>	_____
- If the running slope is between 5% and 8.33% and >72" in length, are handrails present on both sides? (OSSC 1010.9)			
b. Is the cross slope <2%? (OSSC 1010.4, A117 405.3)	<input type="checkbox"/>	<input type="checkbox"/>	
c. Is a landing provided at the top and bottom of the ramp that is the width of the ramp x 60"? (OSSC 1010.7.2 & 1010.7.3, A117.1 405.7)	<input type="checkbox"/>	<input type="checkbox"/>	
d. Is there edge protection for any portion of the ramp/landing that is ≥6" above the adjacent grade or floor? (OSSC 1010.10, A117.1 405.9)	<input type="checkbox"/>	<input type="checkbox"/>	
3. Does the entrance door have at least a 32" clear opening? (OSSC 1008.1.1)	<input type="checkbox"/>	<input type="checkbox"/>	_____
4. Are there doors in a series (forms a vestibule)? (If yes, answer a-b below)	<input type="checkbox"/>	<input type="checkbox"/>	
a. Do the doors in the series swing in the same direction? (A117.1 404.2.5)	<input type="checkbox"/>	<input type="checkbox"/>	
b. Is there ≥48" plus the width of the door between the doors? (A117.1 404.2.5)	<input type="checkbox"/>	<input type="checkbox"/>	_____
5. Is the threshold of the door flush, beveled or less than ¼"? (A117.1 303)	<input type="checkbox"/>	<input type="checkbox"/>	
6. Is the entrance door handle 34"-48" high? (OSSC 1008.1.9.2, A117.1 404.2.6)	<input type="checkbox"/>	<input type="checkbox"/>	_____
7. Is there an automatic door opener? (If no, answer "a" below)	<input type="checkbox"/>	<input type="checkbox"/>	
a. If no, can it be opened with ≤5 lbs. of force? (OSSC 1008.1.3)	<input type="checkbox"/>	<input type="checkbox"/>	_____
8. Does the door close automatically? (If yes, answer "a" below)	<input type="checkbox"/>	<input type="checkbox"/>	
a. If yes, does it take at least 5 seconds to close from 90" to 12"? (OSSC 1109.9.7)	<input type="checkbox"/>	<input type="checkbox"/>	



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## Interior Elements Review

### General Circulation

	Yes	No	Measure
1. Is there a route of travel that doesn't require stairs? (OSSC 1104.1)	<input type="checkbox"/>	<input type="checkbox"/>	_____
2. Can interior doors be opened with ≤5 lbs. of force? (OSSC 1008.1.3)	<input type="checkbox"/>	<input type="checkbox"/>	_____
3. Are door thresholds level, beveled or no more than ½"? (A117.1 404.2.4)	<input type="checkbox"/>	<input type="checkbox"/>	_____
4. Are there interior corridors? (If yes, answer a-c below)	<input type="checkbox"/>	<input type="checkbox"/>	
a. In main service area, are corridors ≥36" wide? (OSSC Table 1018.2)	<input type="checkbox"/>	<input type="checkbox"/>	_____
b. Are corridors to access restrooms ≥ 36" wide? (OSSC Table 1018.2)	<input type="checkbox"/>	<input type="checkbox"/>	
c. At any place in the accessible route, is there a required 180-degree turn around an obstacle?	<input type="checkbox"/>	<input type="checkbox"/>	
- If yes, is the accessible route ≥48"? (A117.1 403.5.1)	<input type="checkbox"/>	<input type="checkbox"/>	_____
5. Is there carpeting? (If yes, answer "a" below)	<input type="checkbox"/>	<input type="checkbox"/>	
a. Is the carpet/mats securely fastened to the underlying surface, and provide a firm, stable, continuous and relatively smooth surface? (A117.1 302.2)	<input type="checkbox"/>	<input type="checkbox"/>	
6. Is there a minimum of 36" clear space for movement throughout the interior of the site (between aisles, merchandise, tables)? (OSSC 1109.4.2)	<input type="checkbox"/>	<input type="checkbox"/>	_____
7. Can all objects protruding into the pathways be detected by a person using a cane (≤27" from the floor)? (OSSC 1003.3, A117.1 307)	<input type="checkbox"/>	<input type="checkbox"/>	_____

### Signs

	Yes	No	Measure
1. Are permanent signs mounted on the latch side of the door and centered 60" above finished floor? (OSSC 1011.4, A117.1 703.4)	<input type="checkbox"/>	<input type="checkbox"/>	_____
2. Are signs mounted at 3" from door frame on latch side? (OSSC 1011.4, A117.1 703.4)	<input type="checkbox"/>	<input type="checkbox"/>	
3. Do all interior signs include raised lettering and Braille? (A117.1 703.4)	<input type="checkbox"/>	<input type="checkbox"/>	
4. Is there contrast between sign characters and the background? (A117.1 703.4)	<input type="checkbox"/>	<input type="checkbox"/>	



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*Signs (cont.)*

- |  | <b>Yes</b>               | <b>No</b>   |
|--|--------------------------|---|
| 5. Are the following areas marked with the ISA symbol and Braille signage (as required)? (OSSC 1011.4, A117.1 703.4) | <input type="checkbox"/> | <input type="checkbox"/>                            |
| <input type="checkbox"/> Accessible parking  |                          | <input type="checkbox"/> Accessible fitting rooms   |
| <input type="checkbox"/> Areas of rescue   |                          | <input type="checkbox"/> Transfer seats             |
| <input type="checkbox"/> Accessible passenger loading zones  |                          | <input type="checkbox"/> Accessible public entries  |
| <input type="checkbox"/> Accessible toilet facilities  |                          | <input type="checkbox"/> Accessible checkout aisles |
| <input type="checkbox"/> Inaccessible entries shall have directional signage   |                          |   |

*Reach Range*

- |   | <b>Yes</b>               | <b>No</b>                |
|---|--------------------------|--------------------------|
| 1. Where clear floor space allows only forward approach to an object, with no obstruction, are all objects intended for public use ≤ 48” high? (A117.1 308.2) | <input type="checkbox"/> | <input type="checkbox"/> |
| 2. Where clear floor space allows parallel approach, with no obstruction, are all objects intended for public use ≤54” high? (A117.1 308.3)                   | <input type="checkbox"/> | <input type="checkbox"/> |

*Drinking Fountains*

- |   | <b>Yes</b>               | <b>No</b>                |
|---|--------------------------|--------------------------|
| 1. Are drinking fountains provided? (If yes, answer a-c below)  | <input type="checkbox"/> | <input type="checkbox"/> |
| a. Is there at least 30” x 48” clear space in front? (A117.1 602.2)   | <input type="checkbox"/> | <input type="checkbox"/> |
| b. Are the controls on the front or side near the front edge and operable with a closed fist? (A117.1 309)          | <input type="checkbox"/> | <input type="checkbox"/> |
| c. Is there one spout located 36” for wheel chair access and one spout 38”-43” for standing persons? (A117.1 602.4) | <input type="checkbox"/> | <input type="checkbox"/> |

*Elevators*

- |   | <b>Yes</b>               | <b>No</b>                |
|---|--------------------------|--------------------------|
| 1. Does the building have more than one floor, but less than three?           | <input type="checkbox"/> | <input type="checkbox"/> |
| a. Is the second floor >3000 square feet?                                     | <input type="checkbox"/> | <input type="checkbox"/> |
| b. If yes, is an elevator provided? (If yes, answer the rest of this section) | <input type="checkbox"/> | <input type="checkbox"/> |



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*Elevators (cont.)*

	<b>Yes</b>	<b>No</b>
2. Is the elevator available on an accessible route? (OSSC 1104.6)	<input type="checkbox"/>	<input type="checkbox"/>
3. Is there a visible and audible call signal? (A117.1 407.2.2)	<input type="checkbox"/>	<input type="checkbox"/>
4. Do the doors reopen in the presence of an obstacle? (A117.1 407.3.3)	<input type="checkbox"/>	<input type="checkbox"/>
a. Do the doors remain open for at least 20 seconds? (A117.1 407.3.3.3)	<input type="checkbox"/>	<input type="checkbox"/>
5. Are all floor buttons within reach range? (A117.1 407.4.6)	<input type="checkbox"/>	<input type="checkbox"/>
6. If emergency communications are provided, are they a minimum of 35" from floor? (A117.1 407.4.6.4.1)	<input type="checkbox"/>	<input type="checkbox"/>

*Seating (Assembly Areas)*

	<b>Yes</b>	<b>No</b>
1. Are accessible seats available based on Table 1108.2.2.1? (OSSC 1108.2) (~1 for every 25 seats)	<input type="checkbox"/>	<input type="checkbox"/>
2. Is there at least one companion seat available for each wheel chair seating area? (OSSC 1108.2.3)	<input type="checkbox"/>	<input type="checkbox"/>
3. In multilevel assembly seating, are the accessible seats distributed throughout the seating area and on an accessible route? (OSSC 1108.2.4)	<input type="checkbox"/>	<input type="checkbox"/>
4. Is 5% (but no less than 1) fixed seating a transfer seat (aisle seat with no armrest or folding armrests) and identified by an ISA symbol? (OSSC 1108.2.5)	<input type="checkbox"/>	<input type="checkbox"/>



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## Restrooms

### General Information

- |  | Yes                      | No                       | Measure |
|--|--------------------------|--------------------------|---------|
| 1. Are public restrooms provided? (If “no” do not complete this section) | <input type="checkbox"/> | <input type="checkbox"/> |         |
| 2. Are separate accessible restrooms provided for men/women?             | <input type="checkbox"/> | <input type="checkbox"/> |         |
| a. If no, is there an accessible unisex restroom provided?               | <input type="checkbox"/> | <input type="checkbox"/> |         |

This survey is for:    Men’s     Women’s     Unisex

### Entrance

- |   | Yes                      | No                       | Measure |
|---|--------------------------|--------------------------|---------|
| 1. Does the entry provide a 32” clear opening to the restroom? (OSSC 1008.1)          | <input type="checkbox"/> | <input type="checkbox"/> | _____   |
| 2. Are the doors equipped with handles operable with a closed fist? (OSSC 1008.1.9.1) | <input type="checkbox"/> | <input type="checkbox"/> |         |
| a. Are handles 34”-38” or less on center? (A117.1 404.2.6 & OSSC 1008.1.9.2)          | <input type="checkbox"/> | <input type="checkbox"/> | _____   |
| 3. Can the entry door be opened with ≤5 lbf? (OSSC 1008.1.3)                          | <input type="checkbox"/> | <input type="checkbox"/> | _____   |

### Water Closet and Toilet Stalls

- |   | Yes                      | No                       |
|---|--------------------------|--------------------------|
| 1. Is there a wheelchair accessible toilet stall that has one of the following clear floor spaces? (A117.1 604.3.1) | <input type="checkbox"/> | <input type="checkbox"/> |
| a. 59” L x 60” W for floor mounted water closet   | <input type="checkbox"/> | <input type="checkbox"/> |
| b. 56” L x 60” W for wall mounted water closet  | <input type="checkbox"/> | <input type="checkbox"/> |
| 2. Is the toilet seat 17”-19” high? (A117.1 604.4)  | <input type="checkbox"/> | <input type="checkbox"/> |
| 3. Is the center line of the toilet 16”-18” from a side partition/wall? (A117.1 604.2)                              | <input type="checkbox"/> | <input type="checkbox"/> |
| 4. If a urinal is present, is the bottom rim ≤17” from the finished floor? (A117.1 605.2)                           | <input type="checkbox"/> | <input type="checkbox"/> |
| 5. In the accessible stall, are grab bars provided? (A117.1 604.5)  | <input type="checkbox"/> | <input type="checkbox"/> |
| a. Are grab bars 33”-36” high on center?  | <input type="checkbox"/> | <input type="checkbox"/> |



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Water Closet and Toilet Stalls (cont.)

	Yes	No
b. Is the grab bar to the side $\geq$ 42" long and mounted at 12" from back wall?	<input type="checkbox"/>	<input type="checkbox"/>
c. Is the grab bar behind the water closet $\geq$ 36" and extend at least 24" to open side of the water closet from center?	<input type="checkbox"/>	<input type="checkbox"/>
d. Is there a vertical grab bar 18" long mounted 39"-41" above finished floor and 39"- 41" from rear wall?	<input type="checkbox"/>	<input type="checkbox"/>
6. Is the toilet paper dispenser mounted below the horizontal grab bar? (A117.1 Figure 604.7)	<input type="checkbox"/>	<input type="checkbox"/>
a. Is the toilet paper dispenser mounted a minimum 18" above finished floor, a minimum of 24" from back wall and maximum of 42" from back wall?	<input type="checkbox"/>	<input type="checkbox"/>
7. Are the flush controls automated or available for use from the wide side of the water closet? (A117.1 604.6)	<input type="checkbox"/>	<input type="checkbox"/>
8. Are seat covers, coat hooks and other amenities within reach ranges? (A117.1 604.7)	<input type="checkbox"/>	<input type="checkbox"/>

Lavatories

	Yes	No	Measure
1. Is the rim of the sink no more than 34" high? (A117.1 606.3)	<input type="checkbox"/>	<input type="checkbox"/>	_____
2. Does one sink have a 30" wide by 48" deep clear space? (A117.1 606.2)	<input type="checkbox"/>	<input type="checkbox"/>	_____
3. Is there at least 17" of clear depth below the sink? (A117.1 606.2)	<input type="checkbox"/>	<input type="checkbox"/>	_____
4. Can the faucet be operated with one closed fist?	<input type="checkbox"/>	<input type="checkbox"/>	_____
5. If self-closing valve, does the water stay on for at least 10 seconds? (A117.1 606.4)	<input type="checkbox"/>	<input type="checkbox"/>	_____
6. Is the mirror mounted with the bottom edge of the reflecting surface 40" high or lower? (A117.1 603.3)	<input type="checkbox"/>	<input type="checkbox"/>	_____



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## 2<sup>nd</sup> Restroom

This survey is for:  Men's  Women's  Unisex

**Please attach supplemental forms for additional restrooms.**

### Entrance

	Yes	No	Measure
1. Does the entry provide a 32" clear opening to the restroom? (OSSC 1008.1)	<input type="checkbox"/>	<input type="checkbox"/>	_____
2. Are the doors equipped with handles operable with a closed fist? (OSSC 1008.1.9.1)	<input type="checkbox"/>	<input type="checkbox"/>	
a. Are handles 34"-38" or less on center? (A117.1 404.2.6 & OSSC 1008.1.9.2)	<input type="checkbox"/>	<input type="checkbox"/>	_____
3. Can the entry door be opened with ≤ 5lbf? (OSSC 1008.1.3)	<input type="checkbox"/>	<input type="checkbox"/>	_____

### Water Closet and Toilet Stalls

	Yes	No
1. Is there a wheelchair accessible toilet stall that has one of the following clear floor spaces? (A117.1 604.3.1)	<input type="checkbox"/>	<input type="checkbox"/>
a. 59" L x 60" W for floor mounted water closet	<input type="checkbox"/>	<input type="checkbox"/>
b. 56" L x 60" W for wall mounted water closet	<input type="checkbox"/>	<input type="checkbox"/>
2. Is the toilet seat 17"-19" high? (A117.1 604.4)	<input type="checkbox"/>	<input type="checkbox"/>
3. Is the center line of the toilet 16"-18" from a side partition/wall? (A117.1 604.2)	<input type="checkbox"/>	<input type="checkbox"/>
4. If a urinal is present, is the bottom rim ≤17" from the finished floor? (A117.1 605.2)	<input type="checkbox"/>	<input type="checkbox"/>
5. In the accessible stall, are grab bars provided? (A117.1 604.5)	<input type="checkbox"/>	<input type="checkbox"/>
a. Are grab bars 33" – 36" high on center?	<input type="checkbox"/>	<input type="checkbox"/>
b. Is the grab bar to the side ≥ 42" long and mounted at 12" from back wall?	<input type="checkbox"/>	<input type="checkbox"/>
c. Is the grab bar behind the water closet ≥36" and extend at least 24" to open side of the water closet from center?	<input type="checkbox"/>	<input type="checkbox"/>
d. Is there a vertical grab bar 18" long mounted 39" - 41" above finished floor & 39" – 41" from rear wall?	<input type="checkbox"/>	<input type="checkbox"/>



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*Water Closet and Toilet Stalls (cont.)*

	<b>Yes</b>	<b>No</b>
6. Is the toilet paper dispenser mounted below the horizontal grab bar? (A117.1 Figure 604.7)	<input type="checkbox"/>	<input type="checkbox"/>
a. Is the toilet paper dispenser mounted a minimum of 18" above finished floor, a minimum of 24" from back wall and maximum of 42" from back wall?	<input type="checkbox"/>	<input type="checkbox"/>
7. Are the flush controls automated or available for use from the wide side of the water closet? (A117.1 604.6)	<input type="checkbox"/>	<input type="checkbox"/>
8. Are seat covers, coat hooks and other amenities within reach ranges? (A117.1 604.7)	<input type="checkbox"/>	<input type="checkbox"/>

*Lavatories*

	<b>Yes</b>	<b>No</b>	<b>Measure</b>
1. Is the rim of the sink no more than 34" high? (A117.1 606.3)	<input type="checkbox"/>	<input type="checkbox"/>	_____
2. Does one sink have a 30" wide by 48" deep clear space? (A117.1 606.2)	<input type="checkbox"/>	<input type="checkbox"/>	_____
3. Is there at least 17" of clear depth below the sink? (A117.1 606.2)	<input type="checkbox"/>	<input type="checkbox"/>	_____
4. Can the faucet be operated with one closed fist?	<input type="checkbox"/>	<input type="checkbox"/>	_____
5. If self-closing valve, does the water stay on for at least 10 seconds? (A117.1 606.4)	<input type="checkbox"/>	<input type="checkbox"/>	_____
6. Is the mirror mounted with the bottom edge of the reflecting surface 40" high or lower? (A117.1 606.3)	<input type="checkbox"/>	<input type="checkbox"/>	_____



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## Customer Service Facilities

### Counter

	Yes	No	Measure
1. Is there a service counter or cashier counter?	<input type="checkbox"/>	<input type="checkbox"/>	
a. Service counter – food or drink served from it: Is there a portion of the counter 28” – 34” high and 60” long? (A117.1 902.5.2)	<input type="checkbox"/>	<input type="checkbox"/>	
b. Cashier counter: Is there a portion of the counter that is no more than 36” high and 36” long for a parallel approach or 36” high and 30” long for a forward approach?	<input type="checkbox"/>	<input type="checkbox"/>	_____
c. All other counters that are required to be accessible, provide a 36” high by 36” long accessible section (OSSC 1109.23.2)	<input type="checkbox"/>	<input type="checkbox"/>	_____

### Tables

	Yes	No	Measure
1. Is there at least 36” of clear space between fixed tables? (A117.1 403.5)	<input type="checkbox"/>	<input type="checkbox"/>	_____
2. Are table tops between 28” and 34” high? (A117.1 403.5)	<input type="checkbox"/>	<input type="checkbox"/>	_____
3. Do tables provide 27” clear knee space? (A117.1 403.5)	<input type="checkbox"/>	<input type="checkbox"/>	_____

### Dressing and Fitting Rooms

	Yes	No	Measure
1. Are 5% (but not less than 1) accessible? (OSSC 1109.12.1)	<input type="checkbox"/>	<input type="checkbox"/>	_____
a. Is the accessible dressing room on an accessible route?	<input type="checkbox"/>	<input type="checkbox"/>	
2. Is there a 5’ (60”) turning radius within the changing area? (A117.1 803.2)	<input type="checkbox"/>	<input type="checkbox"/>	_____
a. Is the turning space obstructed by the door swing? (A117.1 803.2)	<input type="checkbox"/>	<input type="checkbox"/>	
b. Or is there a T-shaped space where the width is not less than 36”? Each segment of the T shall be clear of obstructions for not less than 12” in each direction. (A117.1 803.2)	<input type="checkbox"/>	<input type="checkbox"/>	
3. Are there benches or seating in the changing area? (A117.1 803.4)	<input type="checkbox"/>	<input type="checkbox"/>	_____
a. Is the bench 24” x 48” and fixed to the long dimension of the wall?	<input type="checkbox"/>	<input type="checkbox"/>	_____



*Dressing and Fitting Rooms (cont.)*

	<b>Yes</b>	<b>No</b>	<b>Measure</b>
b. Is the bench mounted 17" – 19" above the floor? (OSSC 1109.23.1.4)	<input type="checkbox"/>	<input type="checkbox"/>	_____
4. Is a mirror provided in or with the changing room?	<input type="checkbox"/>	<input type="checkbox"/>	
a. Is it a full length mirror or at least 18" wide by 54" high? (OSSC 1109.23.1.4)	<input type="checkbox"/>	<input type="checkbox"/>	_____
5. Are coat hooks provided?	<input type="checkbox"/>	<input type="checkbox"/>	
a. Do coat hooks meet the reach range requirements? (A117.1 308)	<input type="checkbox"/>	<input type="checkbox"/>	



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### Additional Items

Type of Facility: \_\_\_\_\_

	Yes	No	Measure
_____	<input type="checkbox"/>	<input type="checkbox"/>	_____
_____	<input type="checkbox"/>	<input type="checkbox"/>	_____
_____	<input type="checkbox"/>	<input type="checkbox"/>	_____
_____	<input type="checkbox"/>	<input type="checkbox"/>	_____
_____	<input type="checkbox"/>	<input type="checkbox"/>	_____
_____	<input type="checkbox"/>	<input type="checkbox"/>	_____
_____	<input type="checkbox"/>	<input type="checkbox"/>	_____
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_____	<input type="checkbox"/>	<input type="checkbox"/>	_____
_____	<input type="checkbox"/>	<input type="checkbox"/>	_____
_____	<input type="checkbox"/>	<input type="checkbox"/>	_____
_____	<input type="checkbox"/>	<input type="checkbox"/>	_____



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