

**Maryland Accessibility Code - COMAR 05.02.02  
Disproportionality Documentation Form (Path of Travel Obligation)**

Date: \_\_\_\_\_  
 Project Name: \_\_\_\_\_  
 Permit Number: \_\_\_\_\_

An alteration that affects or could affect the usability of or access to an area containing a primary function shall be made so as to ensure that, to the maximum extent feasible, the path of travel to the altered area and the restrooms, telephones, and drinking fountains serving the altered area, are readily accessible to and usable by individuals with disabilities, unless such alterations are disproportionate to the overall alterations in terms of cost and scope. To help demonstrate compliance with this obligation the following information in the shaded areas must be completed.

<b>Renovation Costs:</b>	
<b>20% to be applied to path of travel upgrades:</b>	\$0.00

**Note:** All moneys allocated to meet the path of travel obligation must be applied in order of priority listed below as established by ADAAG 28 CFR §36.403 (g) (2). Reasonable cost estimates shall be provided.

	Priority	Complies (Y/N) If yes, no changes required	Cost of Alterations to Provide Full Compliance	Cost of Alterations to be Performed (either full or partial compliance)	Balance of 20% Path of travel upgrades.
1	An accessible entrance				\$0.00
2	An accessible route to the primary function area				\$0.00
3	At least one accessible restroom for each sex or a single unisex restroom				\$0.00
4	Accessible telephone				\$0.00
5	Accessible drinking fountains				\$0.00
6	Parking				\$0.00
7	Storage & Alarms				\$0.00
<b>Remaining Balance:</b>					<b>\$0.00</b>

I hereby certify that the above information is based on our best cost estimates and represents a true analysis of accessible requirements and expenditures for this project. I understand that the acceptance of these contract documents by Harford County and/or the Maryland Codes Administration does not constitute an approval for compliance with applicable federal laws not enforced by Harford County or the Maryland Codes Administration.

I hereby certify that the combination of the existing accessibility features of the building or space in combination with any proposed design upgrades will fully comply with the latest edition of the Maryland Accessibility Code.

Design Professional Responsible for Project: \_\_\_\_\_  
 Address: \_\_\_\_\_  
 City, State Zip: \_\_\_\_\_  
 Phone: \_\_\_\_\_  
 Signature: \_\_\_\_\_



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In the table below, provide a brief description of the proposed path of travel modifications upgrading accessibility to the primary function area.

	Priority	Description of work.
1	An accessible entrance	
2	An accessible route to the primary function area	
3	At least one accessible restroom for each sex or a single unisex restroom	
4	Accessible telephone	
5	Accessible drinking fountains	
6	Parking	
7	Storage & Alarms	

All forms documenting the path of travel upgrades shall be submitted to the Harford County Permits Office at the time of application. Questions in regards to completing this form shall be directed to the Harford County Building Services Division at (410) 638-3366. Forms submitted after permit application shall be forwarded to the Building Services division Plans Reviewer assigned to the project.

Mailing Address:

Harford County Department of Insepctions Licenses and Pemrits  
220 South Main Street  
Bel Air, MD 21014

Fax: (410) 879-8203