



**PRINCE WILLIAM COUNTY**  
**Department of Development Services – Building Development Division**

**ACCESSIBILITY CERTIFICATION STATEMENT**

Version 2012-01-14

**PROJECT NAME:** \_\_\_\_\_ **BLD20**\_\_\_\_ - \_\_\_\_\_

**PROJECT ADDRESS:** \_\_\_\_\_

Please reference Virginia Uniform Statewide Building Code (VUSBC) Section 3411 Accessibility for Existing Buildings, including Alterations Affecting an Area Containing a Primary Function, to see the extent of compliance and the exceptions as they apply to your alteration/repair or tenant layout project. The existing space is not required to be 100% accessible, but all new work is required to be accessible per Chapter 11.

- Existing space is already 100% accessible; accessibility upgrades are not required.
- The space is **not** 100% accessible; up to 20% of the total construction cost has been allocated for accessibility upgrades to the existing space as shown below.

This is to certify that the **total cost** of the alterations to the above referenced project is \$\_\_\_\_\_.  
 20% of the total construction cost is \$\_\_\_\_\_, which has been allocated for alterations to the accessible route to the primary function area per Section 3411.

<b>ACCESSIBLE ELEMENT</b>	<b>COST</b>
_____	\$ _____
_____	\$ _____
_____	\$ _____
_____	\$ _____
_____	\$ _____
_____	\$ _____
<b>TOTAL COST OF ACCESSIBLE ALTERATIONS</b>	<b>\$ _____</b>

\_\_\_\_\_  
**Owner or Agent Signature\*** **Date**

**\*By signing this form, I certify that I am the owner of the property or the owner's agent, duly authorized to sign for the owner.**

**OWNER'S INFORMATION** \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

**TELEPHONE NUMBER(S)** (H) \_\_\_\_\_ (W) \_\_\_\_\_

**AGENT'S NAME (If applicable)** \_\_\_\_\_