

Sample Checklist

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MnDOT ADA Compliance Checklist (Curb Ra...

SP: 9999-99 City: Harveyville District: M

Intersection: TH 999 and Sample St Quadrant: NE

Ramp Type: Combined Directional Const. Year: 2099

Attach a photo of the completed quadrant by clicking ->

No file attached

[DO NOT use Safari on iPads to upload files] (6 MB max)

Due to secondary ramp exceeding 5%, there is a secondary landing.

- (1) Minimum 4' wide pedestrian access route (PAR) maintained? Yes No
- (2) Landing meets min. 4'x4' and perpendicular grade break(s)? Yes No
- (3) Are landing(s) located at the top of each ramp and at change(s) in direction and at inverse grades? Yes No

The box highlight as red because that is the reason for non-compliance.

(4) Landing slopes (%): 2.0 Initial TH 2.6 Secondary SS

(5) Ramp's running slope (%): 4.1 Initial TH 3.5 Secondary TH 4.6 Initial SS 5.6 Secondary SS

(6) Ramp's cross slope (%): 1.6 Initial TH 2.0 Secondary TH 1.1 Initial SS 1.7 Secondary SS

(7) Gutter flow line slope (%): 1.2 TH 0.5 SS

(8) Gutter inslope (%): 3.7 TH 2.1 SS

TH = Trunk Highway
SS = Side Street

(9) Roadway cross slope (%): 4.6 TH 3.1 SS

(10) Do truncated domes cover the entire curb opening and are they properly oriented? Yes No

(11) Are gutter line and ramps draining properly? Yes No

(12) Are there any vertical discontinuities greater than 1/4"? Yes No

(13) Do ramps comply with Spec 2521.3? Yes No

(14) Are ramps fully compliant? NON-COMPLIANT

If show up as non-compliant, fill out the comment box below

If NO, check the reason(s) below. Explain why ramp didn't meet compliance and how the ramp has been improved from the pre-construction condition (see ADA Compliance Checklist Guidance for more info and attach pages if needed).

Topography Structure(s) Utilities Contractor MnDOT

Secondary landing not built to ADA standard.

No file attached

(15) Was the curb ramp able to be built according to the plan details? Yes No

If NO, explain:

Printed Name: ADA Date (mm/dd/yyyy): 01/01/2099

I certify that the information entered on this form is accurate to the best of my knowledge and that I fully understand the checklist standards and am qualified to carry out the inspection.

Remember to check this box before submission.



MnDOT ADA Compliance Checklist for APS

SP: ? City: District:
 Intersection: ? Quadrant: ?
 Construction Year: ?

Attach a photo of the completed quadrant by clicking here ->

[Click here to attach a file](#)

[DO NOT use Safari on iPads to upload files]: (6MB max)

- Are push button stations placed and push button faces oriented in accordance with standards? Yes No
- Is there a minimum 4' x 4' landing adjacent to each push button? Yes No
- Distance from crosswalk edge to push button face (ft):
Trunk Hwy Side Street
- Distance from the push button to the back of curb:
(measured in the direction of the pedestrian travel in ft) ? Trunk Hwy Side Street
- Distance between push buttons (ft):
- Push button height (inches):
Trunk Hwy Side Street
- Push button side reach (inches):
Trunk Hwy Side Street
- Is APS system fully compliant?

Non-compliant due to reasons shown in red boxes

If **NO**, check one of the following reasons why. Explain why the component(s) didn't meet compliance (see ADA Compliance Checklist Guidance for additional directions and attach pages if needed). ?

- Topography Structure(s) Utilities Contractor MnDOT

[Click here to attach a file](#)

- Has a 6' maintenance access route (MAR) been maintained? Yes No
- Are push buttons situated at least 2' away from both the back of walk and ramp grade break? Yes No
- Are all newly constructed hand-hole(s) located outside of pedestrian access route (PAR)? Yes No
- Push buttons placed according to the plan details? Yes No

If NO, please explain:

Printed Name: Date (mm/dd/yyyy):

I certify that the information entered on this form is accurate to the best of my knowledge and that I fully understand the checklist standards and am qualified to carry out the inspection.

Remember to check box before submitting form.



ADA Project Compliance Submittal*

*To be completed by the Project Engineer/Supervisor

SP#: City: TH(s):

Project Engineer/Supervisor: Construction Year:

Project Chief Inspector:

Lead ADA Inspector:

Prime Contractor:

Project Description (Stand alone, Mill and Overlay, Reconstruction, etc...)

Project Designed by: Company/Firm (e.g. MnDOT) Designer Name

List of Sub-Contractor(s) working on ADA:

(rate 1 to 5 for each contractor, 1 being *poor* and 5 being *excellent*)

Type	Contractor	Rating	Remarks
Electrical ▼	<input type="text" value="All Electric Corp."/>	<input type="text" value="4"/> ▼	<input type="text" value="Good to work with"/>
Paving ▼	<input type="text" value="Pave Master"/>	<input type="text" value="3"/> ▼	<input type="text" value="No comment"/>
Flatwork ▼	<input type="text" value="Concreteee"/>	<input type="text" value="5"/> ▼	<input type="text" value="Efficient"/>
Removals ▼	<input type="text" value="Prime Contracting Inc."/>	<input type="text" value="2"/> ▼	<input type="text" value="Hard to communicate"/>

Add contractor(s)

Did Contractor(s) provide a responsible person familiar with PROWAG to be on site during all ADA construction as per Special Provisions 1803? Yes No

PROWAG Specialist:

Number of APS Quadrants Number of NON APS Quadrants

Was a portion of any quadrant required to be rebuilt or redone? Yes No

Number of REDO's

How many ramps needed to be redone were contractor's responsibility? -

How many ramps needed to be redone were MnDOT's responsibility? -

How many were plan errors? -

Other -

Number of NON-COMPLIANT ramps due to:

Topography Utilities Structure(s)

Additional Remarks

I certify that the information entered on this form and the submitted compliance checklist forms are accurate to the best of my knowledge and were completed by me or under my direct supervision.

Submit to ADA Compliance



MnDOT ADA Compliance Checklist (Curb Ramp)

SP: _____ City: _____ District: _____
 Intersection: _____ Quadrant: _____
 Ramp Type: _____ Const. Year: _____

Compile all relevant document (photos, notes, etc) of the completed quadrant and send to ADAComplianceChecklists.dot@state.mn.us

- (1) Minimum 4' wide pedestrian access route (PAR) maintained? Yes No
- (2) Landing meets min. 4'x4' and perpendicular grade break(s)? Yes No
- (3) Are landing(s) located at the top of each ramp and at change(s) in direction and at inverse grades? Yes No

(4) Landing **slopes (%)**:

	(TH)	(TH)	(SS)	(SS)
(5) Ramp's running slope (%) :	TH	TH	SS	SS

Initial Secondary Initial Secondary

(6) Ramp's cross slope (%) :	TH	TH	SS	SS
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Initial Secondary Initial Secondary

(7) Gutter **flow line slope (%)**: **TH** **SS**

(8) Gutter **inslope (%)**: **TH** **SS**

(9) Roadway **cross slope (%)**: **TH** **SS**

TH = Trunk Highway SS = Side Street
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- (10) Do truncated domes cover the entire curb opening and are they properly oriented? Yes No
- (11) Are gutter line and ramps draining properly? Yes No
- (12) Are there any vertical discontinuities greater than 1/4"? Yes No
- (13) Do ramps comply with Spec 2521.3? Yes No

(14) Are ramps **fully compliant**? Yes No

If **NO**, check the reason(s) below. Explain why the ramp didn't meet compliance and how the ramp has been improved from the pre-construction condition (see ADA Compliance Checklist Guidance for more info and attach pages if needed).

Topography Structure(s) Utilities Contractor MnDOT

(15) Was the curb ramp able to be built according to the plan details? Yes No

If **NO**, please explain:

Printed Name: _____ Date (mm/dd/yyyy): _____

I certify that the information entered on this form is accurate to the best of my knowledge and that I fully understand the checklist standards and am qualified to carry out the inspection.



MnDOT ADA Compliance Checklist for APS

SP: _____ City: _____ District: _____
 Intersection: _____ Quadrant: _____
 Construction Year: _____
 Compile all relevant document (photos, notes, etc) of the completed quadrant and send to ADAComplianceChecklists.dot@state.mn.us

- 1) Are push button stations placed and push button faces oriented in accordance with standards? Yes No
- 2) Is there a minimum 4' x 4' landing adjacent to each push button? Yes No
- 3) Distance from crosswalk edge to push button face (ft):
Trunk Hwy Side Street
- 4) Distance from the push button to the back of curb: (measured in the direction of the pedestrian travel in ft)
Trunk Hwy Side Street
- 5) Distance between push buttons (ft):
- 6) Push button height (inches):
Trunk Hwy Side Street
- 7) Push button side reach (inches):
Trunk Hwy Side Street
- 8) Is APS system fully compliant? Yes No

If **NO**, check one of the following reasons why. Explain why the component(s) didn't meet compliance (see ADA Compliance Checklist Guidance for additional directions).

Topography Structure(s) Utilities Contractor MnDOT

- 9) Has a 6' maintenance access route (MAR) been maintained? Yes No
- 10) Are push buttons situated at least 2' away from both the back of walk and ramp grade break? Yes No
- 11) Are all newly constructed hand-hole(s) located outside of pedestrian access route (PAR)? Yes No
- 12) Push buttons placed according to the plan details? Yes No

If no, please describe/explain:

Printed Name: _____ Date (mm/dd/yyyy): _____

I certify that the information entered on this form is accurate to the best of my knowledge and that I fully understand the checklist standards and am qualified to carry out the inspection.

