

DISABILITY ACCESS & EDUCATION FEE QUARTERLY REPORT (\$1)

As required by Government Code Section 4467 (Senate Bill 1186; Chapter 383, Statutes of 2012), each city, county, or city and county shall make a quarterly report on the additional one-dollar fee collected on the sale or renewal of each business license (or similar instrument) in the previous calendar year. All fields below are required.

QUARTERLY DATES		
Quarter Began (Month/Year):	Quarter Ended (Month/Year):	
CITY/COUNTY AND DEPARTMENT		
Which City or County are fees being remitted for?		
Department Name:		
Department Mailing Address:		
City:	State:	Zip Code:

PREPARER'S INFORMATION	
First Name:	Last Name:
Work Phone #:	Work Email:

APPLICANT INFORMATION		
Number of new and renewal applicants combined:	(a)	
Total fees collected (a x \$1):	(b)	\$
Total fees enclosed (b x 30%):	(c)	\$

Under penalty of perjury, I declare that I have examined this report, and to the best of my knowledge and belief, it is true, correct, and complete.

SIGNATURE

TITLE

DATE

Please make check payable to the Division of the State Architect.

Mail payment and form DSA 786 to:

Division of the State Architect

Attn: Fiscal Services

1102 Q Street, Suite #5100

Sacramento, CA. 95811