



**TEXAS DEPARTMENT OF LICENSING AND REGULATION
COMPLIANCE DIVISION - ARCHITECTURAL BARRIERS**

P.O. Box 12157 • Austin, Texas 78711 • (512) 463-3211 • (877) 278-0999 • FAX (512) 475-2886
architectural.barriers@license.state.tx.us • www.license.state.tx.us

REQUEST FOR INSPECTION

In accordance with the Texas Architectural Barriers Act, Texas Government Code, Chapter 469, and Administrative Rule 68.52, the owner of a building or facility subject to Chapter 469.101 of the Act shall obtain an inspection from the department, a registered accessibility specialist, or a contract provider not later than the first anniversary of the completion of construction.

The request for an inspection must be made by completing this form and submitting it to the department, a registered accessibility specialist, or contract provider not later than 30 calendar days after the completion of construction. If the Request for Inspection form is submitted to the Department, the form must be accompanied by the applicable inspection fee.

The department, a registered accessibility specialist, or a contract provider must receive the completed Request for Inspection form prior to proceeding with the inspection. Following the inspection, the owner will be advised in writing of the results.

PROJECT INFORMATION

PLEASE PRINT OR TYPE

1. Project Name: South Tower CRC/Park Pending Construction Items		2. EABPRJ #: A9809566
3. Project Address: South Tower Rd.		Suite #:
City: Alamo, Texas	County: Hidalgo	Zip: 78516

OWNER / AGENT INFORMATION

(Check One) I am the Owner (the person/entity that holds title to the property) or the Owner's Agent

4. Name:		5. Company / Agency: Hidalgo County	
6. Address: 100 E. Cano, 2nd Floor			Suite #:
City: Edinburg	State: Texas	Zip: 78539	
7. Phone: 956/318-2600	8. Fax: 956/318-2699	9. **Email:	
10. Signature of Owner/Designated Agent			Date

I have authorized the following to perform the inspection (Check One)

Texas Department of Licensing and Regulation

Contract Provider

Registered Accessibility Specialist RAS # 97 RAS Name Anthony Covacevich

TDLR FORM AB041 03-07

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) have the Dept. correct information about the individual that is incorrect, under Section 559.004 of the Texas Govt. Code.

**The Department will add your address to the Architectural Barriers email notification list, which automatically provides Department information on matters affecting Architectural Barriers. Your email address is confidential pursuant to the Texas Public Information Act; the Department will not share it with the public. For additional information link to: <http://www.license.state.tx.us/newsletters/TDLRnotificationlists.asp>



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PROJECT INFORMATION

PLEASE PRINT OR TYPE

1. Project Name: Hidalgo County Health & Human Svcs. Renovation of Clinics		2. EABPRJ #: A9809567
3. Project Address: 3105 E.Schunior (Richardson)/708 Edinburg St./300 E.Hackberry/211 S. Schuerbach/ 702 E.Tejano/1901 N.Bridge		Suite #:
City: Edinburg/Elsa/McAllen/Mission Hidalgo/Weslaco, Texas	County: Hidalgo	Zip: 78539/78543/78501/7 8572/78557/78596

OWNER / AGENT INFORMATION

(Check One) I am the Owner (the person/entity that holds title to the property) or the Owner's Agent

4. Name:		5. Company / Agency: Hidalgo County	
6. Address: 100 E. Cano, 2nd Floor			Suite #:
City: Edinburg		State: Texas	Zip: 78539
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