

TEXAS DEPARTMENT OF LICENSING AND REGULATION
ARCHITECTURAL BARRIERS - PROJECT REGISTRATION FORM

P.O. Box 12157, Austin, Texas 78711 • (512) 463-6599 • (800) 803-9202 • FAX (512) 475-2871
 architectural.barriers@license.state.tx.us • www.license.state.tx.us

PLEASE SEE IMPORTANT INSTRUCTIONS BEFORE BEGINNING

NOTE: A completed project registration form, fee payment, and construction documents are required to register a project.
 Failure to submit any of these items will delay processing.

PRINT OR TYPE

1. Project Name			
2. Building/Facility Name			
3. Location/Address	City	Zip Code	County
4. Tenant (if other than owner)		Telephone Number ()	
5. Mailing Address	City	State	Zip Code
6. Contact Name		Telephone Number ()	
7. Mailing Address	City	State	Zip Code
8. Building/Facility Owner (NOT tenant)		Telephone Number ()	
9. Mailing Address	City	State	Zip Code
10. Contact Name		Telephone Number ()	
11. Mailing Address	City	State	Zip Code
12. Design Firm		Telephone Number ()	
13. Mailing Address	City	State	Zip Code
14. Designer Information:		Print Name:	Date Construction Documents Issued:
<input type="checkbox"/> Architect <input type="checkbox"/> Interior Designer <input type="checkbox"/> Engineer <input type="checkbox"/> Landscape Architect <input type="checkbox"/> Other		License No. (If applicable)	
15. Scheduled Construction Start Date (MM/YY):	16. Scheduled Construction Completion Date (MM/YY):	17. Estimated Project Construction Cost \$	
18. Description: Indicate type of work and briefly describe scope. <input type="checkbox"/> New Construction <input type="checkbox"/> Renovation/Alteration <input type="checkbox"/> Additions/Renovations <input type="checkbox"/> Addition to Existing Bldg. <input type="checkbox"/> New Construction/Renovation <input type="checkbox"/> Historic Preservation Scope of work: _____			
19. <input type="checkbox"/> This project involves Public Funds, Public Land, or is a State Lease <input type="checkbox"/> This project is Privately Funded, on Private Land, for Private Use		20. State Lease No. (if applicable)	
21. I hereby notify the Texas Department of Licensing and Regulation of the described project and of my intent to perform, or cause to be performed, all services necessary to design said project in accordance with the provisions of Article 9102, Texas Civil Statutes. I certify that I am the registered design professional with overall responsibility for the design of the project and whose seal is affixed to the construction documents.			
Signature of Architect, Engineer, Interior Designer, or Landscape Architect		Date	Email Address
OR			
I hereby notify the Texas Department of Licensing and Regulation of my intent to comply with the provisions of Article 9102, Texas Civil Statutes.			
Signature of Building Owner or Designated Agent		Date	Email Address

Side 1 of 2 Sided Form

NOTE: An individual who completes and files this form with the Texas Department of Licensing and Regulation (the Dept.) is entitled to the following:

- 1) to be informed about the information that the Dept. collects about the individual, upon their request and subject to a few exceptions;
- 2) to receive and review the information, under Sections 552.021 and 552.023 of the Texas Govt. Code; and
- 3) to have the Department correct information about the individual that is incorrect, under Section 559.004 of the Texas Govt. Code.

REGISTERED ACCESSIBILITY SPECIALIST USE ONLY				Date construction documents were submitted to RAS for Plan Review	
RAS Contact Information		REVIEW STATUS			
RAS#:	Ph#:	APPROVED <input type="checkbox"/>	DISAPPROVED <input type="checkbox"/>		CONDITIONAL APPROVAL <input type="checkbox"/>
Name: Address:		<input type="checkbox"/> I will be performing TAS Inspection for this project <input type="checkbox"/> Inspection Filing Fee is enclosed.			
E-mail:					
I certify that the information pertaining to the submission date of the construction documents is true and correct.					
Signature of Registered Accessibility Specialist				Date	
DEPARTMENT USE ONLY				Date Submitted to TDLR	
AB Number		Complaint Number			
Side 2 of 2 Sided Form					

INSTRUCTIONS FOR COMPLETING PROJECT REGISTRATION FORM – AB 005

1. **Project Name** - Enter the actual name of the project (examples: CLASSROOM ADDITION, PEDIATRIC FLOOR RENOVATION, CARD SHOP, DR. SMITH'S OFFICE, etc.) If named for a person, use the last name only (ex: WASHINGTON HIGH SCHOOL).
2. **Building/Facility Name** - If the "Project" is part of another building or facility, enter the name of the building or facility (examples: **Project:** CLASSROOM ADDITION, **Building/Facility:** WASHINGTON HIGH SCHOOL; **Project:** JONES & SMITH, INC. OFFICE RENOVATION, **Building/Facility:** AMERICAN OFFICE PLAZA; **Project:** CARD SHOP, **Building/Facility:** MAIN STREET MALL; **Project:** DR. SMITH'S OFFICE, **Building/Facility:** MEDICAL OFFICE TOWER). For facilities named after a person, use only the last name (example: WASHINGTON HIGH SCHOOL).
3. **Location** - Enter the physical location, including the street address if available and the suite number if applicable. Post Office Box numbers are not acceptable.
4. **Tenant** - Enter the name and telephone number of the person or persons, company, corporation, authority, commission, board, governmental entity, institution or any other unit that intends to occupy project space.
5. **Mailing Address** - Enter the complete mailing address of the tenant listed in #4.
6. **Contact** - Enter the name and telephone number of the person representing the tenant (as listed in #4).
7. **Mailing Address** - Enter the mailing address of the person named in #6, if different than the address entered in #5.
8. **Building/Facility Owner** - Enter the name and telephone number of the person or persons, company, corporation, authority, commission, board, governmental entity, institution or any other unit that holds title to subject building or facility.
9. **Mailing Address** - Enter the mailing address of the owner named in #8.
10. **Contact** - Enter the name and telephone number of the person representing the owner (as listed in #8) who is to receive all correspondence pertaining to the project, including post-construction reports.
11. **Mailing Address** - Enter the mailing address of the person named in #10, if different than the address entered in #9.
12. **Design Firm** - Enter the name and telephone number of the firm or company responsible for the design of the project.
13. **Mailing Address** - Enter the mailing address of the firm or company named in #12.
14. **Contact** - Enter the name of the architect, engineer, interior designer, landscape architect, or building designer having overall responsibility for the design of the project and whose seal is affixed to the drawings. Include type of license and license number, if applicable. The date the construction documents were issued must also be entered. **NOTE:** Issue is defined in Administrative Rule 68.10.
15. **Start Date** - Enter the date construction is scheduled to begin (month and year).
16. **Completion Date** - Enter the scheduled completion date (month and year). If this date changes notify TDLR. **NOTE:** Administrative Rule 68.80 stipulates owner must pay applicable inspection fees and notify TDLR of the point of contact within 30 days of completion of construction.
17. **Project Cost** - Enter the estimated cost of construction.
18. **Project Description** - Furnish a brief description of the project. Include square footage, floor levels, special features, etc.
19. **Funding** - Indicate the method of funding.
20. **State Lease Number**(if applicable) - Enter the state lease number if construction project is for purposes of a state agency lease contract and/or occupancy by a state agency.
21. **Name and Signature** - of either person noted below:
Signature of Project Architect/Engineer/Interior Designer/Landscape Architect - Signature of registered design professional who has overall responsibility for the design of the project and whose seal is affixed to the drawings; or
Signature of Owner/Agent - Signature and title of the owner or owner agent named in #10. In the absence of a registered design professional, building designer may sign as owner's agent.

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 to ensure inclusion in the review.
2. A fully completed and signed Architectural Barriers Project Registration Form for each site/address or State Lease Registration Form if applicable.
3. For TDLR services, submit check or money order payable to "Texas Department of Licensing and Regulation" at P.O. Box 12157, Austin, Texas 78711. **NOTE:** If inspection fees are not paid with review fees, owner must pay applicable inspection fees and notify TDLR of the point of contact within 30 days of completion of construction (based on date in #16).
4. When construction documents are submitted after completion of construction, the late submittal fee shall apply.
5. For Registered Accessibility Specialist (RAS) review and/or inspection services, contact the respective RAS.

TDLR FEE SCHEDULE

Project Cost	Project Filing Fee	Review Fee	Late Submittal Fee	Inspection Filing Fee	Inspection Fee
\$ 50,000 - 200,000	\$100	\$250	\$350	\$100	\$350
200,001 - 500,000	100	315	480	100	375
500,001 - 1,000,000	100	380	610	100	400
1,000,001 - 5,000,000	100	445	740	100	445
5,000,001 - 10,000,000	100	575	1,000	100	575
10,000,001 - 15,000,000	100	620	1,090	100	620
15,000,001 - 25,000,000	100	785	1,420	100	785
25,000,001 - 50,000,000	100	955	1,750	100	955
50,000,001 - 75,000,000	100	1,175	2,200	100	1,175
>75,000,001 - Contact TDLR for negotiated Fee					

Example: Estimated construction cost is \$250,000, submit the project filing fee of \$100.00 and the review fee of \$315.00 for a total of \$415.00. This will be the same for inspection, submit the inspection filing fee along with the inspection fee. **NOTE: All fees are non-refundable.**

NOTE: Rule 68.80 (c): When the estimated construction cost is less than \$50,000 and a review, inspection or both are requested, a \$200 plan review fee and/or an \$200 inspection fee shall be paid.

Variance Appeal	\$200 Each item	Replacement Certificates	\$ 25 Each
Preliminary Review	\$145	Inspection State Lease	\$225
Special Inspection	\$215 Per Hour (2hr min.)	(no construction involved)	
Variance Application	\$175 Each item	(annual lease expense in excess of \$12,000)	