

FLORIDA DEPARTMENT OF EDUCATION
Office of Educational Facilities

CERTIFICATE OF FINAL INSPECTION

TO: Office of Educational Facilities (OEF) 325 West Gaines Street, Room 1054 Tallahassee, Florida 32399-0400 (850) 245-0494 Fax (850) 245-9236 or (850) 245-9304	OEF USE ONLY
INSTRUCTIONS: Submit for OEF files one copy of the completed form for all projects with construction costs exceeding \$300,000. Mark the appropriate term within the parentheses. Reproduce this form in sufficient quantity for your use. Section 1013.37(2)(c), F.S.	

RE: _____ **OEF Assigned Project Number**

Brevard Public Schools _____ (X School District Florida College)

Gemini Elementary _____ (X School Name Campus)

74 _____ (X School College) Code Number

Facility Renewal Project _____ Description of Project

SECTION A: BOARD'S ACCEPTANCE

Upon the recommendation of our Project (Architect Engineer) as certified in Section B below, in accordance with Chapter 1013, F.S., THE BOARD ACCEPTED the above-referenced project on _____,

Name (Type or Print) Mark W. Mullins, Ed.D.

Signature: _____ Date: _____

(X Superintendent President)

SECTION B: (ARCHITECT ENGINEER) CERTIFICATION

As PROJECT (ARCHITECT ENGINEER), I have inspected this project and, in my considered professional opinion, the work required by the contract for this project has been completed in accordance with approved contract documents; Chapter 1013, Florida Statutes; Rule 6A-2.0010, FAC; Chapter 553, F.S.; and the Florida Building Code.

Signature:  _____ Date: 4/24/2020

Firm Name: TLC Engineering Solutions _____

Address: 6300 North Wickham Road, Suite 132C _____ Melbourne, _____ Fl. _____ 32940 _____

Street/P.O. Box _____ City _____ State _____ Zip _____

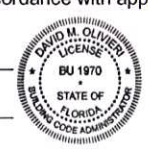
SECTION C: X Building Official Other (Specify) Certification BU1970

I have inspected the project, and in my considered opinion, it is complete and in accordance with applicable statutes, rules, and codes.

Name (Type or Print) David M. Olivieri, CBO, CFM

Signature: _____ Date: _____

X Building Official Certified Inspector



c=US, o=Unaffiliated, ou=A01410C000001717EB84FF3000005AF, cn=David M Olivieri
I have reviewed this document
This item has been digitally signed and sealed by David M. Olivieri on the date adjacent to the seal.
Printed copies of this document are not considered signed and sealed and the signature must be verified on any electronic copies.
2020.04.24 15:48:29 -04'00'

SECTION D: FACILITY INFORMATION.

1. TYPE OF PROJECT: <input type="checkbox"/> New Plant <input type="checkbox"/> Addition <input type="checkbox"/> Remodeling <input checked="" type="checkbox"/> Renovation <input type="checkbox"/> _____	2. CORRECTED "SPACE INVENTORY REPORT" (land, building, room) HAS BEEN FILED WITH THE OEF: <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A If "No," explain: _____
3. SOURCE OF FUNDS: <input checked="" type="checkbox"/> Local <input type="checkbox"/> State <input type="checkbox"/> Federal <input type="checkbox"/> _____	4. ADJUSTED FINAL CONTRACT AMOUNT: \$ 778,314.59 5. PROJECT GROSS SQUARE FOOTAGE: 69,672 SQ. FT. 6. COST PER GROSS SQUARE FOOT: \$ 11.17 7. COST PER STUDENT STATION: \$

CERTIFICATE OF FINAL INSPECTION (CFI)

8. BUILDING CONTRACT DATE: February 12, 2019 . COMPLETION DATE: September 13, 2019

9. CHANGE ORDERS - List of each Change Order and amount (excluding Direct Purchase amounts).

C.O. No. <u>1</u>	\$ <u>(199,427.41)</u>	C.O. No. _____	\$ _____
C.O. No. _____	\$ _____	C.O. No. _____	\$ _____
C.O. No. _____	\$ _____	C.O. No. _____	\$ _____
C.O. No. _____	\$ _____	C.O. No. _____	\$ _____

10. Date of Occupancy: July 30, 2019

11. Additional Information:

Change Order No. 1 (Closeout) includes Owner Direct Purchase amount of \$187,856.05 and \$11,571.36 unused funds.