

Accessibility Exceptions Certification

Project Description: _____

Project CIP No. or Bid Request No. (if applicable): _____

Route or Street: _____

<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>

Route or Street: _____



INSERT IMAGE HERE

To add image, when in Adobe Reader, click paperclip icon in lower left of screen, click "Add," and select file.

As the registered professional engineer or landscape architect responsible for the design of this project, I do hereby verify the project described above has been designed to meet the Americans with Disabilities Act (ADA) accessibility requirements specified in Chapter 16 of the City of Sioux Falls Engineering Design Standards.

Full compliance has been determined to be structurally impracticable for newly constructed facilities in the following specific locations for the following reasons:

Full compliance has been determined to be technically infeasible for altered existing facilities in the following specific locations for the following reasons:

Full compliance would create an unsafe condition in the following specific locations for the following reasons:

Additional supporting documentation, including drawings, calculations, or other information as appropriate is attached.

Name: _____ Signature: _____

License No.: _____ Date: _____

ADA Coordinator Signature: _____