

PETITION FOR ADOPTION, AMENDMENT, OR REPEAL OF A STATE ADMINISTRATIVE RULE

Print Form

In accordance with RCW 34.05.330, the Office of Financial Management (OFM) created this form for individuals or groups who wish to petition a state agency or in stitution of higher education to adopt, amend, or repeal an administrative rule. You may use this form to submit your request. You also may contact agencies using other formats, such as a letter or email.

The agency or institution will give full consideration to your petition and will respond to you within 60 days of receiving your petition. For more information on the rule petition process, see Chapter 82-05 of the Washington Administrative Code (WAC) at http://apps.leg.wa.gov/wac/default.aspx?cite=82-05.

| CONTACT INFORMATION (please type or print) | | | |
|--|-----------------------------------|---|---|
| Petitioner's Name Elizabeth M. Stumpi | | | _ |
| Name of Organization | | | |
| Mailing Address 310 Olympic Blvd | 117511 | | |
| City Everett | State WA | Zip Code 98203 | |
| Telephone 425-508-7065 | Email malm820@ | @comcast.net | |
| COMPLETING AND SENDING PETITION FORM | | | |
| Check all of the boxes that apply. | | | |
| Provide relevant examples. | | | |
| Include suggested language for a rule, if possible. | | | |
| Attach additional pages, if needed. | | | |
| Send your petition to the agency with authority to a their rules coordinators: http://www.leg.wa.gov/Coordinators | dopt or adminis eReviser/Docur | ster the rule. I-lere is a list of agencies and ments/RClist.htm. | |
| INFORMATION ON RULE PETITION | | | |
| Agency responsible for adopting or administering the | rule: Washing | ton Department of Health | |
| 1. NEW RULE - I am requesting the agency to | adopt a new ru | ıle. | |
| The subject (or purpose) of this rule is: | | | |
| The rule is needed because: | | | |
| ☐ The new rule would affect the following peop | le or groups: | | |

| List rule number (WAC), if known: 246-260-0 | 31 |
|---|--|
| wi | ease change the barriers requirements at limited use and general use pools to comply ith ADA door height laws. A latch handle at 72 inches or 60 inches high is impossible reach from a seated position in a whe alchair. It should be no higher than 48 inches. |
| pl | a wheelchair dependent person, I am not able to open doors with a latch handle aced above 48 inches,. This has been a safety issue for me at LA Fitness using their pol, shower, toilet and locker room facilities. |
| at | the only barrier requirement was to have a continuously locked latch or coded latch ordinary height, this would give equal access to wheelchair dependent people and rovide child safety preventing unauthorized entry to a pool area. |
| d | VAC 246-260-031 causes confusion at limited use and general use pools. The health lepartment says they "technically" meet the code even though they are in clear iolation of ADA door handle requirement. This must be changed to have safety for all |
| 3. REPEAL RULE - I am requesting the ag | gency to eliminate an existing rule. |
| List rule number (WAC), if known: | |
| (Check one or more boxes) | |
| It does not do what it was intended to do | |
| It is no longer needed because: | |
| It imposes unreasonable costs: | |
| ☐ The agency has no authority to make this | s rule: |
| ☐ It is applied differently to public and priva | ite parties: |
| It conflicts with another federal, state, or rule. List conflicting law or rule, if known | |
| ☐ It duplicates another federal, state or local List duplicate law or rule, if knov/n: | al law or rule. |
| Other (please explain): | |

2. AMEND RULE - I am requesting the agency to change an existing rule.