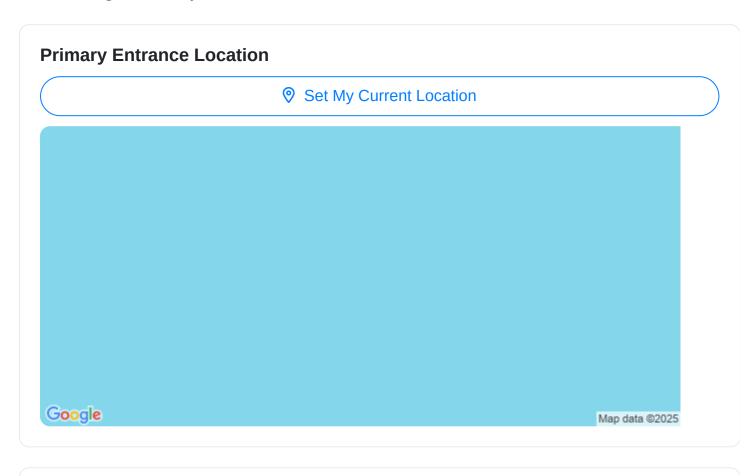


Accessibility Compliance Inspection Checklist

Exterior Access & Circulation

Focuses on accessibility of walkways, entrances, parking, and outdoor spaces surrounding the facility.



| Number of Designated Acc | essible Parking Spaces |
|--------------------------|------------------------|
|--------------------------|------------------------|

Enter a number...

| Distance from Accessible Parking to Entrance (feet) | | |
|-----------------------------------------------------|--|--|
| Enter a number | | |
| | | |
| Accessible Parking Surface Condition | | |
| Stable and Level | | |
| Minor Cracks/Unevenness | | |
| Significant Damage/Unevenness - Potential Hazard | | |
| Accessible Route to Entrance Type | | |
| Sidewalk | | |
| Ramp | | |
| Other (Specify) | | |
| Accessible Route Width (feet) | | |
| Enter a number | | |
| | | |
| Obstacles on Accessible Route? | | |
| □ No | | |
| Yes (Specify in LONG_TEXT below) | | |
| Description of Obstacles (if any) | | |
| Write something | | |
| | | |
| | | |

Photo of Accessible Route and Parking



Entrances & Doors

Evaluates the accessibility of all entrances, including door dimensions, hardware, and maneuvering clearances.

| Minimum Clear Width at Entrance (inches) |
|-----------------------------------------------------------------------------------------------------------------------------------------|
| Enter a number |
| Dear Operating Force (lbs) |
| Door Operating Force (lbs) |
| |
| Door Swing Direction (Impact on Accessible Route) Does not obstruct accessible route Obstructs accessible route - mitigation required |
| Clear Floor Space at Door (width in inches) |
| Enter a number |
| Clear Floor Space at Door (depth in inches) |
| Enter a number |

| Door Hardware Accessibility |
|---------------------------------------------------------------------------------------------------------------|
| Lever handles present |
| Hinges Accessible |
| Push/Pull Plates Present |
| Accessible Height |
| Other (specify in LONG_TEXT) |
| |
| Additional Notes regarding hardware accessibility (if 'Other' selected) |
| Write something |
| |
| Automatic Door Operation? |
| Yes |
| □ No |
| |
| Describe any observed issues with entrance/door accessibility |
| Write something |
| |
| |
| Ramps & Elevators |
| Checks ramps for proper slope, landings, and handrails; and elevators for operation, dimensions, and signage. |
| Ramp Slope (%) |
| Enter a number |

| Ramp Width (inches) | |
|------------------------------------------|--|
| Enter a number | |
| | |
| Landing Width at Bottom of Ramp (inches) | |
| Enter a number | |
| Landing Width at Top of Ramp (inches) | |
| Enter a number | |
| | |
| Ramp Handrails Present? | |
| Yes | |
| ☐ No ☐ Not Applicable | |
| Elevator Presence? | |
| Yes | |
| ☐ No ☐ Not Applicable | |
| Elevator Interior Width (inches) | |
| Enter a number | |
| | |
| Elevator Interior Depth (inches) | |
| Enter a number | |

| Elevator Control Panel Height (inches) | |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|
| Less than 48 inches | |
| Between 48 and 54 inches | |
| Greater than 54 inches | |
| □ N/A | |
| Any Elevator Maintenance/Repair Notes? | |
| Write something | |
| Interior Circulation & Wayfinding Assesses accessible routes through the facility, including hallways, corridors, and maneuvering clearances; also evaluates signage and wayfinding elements. | |
| Minimum clear width of hallways (inches) | |
| Enter a number | |
| Turning radius at intersection of hallways (feet) | |
| Enter a number | |
| Are accessible routes clearly marked and free of obstructions? Yes No N/A | |

| What types of obstructions are present on accessible routes? (Select all that apply) |
|------------------------------------------------------------------------------------------------|
| Furniture |
| Storage |
| Debris |
| Construction Materials |
| None |
| |
| Describe any observed issues with accessible routes and provide suggestions for remediation. |
| Write something |
| |
| |
| |
| Are tactile warning strips present at the edges of drop-offs? |
| Yes |
| □ No |
| □ N/A |
| |
| |
| Describe signage and wayfinding clarity. Are signs at consistent heights and easily readable? |
| |
| easily readable? |
| easily readable? |
| easily readable? |
| easily readable? |
| easily readable? Write something |
| easily readable? Write something Are directional signage available and appropriately placed? |

Restrooms & Hygiene Facilities

Examines accessible restrooms, sinks, toilets, and other hygiene facilities, ensuring compliance with size, grab bar placement, and maneuvering clearances.

| Toilet Stall Width (Minimum) |
|-------------------------------------------------------------------|
| Enter a number |
| Clear Floor Space in Front of Toilet (Minimum Length) |
| Enter a number |
| Toilet Paper Dispenser Height (Above Finished Floor) |
| Less than 36 inches |
| ☐ 36-48 inches ☐ Greater than 48 inches |
| |
| Grab Bar Presence & Placement (Check all that apply) |
| Toilet Adjacent Grab Bar Present (Left) |
| Toilet Adjacent Grab Bar Present (Right) |
| Grab Bar Height Correct (33-36 inches) Grab Bar Securely Mounted |
| Ciab Dai Securely Mounted |
| |
| Sink Height (Above Finished Floor) |
| Less than 32 inches 32-36 inches |
| Greater than 36 inches |
| |

| Write something | | | |
|-------------------------|----------------------------------------------------------------------------------------------|--|--|
| Accessible Yes No N/A | Toilet Paper Dispenser | | |
| Mirror Ed | essibility (Check all that apply) ge No Closer than 27 inches to Floor e Provided Under Sink | | |
| | ncy Egress & Safety essible routes to exits, emergency alarms, and other safety features. | | |
| | | | |
| Are access Yes No N/A | ible routes to all exits clearly marked and unobstructed? | | |

| Are audible emergency alarms present and functioning? Yes No N/A |
|-----------------------------------------------------------------------------------------------------------------------|
| Are visual emergency alarms present and functioning? Yes No N/A |
| Describe any obstacles or conditions that hinder emergency egress for individuals with disabilities. Write something |
| Are emergency exit routes wide enough to accommodate wheelchair users? Yes No N/A |
| Are fire extinguishers accessible and clearly visible? Yes No N/A |

| Enter date | |
|--------------------------------------------------------------------------|----------------------------------------------------------------------------------|
| | |
| | |
| | |
| ommon | Areas & Amenities |
| vers accessib | ility of common areas such as lobbies, waiting areas, cafeterias, and |
| creational spac | |
| Are accessib | le tables and seating available in the cafeteria/breakroom? |
| Yes | |
| No | |
| N/A - No Cat | feteria/Breakroom |
| | |
| Number of ac | cessible seating options available in common waiting areas. |
| Enter a number | <u> </u> |
| | |
| | |
| Which of the | following amenities are provided in common areas? |
| | ending machines |
| Accessible v | vater fountains |
| _ | |
| _ | .TMs |
| Accessible v | TMs nformation kiosks |
| Accessible v Accessible A | |
| Accessible v | |
| Accessible v Accessible A | |
| Accessible v Accessible A Accessible in None Describe any | observed barriers to accessibility within common areas (e.g., |
| Accessible v Accessible A Accessible in Accessible in None Describe any | nformation kiosks |
| Accessible v Accessible A Accessible in Accessible in None Describe any | observed barriers to accessibility within common areas (e.g., inadequate space). |

| Are accessible routes clearly mar | rked and maintained in common areas? |
|----------------------------------------|---------------------------------------------------|
| Yes | |
| No | |
| Partially | |
| | |
| | |
| Upload photos documenting acce | essibility of common areas. |
| ♣ Upload File | |
| | |
| | |
| Mechanical Rooms & | Service Areas (Limited |
| Access) | Scrvice Areas (Ellintea |
| * | |
| | ce personnel accessing mechanical rooms and other |
| service areas (focus on accessible rou | ites where applicable and safe). |
| | |
| Accessible Route Presence? | |
| Write something | |
| | |
| | |
| Width of Accessible Route (feet) | |
| Enter a number | |
| | |
| | |
| Describe any obstacles or deviati | ions from accessible route guidelines. |
| Describe any obstacles of deviati | ons from accessible route galacinies. |
| Write something | |
| | |
| | |
| | |

| Presence of Accessible Electrical Panel? Yes No N/A |
|-------------------------------------------------------------------------------------------------------------------------------------------------|
| Are controls reachable without strain? Yes No N/A |
| Notes on accessibility of shut-off valves (if accessible). Write something |
| Photo Documentation of Accessible Route/Conditions L Upload File |
| Grounds Maintenance & Landscape Evaluates the accessibility of outdoor grounds, including paths, plantings, and play areas. Surface Slope (%) |
| Enter a number |

| Ground Cover Types Present Paved Surface (Concrete, Asphalt) Gravel/Loose Stone Grass/Turf Mulch Sand |
|----------------------------------------------------------------------------------------------------------|
| Ground Surface Stability Stable and Firm Slightly Uneven Unstable/Loose |
| Describe any observed obstructions (e.g., exposed tree roots, protruding rocks) Write something |
| Width of Accessible Path (inches) Enter a number |
| Obstacles present along accessible routes? None Shrubbery Benches Planters Other (specify in LONG_TEXT) |

| Last Ground | s Maintenar | nce Date | | | |
|-------------|-------------|----------|--|--|--|
| Enter date | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |