

<u>Civil Code section 55.32</u> requires an attorney who provides a demand letter or sends or serves a Civil Complaint related to **construction-related accessibility claims** under the Americans with Disabilities Act, the Unruh Act and/or the California Disabled Persons Act to submit this form to the Commission. <u>Civ.C.</u> <u>55.3(a)</u>, <u>55.32(a)</u>, (b). This form must be submitted whether the defendant is a business establishment, a place of public accommodation, or a public education entity. *Id.*; <u>Civ.C. 54.27(i)(3)</u>.

1. Is this alleged construction-related violation (check one):

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🗌 Both

 $\Box$  No ADA Violation Claimed

## 2. The source of this information is (check one and supply corresponding date):

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Com	plai	int

 $\Box$  Amended Complaint alleging new construction-related violation ^1

Pre-Litigation Letter

Date Sent/ Filed/Served: \_\_\_\_\_

Date Received by CCDA<sup>2</sup>:

\* If a Complaint, is this a follow-up to a Pre-Litigation Letter?

 $\Box$  YES  $\Box$  NO

\* If a Pre-Litigation Letter, attach a copy of the Pre-Litigation Letter to this form\*

- 3. Is the Plaintiff(s) a High Frequency Litigant as defined in <u>Code of Civil Procedure 425.55(b)</u>?:
  - □ YES □ NO
- 4. Date(s) of alleged violation(s):

## 5. Complaint Filed in:

Federal Court	Name of Court:	
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🗆 State Court	Name of Court:	
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Case Number:

<sup>&</sup>lt;sup>1</sup> For an Amended Complaint, this form only needs to be submitted if the amendment states a construction-related accessibility claim that was not raised in the previous complaint.

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#### 6. Complaint Filed as (check all that apply):

- □ California Disabled Persons Act Violation
- □ American with Disabilities Act of 1990 Violation
- □ Unruh Civil Rights Act Violation
- □ Rehabilitation Act of 1973 Violation

Plaintiff Seeks:

- □ Injunctive Relief
- □ Damages
- 7. Describe in detail the alleged violation(s) encountered by Plaintiff (may copy from Complaint and include additional pages if necessary):

- 8. Is the Defendant(s) the (check all that apply):
  - □ Building Owner
  - □ Business Operator
  - $\Box$  Not Sure
- 9. Defendant(s)' Information (name and address of business [including zip code] where alleged violation(s) were encountered by Plaintiff):

- 10. Please select from the following list the type of location that best describes the property at which the alleged violation(s) occurred (please check only one box unless there are multiple property types included in the Complaint; note that examples given are for illustrative purposes only and are not an exhaustive list for each category):
  - 1. Places of Lodging: an inn, hotel, motel, or other place of lodging. Except for an establishment located within a building that contains less than five rooms for rent or hire and is actually occupied by the proprietor of such establishment as the residence of such proprietor;
  - □ 2. Establishments Serving Food or Drink: a restaurant, bar, or other establishment serving food or drink;
  - □ 3. Places of Exhibition or Entertainment: motion picture houses, theaters, concert halls, stadiums;
  - □ 4. Places of Public Gathering: auditoriums, convention centers, lecture halls;
  - □ 5. Sales or Rental Establishments: bakery, grocery store, clothing store, hardware store, shopping center, apartment leasing office, or other sales or rental establishment;
  - G. Service Establishments: a laundromat, dry-cleaner, bank, barber shop, beauty shop, travel service, shoe repair service, funeral parlor, gas station, office of an accountant or lawyer, pharmacy, insurance office, professional office of a health care provider, hospital, or other service establishment;
  - □ 7. Public Transportation Terminals, depots, stations, parking lots (not including facilities related to air transportation);
  - □ 8. Places of Public Display or Collection: museums, libraries, galleries;
  - □ 9. Places of Recreation: parks, zoos, amusement parks;
  - □10. Places of Education: nursery schools, elementary, secondary, undergraduate, post-graduate, or other places of education;
  - 11. Social Service Center Establishments: day care centers, senior citizen centers, homeless shelters, food banks, adoption agencies;
  - □12. Places of Exercise or Recreation: gymnasiums, health spas, bowling alleys, golf courses;
  - □ 13. Facility associated with the Regents of the University of California, the Trustees of the California State University and the California State University, the office of the Chancellor of the California Community Colleges, a K−12 school district, or any local education agency;
  - $\Box$ 14. Other (please specify):

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# **11.** Please identify from the following list each type of construction-related barrier alleged in the complaint:

### Toilet, Lavatory, and Bathing Facilities

- □ Main entry doors are not accessible or not on accessible route (*e.g.*, thresholds, handles, pulls, latches, locks, clearances, *etc*. are non-compliant).
- □ Clear floor space and turning radius inside restroom are insufficient.
- □ Clear floor space and turning radius inside toilet stall are insufficient.
- $\Box$  Toilet stall door is not accessible.
- □ Space required to operate stall door is non-compliant.
- □ Mirrors are non-compliant or not accessible.
- □ Toilet/urinals (including portable toilets), flush controls, and/or toilet paper dispenser are non-compliant.
- □ Grab Bars are non-existent or non-compliant.
- □ Access height/clearance of counters is non-compliant, plumbing not sufficiently covered or not located properly.
- □ Coat racks or light switches are non-compliant.
- □ Lavatory water controls are non-compliant.
- □ Bathing facilities are non-existent or non-compliant (*e.g.*, no roll-in-shower or roll-in shower non- compliant, no grab bars, shower bench and water controls are non-compliant, *etc.*).
- □ Non-compliant or inaccessible toilet sanitary seat cover dispenser.
- □ Non-compliant or inaccessible hand sanitizer, liquid soap or paper towel dispenser.
- $\Box$  Lack of accessible bathroom.

#### Parking

- □ Insufficient number of designated accessible spaces.
- Existing spaces are non-compliant (*e.g.*, excessive slopes/cross-slopes, improper dimensions, striping, *etc.*).
- $\Box$  Designated accessible directional and/or parking signage is missing or non-compliant.
- $\Box$  Van-accessible and/or loading zones are non-compliant or non-existent.

## Path of Travel - Exterior

- □ Routes to and from parking lot or public right of way are not accessible (*e.g.*, non-compliant surfaces, excessive slope/cross-slope, lack of detectable warnings, not protected from traffic, *etc.*).
- □ Vertical transitions (ramps and/or stairs) are not compliant (*e.g.,* excessive slope/cross-slope; landings are non-compliant, lack of guardrails and/or wheel guard, *etc.*).
- $\Box$  Way-finding signs/symbols (or other directional signage) are missing or not visible.
- □ Doors are not accessible (*e.g.* the thresholds, handles, pulls, latches, locks, or clearances are non-compliant).
- $\Box$  Accessible path of travel is too far away or segregated from the main public entry.
- $\Box$  An obstacle in the accessible path of travel creates an access barrier.

#### Path of Travel – Interior

- □ Objects projecting into accessible path of travel (*e.g.*, a rack, display, or boxes placed in the aisle).
- □ Path of travel exists but is not designated, way-finding signs/symbols (or other directional signage) are missing or not visible.
- $\Box$  Path of travel is not accessible (*e.g.*, non-compliant surfaces, excessive slope/cross-slope, *etc.*).
- □ Maneuvering space at doors; required clearances are not compliant.
- □ Vertical transitions (ramps, stairs) are non-compliant (*e.g.*, excessive slope/cross-slope; landings are non-compliant, lack of guardrails and/or wheel guard, *etc.*).
- □ Handrails non-existent or not compliant.
- Elevators/ lift non-compliant or non-existent (e.g., locked out-of-order, size/configuration non- compliant, not independently operable, *etc.*).

#### Access to Goods, Support, Services, and Equipment

- □ Wheelchair spaces in assembly areas are non-existent or non-compliant (*e.g.* insufficient number of seats provided; companion seating not provided/non-compliant, wheelchair seating not offered at varying lines of sight or at varying price points, clearances not sufficient, *etc.*).
- □ Surface heights and space requirements for counters, tables, bars, or seating are not compliant.
- □ Signage is not compliant with tactile requirements, sight-impaired requirements, or hearingimpaired requirements.
- □ Public telephones are not wheelchair accessible.
- $\Box$  Public telephones do not have accessible volume control.
- □ Point-of-sale machines are non-compliant or not accessible, e.g., gas pumps, ATM machines, cashier machine, or other fare mechanism.
- □ Dressing, fitting, or locker rooms are non-compliant.
- □ Accessible sleeping rooms, units, spaces, or suites are non-existent or of insufficient quantity, and/or lack accessible features.
- $\Box$  Patient bedrooms or baths are non-accessible.
- $\Box$  Audible and visual alarms/notification mechanisms are not compliant.
- $\Box$  Amusement rides are not compliant.
- □ Bus stop, bus stop pad, bus station/terminal/building or other transportation facility is not compliant.
- □ Pool lift or other accessible pool entry non-existent or non-compliant, transfer systems and transfer walls non-compliant, sauna/hot tub non-compliant.
- $\hfill\square$  Drinking fountains and water coolers are non-compliant.
- $\Box$  Accessible features not maintained.
- $\Box$  Lack of separate call button for elevator.
- □ Insufficient documentation to determine alleged violation.
- $\Box$  Staff or policy provided barrier to access.
- $\Box$  Spa, aesthetician equipment, or facilities not accessible.
- $\square$  Physical effective communication barriers

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Other (please specify):\_\_\_\_\_

## 12. For complaints addressing education entities and facility categories (select these categories as appropriate in addition to categories above that apply):

- □ Classroom not accessible (*e.g.*, line of sight, path of travel, tables, desks).
- □ Equipment for curricular purpose (*e.g.*, lab equipment, music equipment, theatre equipment, *etc.*) not accessible.
- Extracurricular equipment or facility not accessible.
- □ Playground facility not accessible.
- □ Infant/disabled student changing area not accessible.
- □ Separate/segregated facility or opportunity provided.
- $\Box$  Athletic facility not accessible.
- $\Box$  Administrative office not accessible.
- □ Library, research or computer facility not accessible.
- □ Cafeteria, dining facility, or café not accessible.
- □ Student or faculty lounge not accessible.
- □ Assembly area (*e.g.*, theatre or auditorium) not accessible.
- $\Box$  Museum or gallery not accessible.
- □ Construction-related barrier in field trip or other off-campus school activity.
- $\Box$  Student housing not accessible.
- Other (please state concisely): \_\_\_\_\_

## 13. If your complaint alleges non construction-related barriers encountered, please list here: [fill in blank]