

What is the role of the City of Dubuque in ADA compliance?

The role of the City of Dubuque is to ensure that all facilities used by the public are fully accessible to persons with disabilities. This includes all parking lots, retail and wholesale stores open to the public, restaurants, cafés, taverns, gas stations, public buildings, lodging, schools, parks, and entertainment venues. To this end, the City has adopted, by ordinance, the lowa Accessibility Code.





Downtown ADA Assistance Program















PROGRAM OVERVIEW

The Downtown ADA Assistance Program is designed to assist businesses with the cost of becoming ADA compliant. Qualified applicants can receive up to 50% of the cost of the project from the City of Dubuque, after already receiving a 50% federal tax credit on the project, up to \$5,000 per property.

ELIGIBILITY REQUIREMENTS

Eligible properties must be located in the Greater Downtown Urban Renewal District. A map of the district is included in this brochure and is also available at www.cityofdubuque.org/ada, or by calling 563.589.4150.

Eligible projects include readily achievable accessibility modifications to existing businesses; for example, ramps, restrooms, etc.

All assistance is on a first come, first served basis.

Contacts:

City of Dubuque
Building Services Department >
Gary Blosch, ADA Inspector
50 West 13th Street
Dubuque, lowa 52001
gblosch@cityofdubuque.org
563-690-6040

City of Dubuque
Human Rights Department >
1300 Main Street
Dubuque, lowa 52001
HumanRgt@cityofdubuque.org
563-589-4190

Dubuque Main Street, LTD. >
Design Assistance
1069 Main Street
Dubuque, lowa 52001
office@dubuquemainstreet.org
563-588-4400

Proudly Accessible Dubuque > Info@ProudlyAccessibleDubuque.com 563-580-7357

{ examples of completed projects }







ADA ASSISTANCE APPLICATION

Complete the ADA Assistance application form below and mail to:
Gary Blosch, City of Dubuque ADA Inspector
50 West 13th Street
Dubuque IA 52001

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Complete the ADA Assistance application form online at www.citvofdubuque.org/ADAassistance

APPLICANT NAME: BUSINESS NAME: ADDRESS: PHONE NUMBER: ALTERNATE PHONE NUMBER: COST OF PROJECT (please attach estimates): DESCRIPTION OF PROJECT (please attach sketch): PROPOSED COMPLETION DATE (prior to inspection deadline): FOR CITY USE ONLY:				
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