



**TEXAS DEPARTMENT OF LICENSING AND REGULATION
REGULATORY PROGRAM MANAGEMENT - ARCHITECTURAL BARRIERS**

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PROOF OF INSPECTION

This form was created by the Texas Department of Licensing and Regulation (TDLR) to provide proof of inspection to a building owner and is not intended to imply that a Registered Accessibility Specialist (RAS) is an employee of TDLR or that they have been hired by TDLR to perform this inspection.

This form is to be filled out and signed at the time and location of the inspection.

PROJECT INFORMATION

PLEASE PRINT OR TYPE

1. Project Name:		2. TDLR Project #:
3. Project Address:		Suite #:
City:	County:	Zip Code:

RAS INFORMATION

4. Name:		5. RAS #:	
6. Company/Agency:			
7. Address:		Suite #:	
City:		State:	Zip Code:
8. Phone Number: ()	9. Fax Number: ()	10. Email:	
I certify that I have performed an inspection of the referenced construction project:			
11. RAS signature		Date of Inspection	

OWNER/OWNER DESIGNEE* PRESENT DURING THE INSPECTION

12. Name:			
13. Company/Agency:			
14. Address:		Suite #:	
City:		State:	Zip Code:
15. Phone Number: ()	16. Fax Number: ()	17. Email:	
I certify that I was present during the inspection of the referenced construction project:			
18. Signature of Owner / Designee*		Date of Inspection	

*The designee may be someone other than the owner or designated agent referenced in Administrative Rule 68.10(11).