The 2004 ADAAG contains a provision relating to "technical infeasibility," applicable only in alterations. This exception does not apply to new construction. The provision is as follows:

202.3 Alterations. Where existing elements or spaces are altered, each altered element or space shall comply with the applicable requirements of Chapter 2.

EXCEPTIONS: 2. In alterations, where compliance with applicable requirements is technically infeasible, the alteration shall comply with the requirements to the maximum extent feasible.

106.5 Defined Terms: Technically Infeasible. With respect to an alteration of a building or a facility, something that has little likelihood of being accomplished because existing structural conditions would require removing or altering a load-bearing member that is an essential part of the structural frame; or because other existing physical or site constraints prohibit modification or addition of elements, spaces, or features that are in full and strict compliance with the minimum requirements.

"TECHNICAL INFEASIBILITY" STATEMENT
Relating to a project under review for §103-50, HRS

Project Name: ________________________________

Dept. Project Number: ________________ DCAB Project Number: ________________ (if applicable)

The following item in the planned alteration project is not in full compliance with 2004 ADAAG as noted in the review by the Disability and Communication Access Board. As determined by the Department overseeing the project and/or the project consultant, this alteration item does provide a level of accessibility to the maximum extent feasible in compliance with 2004 ADAAG 202.3 Exception 2.

Reference to DCAB Document Review Dated: ____________(if applicable)  Item Number: _________(if applicable)

Explanation of why item is "technically infeasible" (attach additional sheets, drawings, sketches, as necessary).

I/We acknowledge that responsibility for determining "technical infeasibility," including research/analysis of alternate design(s), rests with the Department/Agency overseeing the project and the project consultant.

*Note: If signing for Department Director, please submit memo confirming such authorization.

Department/Agency

Name (Print) of Director, Title __________________________ Signature __________________________ Date ______________

Consultant Firm

Name (Print) of Consultant __________________________ Signature __________________________ Date ______________