City of Cotati
Building Division

COMPLAINT FOR DISABLED ACCESS INVESTIGATION

Complainant:_____
Complaint Location_____
Owner's Name_____Phone_____

□ 1. Path of travel (CBC 114B.1.2); location_____

□ 2. Parking (CBC 1129B); location_____

□ 3. Curb ramps (CBC 1127B.5); location_____

□ 4. Stairways (CBC 1133B.4); location_____

□ 5. Ramps (CBC 1133B.5); location_____

□ 6. Access to toilets (CBC 115B.7); location_____

□ 7. Walks & Sidewalks (CBC 1133B.7); location_____

□ 8. Doors (CBC 113B.2); location_____

□ 9. Entrance & exists (CBC 1133B.1); location_____

□ 10. Telephones (CBC 1117B.2.1); location_____

□ 11. Water fountain (CBC 1117B.1.1); location_____

□ 12. Elevators (CBC 1116B.1); location_____

□ 13. Signs (CBC 1117B.5); location_____

□ 14. Other_____

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