

ADA Curb Ramp New Construction Inspection Form (Perpendicular)

Project Name (Section)

Const Year Contract No. Highway No. MP Cross Street Name

Calibration Date

(mm/dd/yy)

RAMP RUN 1

Pass

Fail

Running Slope 1

≤8.3%

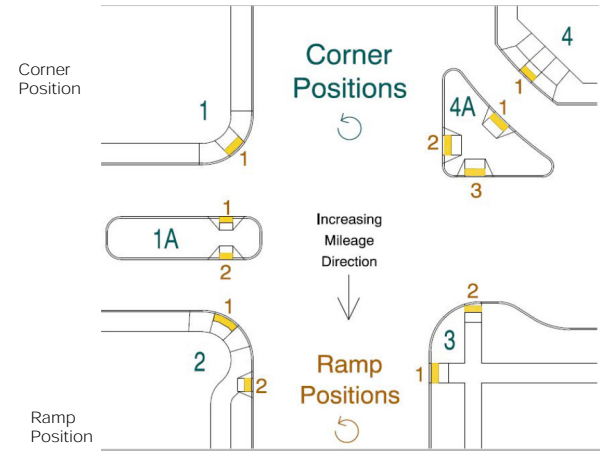
>8.3%

Length 1

Cross Slope 1

≤2.0%

>2.0%



Date (mm/dd/yy)

Print name clearly

Certification No.

Company / Agency

Crew No. (ODOT)

Add image in JPG format