

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 _____ (School District Florida College)
 James Madison Middle School _____ (School Name Campus)
 3 _____ (School College) Code Number
 Facility Renewal _____ 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 February 23, 2021

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

Signature: _____ Date: February 23, 2021
 (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: David A DaSilva Digitally signed by David A DaSilva
Date: 2021.01.29 13:07:05 -0500 Date: January 28, 2021

Firm Name: DDC Engineering, Inc.

Address: 4083 South Highway 1, Suite 101, Rockledge Fl. 32955
 Street/P.O. Box City State Zip

SECTION C: Building Official Other (Specify) Certification BU-1970

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. Oliveiri, CBO, CFM

Signature: _____ Date: _____
 Building Official Certified Inspector

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: \$ <u>1,219,818.77</u> 5. PROJECT GROSS SQUARE FOOTAGE: <u>113,301</u> SQ. FT. 6. COST PER GROSS SQUARE FOOT: \$ _____ |
| | 7. COST PER STUDENT STATION: \$ _____ |

CERTIFICATE OF FINAL INSPECTION (CFI)

| | |
|--|--|
| 8. BUILDING CONTRACT DATE: <u>February 26, 2019</u> | COMPLETION DATE: <u>September 30, 2019</u> |
| 9. CHANGE ORDERS - List of each Change Order and amount (excluding Direct Purchase amounts). | |
| C.O. No. <u>1</u> \$ <u>(323,335.23)</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: <u>July 31, 2019</u> | |
| 11. Additional Information: Change Order No. 1 (Closeout) includes Owner Direct Purchase amount of \$186,371.16 and \$136,964.07 unused funds. | |