



AccessAbility Decal Program SCREENING FORM

FACILITY NAME: _____ SCREENING DATE: _____

STREET ADDRESS: _____

CITY, STATE, ZIP: _____ PHONE: _____

BUSINESS CONTACT: _____ SURVEYOR(S): _____

PARKING

1. Is there dedicated parking for the facility? (parking over which the facility has control) Yes No N/A
 - a. If yes, how many total spaces are there? _____
 - b. Of those spaces, how many have upright signs saying they are accessible spaces? _____
 - c. Of those accessible spaces, how many have upright signs saying they are "van accessible"? _____
 - d. Do all the accessible spaces have a striped access aisle? Yes No N/A
 - e. Are the aisles at least 5 feet wide? Yes No N/A
 - f. Is the width of each van accessible space plus adjacent access equal to at least 16 feet? Yes No N/A

COMMENTS:

ACCESS ROUTE (TO GET TO ENTRANCE, COMMON AREAS, ETC.)

1. Is there a clear, accessible path of travel from the accessible parking to the facility entrance? Yes No N/A
2. Is the accessible parking on the shortest route to the accessible entrance? Yes No N/A
3. Are there ramps and cutaways? Yes No N/A
 - a. Measure the length of each ramp/cutaway
 - A _____ feet/inches
 - B _____ feet/inches
 - C _____ feet/inches
 - b. Measure the height of each ramp/cutaway rise at its highest point.
 - A _____ feet/inches
 - B _____ feet/inches
 - C _____ feet/inches
4. Are ramps/cutaways at least 36" wide? Yes No N/A
5. If ramps are longer than 6', do they have railings 34" to 38" high? Yes No N/A
6. Is any ramp longer than 30 feet? Yes No N/A
 - a. If yes, are there areas at least 5' x 5' every 30' of length? Yes No N/A
7. If there are steps along the path of travel, are they 1/2" high or less? Yes No N/A
8. Is the path of travel clear of protruding objects between 27" and 80" from the ground? Yes No N/A

To measure the grade of a ramp, determine the height (the difference between the highest and lowest points) in inches, then measure the length of the ramp. 1:12 means for every inch of height, there are 12" of length.

COMMENTS:

ENTRANCE & INTERIOR DOORS

1. If there is more than one entrance to a facility, is it clear (by signage or observation) which is the accessible entrance? Yes No N/A
2. For the accessible entrance: EXTERIOR
 - a. Is the exterior door an unobstructed, non-revolving, hinged door which can be opened with a closed fist and has an opening at least 32" wide? Yes No N/A
 - b. If there is a threshold, measure the height: _____
 - c. Is the edge beveled (like a tiny ramp)? Yes No N/A
3. For the accessible entrance: INTERIOR
 - a. If there are interior doors, are they unobstructed, non-revolving, hinged, easily opened with a closed fist and with an opening at least 32" wide? Yes No N/A
 - b. If there is a threshold, measure the height Yes No N/A
 - c. Is the edge beveled (like a tiny ramp) Yes No N/A

COMMENTS:

ELEVATORS & STAIRS

1. How many levels owned by this business and open to the public are there? Yes No N/A
2. Are there elevators? (if no, leave next questions blank) Yes No N/A
3. Do they serve all public levels that are not ramped? Yes No N/A
4. Are elevator controls no higher than 48" Yes No N/A
5. Are they closed fist operable? Yes No N/A
6. Are they marked with raised characters and Braille? Yes No N/A
7. Are there both visual and audible floor indicators? Yes No N/A
8. Are there Braille floor indicators on the exterior frame of the elevator on each floor? Yes No N/A

COMMENTS:

COMMON AREAS (INTERIOR AND EXTERIOR)

1. Are the aisles at least 36" wide? Yes No N/A
2. Between the range of 27" to 80", are the aisles free from protrusions greater than four inches from the wall? Yes No N/A
3. Are seating/tables fixed? Yes No N/A
4. Are alternatives to fixed seating provided? Yes No N/A
5. a. If there is a service counter, measure the height _____ at the lowest point.
b. If there is a service counter, measure the width _____ at the lowest point.
6. If there is a service counter, is it the same depth at the lowest and highest point? Yes No N/A

COMMENTS:

For more information or assistance in evaluating accessibility, call Abilities Unlimited at 812-332-1620, or contact the City of Bloomington Community and Family Resources Department at 812-349-3471 or cca@bloomington.in.gov.

PUBLIC RESTROOMS AND DRINKING FOUNTAINS

1. Are there public restrooms owned by the business? Yes No N/A
2. Is there accessibility signage? Yes No N/A
3. What is the width of the door opening? Yes No N/A
4. If there are multiple floors, is there one accessible bathroom per floor? Yes No N/A
5. Is the bathroom/stall at least 5' x 5' (measure wall to wall)? Yes No N/A
6. Are there grab bars at the back and side of the toilet? Yes No N/A
7. What is the distance from the length of the floor to the operable part of the following fixtures:
Paper towel dispenser _____ Soap dispenser _____
8. Is the toilet paper dispenser between 15" and 48" from the ground and 7"- 9" in front of the toilet? Yes No N/A
9. If there is a drinking fountain, is one spout no higher than 36", measured from the floor or ground surface to the spout outlet? Yes No N/A

COMMENTS:

OUTDOOR DINING FACILITIES

1. Spaces are in compliance with the "Common Areas" portion of this form with regard to: accessible route, seating, and service counters. Yes No N/A
2. For picnic areas and shelters: are these located on an accessible route --firm, level, stable, non-slip surface, with tables at least 30" wide (with extended end at least 19" from table legs and clearance height 29-34")? Yes No N/A
3. For accessible grills: cooking surface 30-36" high; on paved level textured surface at least 3' in all directions; fire at most 18" high; heat-resistant handles; horizontal reach at most 15"? Trash receptacles with rounded corners, free from sharp edges; no higher than 36"? Yes No N/A

COMMENTS:

CUSTOMER SERVICE AND EMPLOYMENT

1. Does your staff receive information during orientation on how to serve customers with disabilities? Yes No N/A
2. Do you have materials available in alternative formats for people with visual disabilities? Yes No N/A
3. Do you provide additional support to customers with disabilities?
a. If so, how do you let them know support is available?

4. Have you employed people with disabilities in the past? Yes No N/A
5. Do you currently employ people with disabilities? Yes No N/A
6. Are you familiar with the resources available in case an employee with a disability needs an accommodation? Yes No N/A

COMMENTS:

Note on the use of this form: This Screening Form is only a basic guide for evaluation purposes, and is not a substitute for state and federal accessibility standards. This form is also available at <http://bloomington.in.gov/cca> updated Jan. 2012

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