

DSA REPORT FOR A/E CERTIFICATION PROGRAM

This form shall be completed by DSA and issued to the Architect or Structural Engineer in General Responsible Charge of the project certification program in accordance with Alternate Certification Process E.

School District/Owner:		DSA File #: -	
Project Name/School:		DSA App. #: -	
Date Issued:	Approved for issue by:		
COMPLETE SECTIONS 1, 2, 3 & 4			
1. DOCUMENTATION AVAILABLE FOR DESIGN PROFESSIONAL REVIEW <i>DSA has requested all records from the archives and has determined the following records are available:</i>			
<input type="checkbox"/>	DSA closed not certified letter		
<input type="checkbox"/>	DSA-approved plans/specifications		
<input type="checkbox"/>	DSA project file		
<input type="checkbox"/>	No documents are available from the DSA archives		
2. CERTIFICATION REQUIREMENTS <i>The following design professionals are required for A/E certification:</i>			
<input type="checkbox"/>	Structural Safety Certification	<input type="checkbox"/>	Architect or Structural Engineer
<input type="checkbox"/>	Fire/Life Safety Certification	<input type="checkbox"/>	Structural Engineer
<input type="checkbox"/>	Accessibility Certification	<input type="checkbox"/>	Architect or Structural Engineer
3. CONSTRUCTION DEFECTS <i>DSA has reviewed its available records and has determined the following:</i>			
<input type="checkbox"/>	There is no evidence/knowledge of potential construction defects affecting structural safety.		
<input type="checkbox"/>	There is no evidence/knowledge of potential construction defects affecting fire/life safety.		
<input type="checkbox"/>	There is no evidence/knowledge of potential construction defects affecting accessibility.		
<input type="checkbox"/>	There is evidence/knowledge of potential construction defects affecting structural safety (Briefly describe and check this box <input type="checkbox"/> if attaching documents).		
<input type="checkbox"/>	There is evidence/knowledge of potential construction defects affecting fire/life safety (Briefly describe and check this box <input type="checkbox"/> if attaching documents).		
<input type="checkbox"/>	There is evidence/knowledge of potential construction defects affecting accessibility (Briefly describe and check this box <input type="checkbox"/> if attaching documents).		
4. PROPOSED POST CONSTRUCTION EVALUATION PROGRAM			
<input type="checkbox"/>	The proposed post-construction evaluation program is accepted by DSA and is attached as a record.		
<input type="checkbox"/>	The proposed post-construction evaluation program is not accepted by DSA and must be revised and resubmitted. See the attached program for DSA comments.		

Submit completed form to the DSA Regional Office with construction oversight authority for the project.