

Constituency Office Barrier-free Compliance Plan

| | MLA Name Denise Feterson Raju | Gonstituency Chester- St Margaret |
|---|---|--|
| House of Assembly Nova Scotia | Street <i>Unit 4, 3794 Hwy 3</i> | |
| | Municipality Chester NS | Postal Code |
| My Office is Barrier-free | | |
| I certify my constituend Management Commission | y office meets the barrier-free requ on Regulations. | irements as outlined in the House if Assembly Management |
| MLA Signature | Submission Date | |
| My constituencys office is | not Barrier-free | |
| We do not have visible Al | D audio alarms. We request HAMC co | onsider this "technical in nature" and waive the requirement. |
| I intend to do the following | y to remedy the non-compliant reasons | listed above |
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| MLA Signature DRA | Directo | Approved The Honourably The Speaker Honourab |
| Notes | Date | City 1 17 Bate - Co. |
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Barrier- free Check List Parking

- Paved Lot
- One van-accessible space with signage

Barrier Free approach

- · Curb cut
- Ramp
- Sidewalk

Meeting Space and general accessibility

- Braille signs
- · Sized and spaced for accessibility
- · Audible and visible alarms

Doors and entrance

- · Level threshold (may include ramp or elevator)
- 1000 mm width
- · Sized and spaced for accessibility
- 2 kg door opening pressure or power door

Washrooms

- · Raised toilet
- Accessible sink
- Sized and spaced for accessibility
- · Grab bars
- Appropriate dispensers
- · Installed at correct height
- · Braille signs

A more detailed checklist is available on the Members Only site at *nslegislature.ca/index.php/login* Rev 19Aug2014