



TEXAS DEPARTMENT OF LICENSING AND REGULATION

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EABPRJ

IMPORTANT INSTRUCTIONS - PLEASE READ BEFORE BEGINNING

This is only the REGISTRATION of the construction project. The building/facility owner is responsible for ensuring that the Project Registration Form, construction documents, and applicable fees are mailed, shipped, or hand delivered to TDLR or a Registered Accessibility Specialist (RAS) for the required review and inspection of the project. Please print or type.

ARCHITECTURAL BARRIERS PROJECT REGISTRATION FORM

The required plan review will be performed by: (Check One) [] TDLR [X] RAS (Name/Lic #): Robert Ronson/00000016
PERSON REGISTERING PROJECT
1.Name Robert Ronson RAS # 00000016
2.Address 107 Meadow Woods Dr City Kyle State TX Zip 78640
3. Phone (512) 787-3687 **Email robert@adaassistance.com
PROJECT
4. Project Name
5. Building or Facility Name
6.Address City Zip County
TENANT (if other than owner)
7. Tenant Contact Name Phone ()
BUILDING OR FACILITY OWNER (person or entity that holds title to property)
8. Name Phone ()
9. Address City State Zip
10. Owner Contact Name
11. Address City State Zip
12. Phone () **Email
DESIGN FIRM
13. Name Phone ()
14. Address City State Zip
15. Designer Name **Email
16. Type of License: (Check One) [] Architect [] Engineer License Number (if applicable)
[] Interior Designer [] Landscape Architect [] Other (includes not licensed)
PROJECT DESCRIPTION
17. Start Date (MM/YY): 18. Completion Date (MM/YY): 19. Estimated Cost \$
20. Type of Work: (Check One) [] New Construction [] Renovation/Alterations [] Additions to Existing Building [] Historic Preservation
21. Type of Funds: (Check One) [] Public Funds, public land, or is a state lease 22. State Lease No. (if applicable)
[] Privately funded, on private land for private use
23. Does this building(s) have more than one level? (Check One) [] Yes [] No
24. Are there any elevators, escalators, or platform lifts in this building? (Check One) [] Yes [] No
25. Does this building(s) have any boilers? (Check One) [] Yes [] No
26. Scope of Work: _____

INSTRUCTIONS FOR COMPLETING A PROJECT REGISTRATION FORM – AB 005

1. **Person Registering Project Name** – Enter the name of the person completing the form
2. **Address** – Enter the mailing address and suite number (if applicable) of the person named in #1
3. **Phone** – Enter the phone number and email address (optional) of the person named in #1
4. **Project Name** - Enter the name of the project (examples: CLASSROOM ADDITION, TENANT FINISH OUT FOR DR. SMITH)
5. **Building / Facility Name** - If this project is located in a building or facility with a name, enter the name (examples: the "CLASSROOM ADDITION" is located in the building or facility named "WASHINGTON HIGH SCHOOL"; the "TENANT FINISH OUT FOR DR. SMITH" is located in the office building named "MEDICAL PLAZA II")
6. **Project Address** - Enter the physical address (if available) and the suite number (if applicable) of the project. Post Office Box numbers are not acceptable.
7. **Tenant Contact Name** - Enter the name and phone number for the contact person or persons, company, corporation, authority, commission, board, governmental entity, institution or any other unit that will occupy the project space.
8. **Building or Facility Owner** - Enter the name and phone number of the person or entity (company, corporation, authority, commission, board, governmental entity, institution or any other unit) that holds title to the property.
9. **Owner Address** - Enter the mailing address and the suite number (if applicable) of the facility owner named in #9.
10. **Contact Name** - If there is a contact person other than the facility owner (as listed in #9), enter the name and phone number of the person representing the owner
11. **Contact Address** - Enter the mailing address and the suite number (if applicable) of the person named in #11 if other than the owner.
12. **Contact Phone** – Enter the phone number and email address (optional) of the person named in #11 if other than the owner
13. **Design Firm** - Enter the name and phone number of the design firm or company responsible for the design of the project.
14. **Firm Address** - Enter the mailing address and the suite number (if applicable) of the firm named in #14.
15. **Designer Name** - Enter the name of the architect, engineer, interior designer, or landscape architect with overall responsibility for the design of the project and whose seal is affixed to the drawings and enter their e-mail address.
16. **Type of License** - Check the box for the applicable license type of the designer and enter the license number (if applicable). If no design professional, check the box for "other".
17. **Start Date** - Enter the date construction is scheduled to begin (month and year).
18. **Completion Date** - Enter the date construction is scheduled to be completed (month and year).
19. **Estimated Cost** - Enter the estimated cost of construction. Cost should not include site acquisition, furnishings, or equipment that is not part of the building mechanical systems.
20. **Type of Work** – Check the box for the applicable type of work.
21. **Type of Funds** - Check the box for the applicable method of funding.
22. **State Lease No.** (if applicable) - Enter the state lease number if the construction project is for purposes of a state agency lease contract and/or occupancy by a state agency.
23. **Does this building(s) have more than one level?** – Check yes or no
24. **Are there any elevators, escalators, or platform lifts in this building?** – Check yes or no
25. **Does this building(s) have any boilers?** – Check yes or no
26. **Scope of Work** - Enter a detailed description of the construction activities.

WHAT TO SUBMIT

1. One complete set of construction documents (plans and specifications) for all disciplines. All documents applicable to the project should be submitted as one package.
2. A completed Architectural Barriers Project Registration Form or AB Project Registration Confirmation page for each site/address or State Lease Registration Form (if applicable).
3. If the review and/or inspection will be performed by ADA Assistance, submit a check or money order payable to "ADA Assistance, 107 Meadow Woods Dr, Kyle, Texas 78640.
4. When construction documents are submitted **after** completion of construction, the late submittal Project Filing fee shall apply.
5. An architect, interior designer, landscape architect, or engineer with overall responsibility for the design of a building or facility subject to §469.101 of the Act, shall mail, ship, or hand-deliver the construction documents along with a Proof of Submission form to the department, a registered accessibility specialist, or a contract provider not later than the fifth day after the plans and specifications are issued. In computing time under this subsection, a Saturday, Sunday or legal holiday is not included.
6. In instances when there is not a design professional with overall responsibility, the owner of a building or facility subject to §469.101 of the Act, shall mail, ship, or hand-deliver construction documents to the department, a registered accessibility specialist, or a contract provider prior to filing an application for building construction permit or commencement of construction.
7. An Elimination of Architectural Barriers Project Registration form or Architectural Barriers Project Registration Confirmation Page must be completed for each subject building or facility and submitted along with the applicable fees when the design professional or owner submits the construction documents. (One complete set of construction documents (plans and specifications) for all disciplines). All documents applicable to the project should be submitted as one package.

FEE SCHEDULE

The following fees are applicable only to services performed by ADA Assistance effective 6/1/2008

Estimated Construction Cost	Plan Review Fee	Project Filing Fee	Inspection Fee
50,000 - 200,000	\$275	\$175	\$400
200,001 - 500,000	\$340	\$175	\$425
500,001 - 1,000,000	\$405	\$175	\$450
1,000,001 - 3,000,000	\$470	\$175	\$495
3,000,001 - 5,000,000	\$600	\$175	\$625
5,000,001 – 10,000,000	\$645	\$175	\$670
10,000,001- 15,000,000	\$810	\$175	\$835
15,000,001 - 20,000,000	\$980	\$175	\$1005
20,000,001 - 30,000,000	\$1200	\$175	\$1225
> 30,000,000	Negotiated	\$175	Negotiated
Late Project Filing Fee		\$300	
Preliminary Review/Inspection Fee		75% of respective fee	
Special Review Fee		\$100 per hour	
Special Inspection Fee		\$100 per hour, \$150 1 st hour	
Optional Re-inspection Fee		75% of respective fee	
Survey of Existing Buildings		Call for quote	

Example: Estimated construction cost is \$250,000; submit the project filing fee of \$175.00 and the review fee of \$340.00 for a total of \$515.00. The inspection fee would be \$425.00.

NOTE: All fees are non-refundable.