

## **Curb Ramp Location:**

٩	9	٩	۾
N/E	N/W	\ S/E	1 <sub>S/W</sub>

	Curb	Ramp	Inspe	ction	<b>Form</b>
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Must be filled out for every ramp constructed in County right-of-way in Sacramento County. This from must be filled out and submitted within ten days of ramp construction to the SacDOT Program Access Coordinator.

Project Name:\_\_\_\_\_

' N/E ' N/W	S/E S/W	T			
N/S STREET			E/W STREET		-
Curb Ramps	per County S	tandard Draw	ing 4-23 & 4-24:	<b>Check One:</b>	
ົງ <sub>Vertical Curb</sub> ົງ	Rolled curb		∫One R	amp   \$\int Two Ramps\$	
STANDARDS:					
<ul> <li>NO POLES OR PULLBOX</li> <li>ALL ELEMENTS, EXCEPT MUST BE CONSTRUCTE PLANED JOINTS SCORE</li> <li>PAN MUST BE WITHIN ST</li> </ul>	GUTTERS AND R ED PLANAR IN NA ED BETWEEN EAC	PETAINING CURBS, TURE, WITH WEAKE CH ELEMENT.	ENED .	φ <u>                                    </u>	
A1: B1:	_ C1:	D1:		984	
A2: B2:	C2:	D2:		SETAMING CUPB	
A3: B3:	C3:	D3:		RETAM	2
RIGHT SIDE LENGTH: _	FT	<i>IN.</i>			//
PAN WIDTH:	FT	<i>IN.</i>			ta
LEFT SIDE LENGTH: _	FT	<i>IN</i> .	,	XA min. Lat.	I E
IF TWO RAMPS ON COR	•	•	Dr.		p.
E2: F2:			A 7 - 10000000		
E3: F3:	_	·		1ª A	
RIGHT SIDE LENGTH:			1		
	FT		\ \_n	4. min	
LEFT SIDE LENGTH:					
DISTANCE BETW. RAMP	S: FT.	IN.		Noi	rth Ari
			STREET N	AME:	

## **Directions:**

Three measurements for all data shall be taken at the ramps and pans, one measurement shall be taken at the centerline of the element and the other two shall be taken 18 inches on either side of the first measurement for the element. None of the three recorded measurements of any element may exceed the limits indicated above.

See reverse side for Compliance with Standards.

Inspected/measured by (print):\_\_\_\_\_\_ Date Field Measured:\_\_\_\_\_

## **Curb Ramp Inspection Form**

## **Compliance with Standards:**

**Note:** All curb ramps should comply with SacDOT's current design and construction standards. Where it is infeasible to construct or reconstruct a curb ramp to current standards, the Designer or Inspector must complete the Findings for Non-compliance Element(s) section below and state what the non-compliant element(s) are and the reason for the non-compliance. A drawing or picture can be included in the box below. After completing this form submit it to the SacDOT Program Access Coordinator for acceptance and then signature by the Director of SacDOT.

dings for Non-Com	pliance Element(s):		
			Picture or Drawing, if need
Designer/Inspector I	Date Reviewed by Dat Program Access Coord.	e Approved by SacDOT Director Date	Approved by Chief, Disability Compliance, Sac. Co. Date
Designer/Inspector S	ignature Reviewed by Signature	ure SacDOT Dir. Signature	Chief Disability Comp. Sign Page 2