

LABORATORY OF RECORD VERIFIED REPORT

This form shall be completed by the Engineering Manager of the Laboratory of Record (LOR) approved by the DSA Laboratory Evaluation and Acceptance program, in accordance with California Code of Regulations (CCR), Title 24, Part 1, Section 4-335/336 and [DSA Procedure PR 13-01](#). The completed form shall be submitted to the design professional in general responsible charge, DSA, the project inspector and the school board.

School District/Owner:		DSA File #:	-
Project Name/School:		DSA App. #:	-
Date of Report:	Number of Attached Pages: (If none, enter zero.)	DSA 152/152-IPI Card #(s):	
Note that DSA-approved construction documents, referred to below, are those portions of the construction documents, duly approved by the DSA, that contain information related to and affecting the Structural Safety, Fire/Life Safety, and Accessibility portions of the project and include form DSA 103.		<i>List all inspection card numbers for which this verified report applies.</i>	

COMPLETE SECTIONS 1, 2, 3 & 4 AND PROVIDE ALL REQUIRED DOCUMENTATION

1. NAME OF LABORATORY:		LEA #:
2. REASON FOR FILING THIS VERIFIED REPORT: (Check applicable box)		
<input type="checkbox"/>	Interim Verified Report: (List affected form DSA 152/152-IPI Inspection Card Section Numbers) <i>Refer to DSA Procedure 13-01 for additional information and instructions.</i>	
<input type="checkbox"/>	Final Verified Report: (Conclusion of structural testing/special inspection program)	
<input type="checkbox"/>	Construction work suspended for more than one month	
<input type="checkbox"/>	Termination of laboratory services prior to completion of testing/inspection program	
<input type="checkbox"/>	DSA Request dated:	
3. SCOPE OF LABORATORY OF RECORD WORK: (Check applicable box)		
<input type="checkbox"/>	Testing Only Verified Report: This report covers structural/material tests performed by this laboratory and any of its subcontracted LEA laboratories. <i>For this scope, the term "tests/inspections" as used in this document is defined as Structural Tests Only.</i>	
<input type="checkbox"/>	Combined Verified Report: This report covers structural/material tests and special inspections performed by this laboratory and any of its subcontracted LEA laboratories. <i>For this scope, the term "tests/inspections" as used in this document is defined as Structural Tests and Special Inspections.</i>	
4. CERTIFICATIONS: (Complete A through J by checking the boxes and providing all required documentation)		
A.	<input type="checkbox"/> I am the California registered civil engineer charged with engineering managerial responsibility for the laboratory of record as required by Sections 4-335 and 4-335.1 of Part 1, Title 24, CCR (2013 CBC).	
B.	<input type="checkbox"/> This laboratory meets the requirements of Sections 4-335 and 4-335.1 of Part 1, Title 24, CCR (2013 CBC) to conduct the tests/inspections program, including verification of qualifications/certifications and direct supervision of all personnel conducting the tests/inspections, and including quality control program/procedures and records retention.	
C.	<input type="checkbox"/> I have personally reviewed the tests/inspections requirements (including the approved Form DSA 103) of the DSA-approved construction documents.	
D.	<input type="checkbox"/> Tests/inspections covered by this report are within the scope of services authorized by the DSA Laboratory Evaluation and Acceptance Program for this laboratory or have been subcontracted to another laboratory approved by DSA to perform such services.	
E.	<input type="checkbox"/> Qualified and appropriately certified technicians under my supervision conducted all material sampling, handling, and structural testing services except as authorized and approved by DSA, per CBC Section 4-335(c) and, for Combined Verified Reports, qualified and appropriately certified special inspectors under my supervision conducted all special inspection services. <input type="checkbox"/> (Check if applicable.) For all subcontracted special inspection services, I have personally verified that the subcontractor's supervisory structure met the requirements of ASTM E 329.	
F.	<input type="checkbox"/> I have reviewed all tests/inspections reports conducted by this laboratory and any tests/inspections reports for work performed by this laboratory's subcontractor(s).	

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

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G.	<p>It is my professional opinion that: <i>(Check only one box.)</i></p> <p><input type="checkbox"/> For this Interim Verified Report: all tests/inspections required by the DSA-approved construction documents, associated with the above noted DSA 152/152-IPi inspection card section numbers, were performed in accordance with the requirements of the DSA-approved construction documents.</p> <p><input type="checkbox"/> For this Interim Verified Report: there were required tests/inspections that were not performed <i>(List on Form DSA 211 and attach to this report)</i>. All other tests/inspections required by the DSA-approved construction documents, associated with the above noted DSA 152/152-IPi inspection card section numbers, were performed in accordance with the requirements of the DSA-approved construction documents.</p> <p><input type="checkbox"/> For this Verified Report: all tests/inspections required by the DSA-approved construction documents were performed in accordance with the requirements of the DSA-approved construction documents.</p> <p><input type="checkbox"/> For this Verified Report: there were required tests/inspections that were not performed <i>(List on Form DSA 211 and attach to this report)</i>. All other tests/inspections required by the DSA-approved construction documents were performed in accordance with the requirements of the DSA-approved construction documents.</p>
H.	<p>It is my professional opinion that: <i>(Check only one box.)</i></p> <p><input type="checkbox"/> Tests/inspections results verify that the related material/work is in compliance with the <i>DSA-approved</i> construction documents and any noncompliance issues have been resolved.</p> <p><input type="checkbox"/> There are noncompliant tests/inspections results that have not been resolved <i>(List on Form DSA 211 and attach to this report)</i>. All other tests/inspections results verify that the related material/work is in compliance with the <i>DSA-approved</i> construction documents and any noncompliance issues have been resolved.</p>
I.	<p><input type="checkbox"/> All applicable reports pertinent to services provided by this laboratory have been filed as required by Sections 4-335 and 4-336 of Part 1, Title 24, CCR.</p>
J.	<p><input type="checkbox"/> Records of all tests/inspections for this project will be maintained by the laboratory for at least six years from the date of the Final Verified Report from this laboratory for this project, and made available to the school board, design professional in responsible charge and DSA upon request.</p>

I declare under penalty of perjury that I prepared this report and that all statements are true.

Signature _____
Engineering Manager of Lab

Engineering Manager Name:		
Email:		
Phone Number:		
Address:		
City:	State:	Zip:

(Affix Seal Here.)

Engineering Manager must affix Civil Engineering License Seal on this form.

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