



DEPARTMENT OF CONSUMER & REGULATORY AFFAIRS



District of Columbia - Department of Consumer and Regulatory Affairs

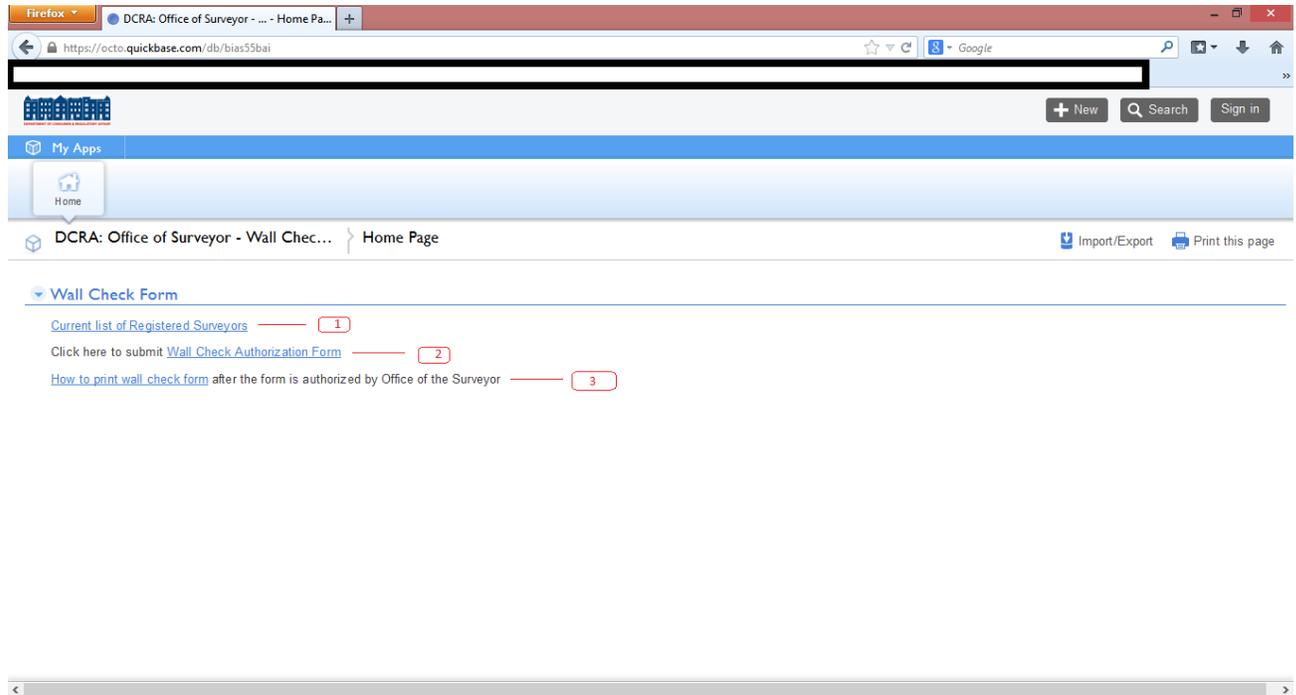
Wall Check Online Application Form User Guide for Clients

**Wall Check Online Application Form
User Guide for Clients**

1) Getting started to submit Wall Check Form Online Application

To log on to Application

- a) Open your web browser (Internet Explorer/Google Chrome/Mozilla Firefox)
- b) Go to the website: <https://octo.quickbase.com/db/bias55bai>
- c) Home page will appear



On the Home Page:

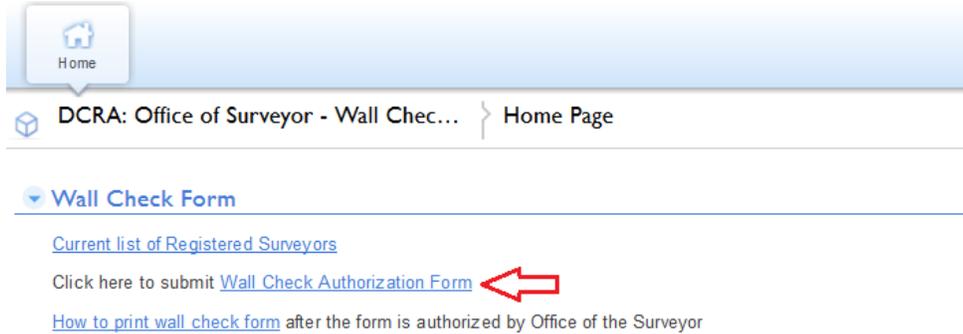
Click on #1 to see the list of Registered DC Surveyors.

Click on #2 to submit your wall check authorization form.

Click on #3 to see the instructions on how to print your authorized wall check form.

To submit Wall Check Form

a) Click on "[Wall Check Authorization Form](#)"



b) Wall check form

Wall Check Form | Add Wall Check Form

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DEPARTMENT OF CONSUMER AND REGULATORY AFFAIRS



OFFICE OF THE SURVEYOR
1100 4th STREET, S.W., 3rd FLOOR
WASHINGTON, D.C. 20024

AUTHORIZATION ORDER FOR D.C. REGISTERED SURVEYOR SERVICES

The Office of the Surveyor is unable to perform wall examination or survey on the following property within 90 days of the applicant's request for services:

Type (Survey/Wall Examination) *	S.O.Receipt No.	Permit No.	Record No.
<input type="text" value="Make a Selection..."/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Field Work To Be Performed *	Attach Approved Plat For Permit *		
<input type="text" value="Make a Selection..."/>	<input type="text"/> <input type="button" value="Browse..."/>		
<input type="text" value="Square/Parcel *"/>	Lot(s) *	Click here for Square & Lot No. by address	
<input type="text"/>	<input type="text"/>		
Applicant's Name *	Phone Number *	Email Address *	
<input type="text"/>	<input type="text"/>	<input type="text"/>	
Job Address *	City *	State *	Zip *
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

Click 'Save' to submit and send the form to Office of the Surveyor.

For Office Use Only

As a consequence, the applicant for this service may contract with a land surveyor duly registered in the District of Columbia to obtain the requested service. The authorization to retain such services is valid for a period of six months from the date of this authorization.

[To the Surveyor's Office:](#)

The undersigned has been retained to perform the service authorized by this determination:

Registered Land Surveyor:
Date: _____ Registration No. _____

Reserved For Official Use

Accepted by: _____ Date: _____
Service Completed by: _____ Date: _____

* Required field

c) Fill out information on the form and save the form.

Home

Wall Check Form Add Wall Check Form Save Cancel

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Type (Survey/Wall Examination) *	S.O. Receipt No.	Permit No.*	Record No.
Wall Examination		12345	
Field Work To Be Performed *	Attach Approved Plat For Permit *		
Addition To Existing Building	Browse...		
① Square/Parcel *	Lot(s) *	Click here for Square & Lot No. by address	
0014	0073		
Applicant's Name *	Phone Number *	① Email Address *	
SAKETH	1234567890	TEST@DC.GOV	
Job Address *	City *	State *	Zip *
1100 4TH ST SW	WASHINGTON	DC	20024

Click 'Save' to submit and send the form to Office of the Surveyor.

For Office Use Only

As a consequence, the applicant for this service may contract with a land surveyor duly registered in the District of Columbia to obtain the requested service. The authorization to retain such services is valid for a period of six months from the date of this authorization.

[To the Surveyor's Office:](#)

The undersigned has been retained to perform the service authorized by this determination:

Registered Land Surveyor:
Date: Registration No.

Reserved For Official Use

Accepted by: Date:
Service Completed by: Date:

Once the form is saved, an email notification with a link to your form will be sent to DC Office of the Surveyor for authorization.

d) (1) If the form is approved by Office of the Surveyor, below screenshot shows how it will reflect on your wall check form.

Wall Check Form Online Application: User Guide

DCRA: Office of Surveyor

https://octo.quickbase.com/db/bias55bbz?a=er&rid=15568&rl=98k

Wall Check Form Edit Wall Check Form #15568

Save Cancel Delete Customize this Form

Job Address * 1100 4TH ST SW City * WASHINGTON DC State * DC Zip * 20024

Click 'Save' to submit and send the form to Office of the Surveyor.

For Office Use Only

As a consequence, the applicant for this service may contract with a land surveyor duly registered in the District of Columbia to obtain the requested service. The authorization to retain such services is valid for a period of six months from the date of this authorization.

Authorized By	Date of Authorization	Initials*
Office of the Surveyor	11-12-2013 12:13 PM	TEST

To the Surveyor's Office:

The undersigned has been retained to perform the service authorized by this determination:

Registered Land Surveyor:

Date: Registration No.

Reserved For Official Use

Accepted by: Date:

Service Completed by: Date:

Created today at 12:07 PM (EST). Owned by Anonymous. (Change)

(2) If the form is denied then you will receive an email notification with the reason of denial. To submit the wall check form again, make the changes accordingly on the form and save it.

- e) You will receive your authorized form to the email address provided in the wall check form.
- f) Click on the link provided in the email. It will open your requested wall check form authorized. Now, click on **More** (located on the top-right side of the form)>**Print** to print the form.

DCRA: Office of Surveyor

https://octo.quickbase.com/db/bias55bbz?a=dr&r=rgs&rl=baah

Wall Check Form Wall Check Form #15568

+ New Wall Check Form Edit Email More Customize this Form

Copy this Wall Check Form

New notification...

Print

Delete this Wall Check Form

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Type (Survey/Wall Examination)	S.O. Receipt No.	Permit No.	Record No.
Wall Examination		12345	7786

Field Work To Be Performed Attach Approved Plat For Permit

Commercial Building, Below Grade

Revisions