

DATE: _____

of Pages Being Submitted _____
(Including this sheet)

TO: Disability and Communication Access Board
(Fax number: 586-8129 / E-mail: dcab@doh.hawaii.gov)

FROM: _____ FIRM: _____

PHONE: _____ FAX: _____

SUBJ: REQUEST FOR TECHNICAL ASSISTANCE ON FACILITY ACCESS/DESIGN

The information that you receive is not legal advice. It is merely informal guidance that will not be given in writing. The technical information does not constitute a determination by the Disability and Communication Access Board of your rights or responsibilities and is not binding on this agency. Fill in all applicable information to expedite the response. A response can usually be provided within 2-3 working days.

- Project Ownership: ___ State/County ___ Federal ___ Private or Non-Profit
- Project Funding: ___ State/County ___ Federal ___ Private
- Project Type: ___ New construction ___ Addition ___ Alteration
- Other: ___ Historic ___ Transition Plan ___ Religious
 ___ Per Legal Settlement ___ ABR

• Type of building, facility, or site? _____
(e.g., office, restaurant, library, church, classroom, auditorium, playground, park, apartment bldg., etc.)

• DCAB Project Number and Project Name, if applicable: _____

- This question relates to design criteria under the:
___ 2004 Americans with Disabilities Act Accessibility Guidelines (2004 ADAAG) issued by the U.S. Access Board
- ___ 1991 Americans with Disabilities Act Accessibility Guidelines (1991 ADAAG) issued by the U.S. Access Board
- ___ Residential Housing Accessibility Guidelines issued by the State Disability and Communication Access Board
- ___ Uniform Federal Accessibility Standards (UFAS) issued by the U.S. Access Board
- ___ Fair Housing Amendments Act Accessibility Guidelines issued by the U.S. Department of Housing and Urban Development
- ___ Others _____

• Please cite the appropriate section(s) of the design guidelines or standards on which you are requesting information. Attach any sketches/drawings which may clarify the question.

Section: _____

Question: