

TEXAS DEPARTMENT OF LICENSING & REGULATION

P.O. Box 12157 • Austin, Texas 78711-2157 techinfo@tdlr.texas.gov • www.tdlr.texas.gov

AC-2023-159

ARCHITECTURAL BARRIERS DESIGNATED AGENT FORM

YOU MUST COMPLETE ALL SECTIONS OF THIS FORM FOR IT TO BE PROCESSED. INCOMPLETE FORMS WILL NOT BE CONSIDERED. THE PERSON LISTED AS A DESIGNATED AGENT ON THIS FORM IS AUTHORIZED TO SUBMIT DOCUMENTS ON BEHALF OF THE OWNER AND ACT AS AN AGENT.

Texas Administrative Code Chapter 68 42(b) requires this form to completed and signed by the owner or an individual

employed by the owner if the owner wishes to designate an agent.				
	1. PROJEC	T INFORMATION		
Project Name:	Various Sidewalk Projects - Precinct 1		TDLR Project #: TABS2024007023	
Building or Facility Name:	Various Sidewalk Projects - Precinct 1		CAD Account #: None	
Physical Address: Various Sidewalk Locations, Richmond, Texas 77406				
Street Name, Number, Suite Number, City, State, Zip Code				
2. OWNER INFORMATION (TO BE VALID, THIS INFORMATION MUST BE SIGNED BY THE OWNER LISTED IN THIS SECTION)				
Business Type: (Select one)				
Individual	Sole Proprietorship	Limited Partnersh	ip Corporation	
Trust or Estate		Other:		
Building/Facility Owner:		Name of Owner's Representative:		
Fort Bend County		KP George		
Address:		• • • • • • • • • • • • • • • • • • • •		
301 Jackson Street, 4th Floor, Nichhlond, Texas 77409				
Street Name, Number, Suite Number, City, State, Zip Code				
Phone Number: 281-342-3411	Email Address: county.judge@fortbendcountytx	a.gov	Representative Title: County Judge	
3. DESIGNATED AGENT INFORMATION				
Name of Designated Agent: Name of Agent's Representative:				
Kavi Consulting, Inc.		Mr. Vijaya Rapolu (If Agent is a trust, Business, or Government Entity)		
Address: 1011 Highway 6 South, Suite No. 307, Houston, Texas 77077				
Street Name, Number, Suite Number, City, State, Zip Code				
Phone Number: Email Address:				
281-772-9643 rapolu.vijaya@kaviconsultinginc.com				
4. OWNER'S ACKNOWLEDGMENT				
THE OWNER OR OWNER'S REPRESENTATIVE MUST SIGN THIS FORM. THIS FORM WILL BE REJECTED IF SIGNED BY THE DESIGNATED AGENT.				
By signing and submitting this form, I authorize the individual or business listed in Section 3 of this form to serve as the Designated Agent for the project identified above. I understand that as the owner of the building or facility listed in Section 1 of this form, I remain responsible for compliance with all requirements for this project set forth in Chapter 469, Texas Government Code, and Title 16, Chapter 68, Texas Administrative Code.				
K.P. George		County Judge	County Judge	
Printed Name		Title		
Puilding/Equility Owner Start	Uro			
Building/Facility Owner Signature		Date		