CITY OF SAUSALITO
420 LITHO STREET
SAUSALITO, CA. 94965
PH: (415)289-4128 FAX: (415)339-2256

COMPLAINT REGARDING INADEQUATE DISABLED ACCESS

Complainant:

Name(s): _____

Address: _____

_____

Phone: _____

Date Complaint Received: _____

Complaint Location: _____

Owner(s): _____

Address: _____

_____

Phone: _____

Complaint Received By: _____

Description of Complaint: _____

_____

☐ 1. Path of travel (CBC 11B-202.4 and 11B-401); location _____

☐ 2. Parking (CBC 11B-208); location _____

☐ 3. Curb ramps (CBC 11B-406); location _____

☐ 4. Stairways (CBC 11B-504); location _____

☐ 5. Ramps (CBC 11B-405); location _____

☐ 6. Access to toilets (CBC 11B-603); location _____

☐ 7. Walking surfaces (CBC 11B-403); location _____

☐ 8. Doors (CBC 11B-206.5 & 11B-404); location _____

☐ 9. Entrances & exits (CBC 11B-206.4 & 11B-404); location _____

☐ 10. Telephones (CBC 11B-217); location _____

☐ 11. Drinking fountains (CBC 11B-602); location _____

☐ 12. Elevators (CBC 11B-407); location _____

☐ 13. Signs (CBC 11B-216); location _____

☐ 14. Other _____

☐ 15. Other _____

Attach photographs if available.