

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 _____

_____ (X School District Florida College)

_____ (x School Name Campus)

PEAMT # B-2122-235 _____ (School College) Code Number _____

_____ Description of Project _____

SECTION A: BOARD'S ACCEPTANCE

Upon the recommendation of our Project (Architect X 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 J. Rendell Ed.D. _____

Signature: _____ Date: _____

(X Superintendent President)

SECTION B: (ARCHITECT ENGINEER) CERTIFICATION

As PROJECT (X 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: Shad L. Traylor _____ Date: 9.19.2023 _____

This item has been digitally signed and sealed by Shad L. Traylor 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.

Firm Name: _____ Tsark Architecture, LLC _____

Address: 1990 W. New Haven Ave., Suite 306 _____ Melbourne _____ FL 32904 _____

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

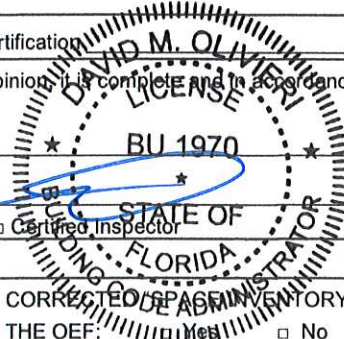
SECTION C: X Building Official Other (Specify) Certification

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-CEM _____

Signature: _____ Date: 10/6/2023 _____

X Building Official Certified Inspector



SECTION D: FACILITY INFORMATION.

1. TYPE OF PROJECT: X New Plant <input type="checkbox"/> Addition <input type="checkbox"/> Remodeling <input type="checkbox"/> Renovation <input type="checkbox"/> _____	2. CORRECTED SPAN INVENTORY REPORT" (land, building, room) HAS BEEN FILED WITH THE OEF: <input type="checkbox"/> Yes <input type="checkbox"/> No X N/A If "No," explain: _____
3. SOURCE OF FUNDS: Local _____ State _____ <input type="checkbox"/> Federal <input type="checkbox"/> <u>grant</u>	4. ADJUSTED FINAL CONTRACT AMOUNT: \$514,080.36 5. PROJECT GROSS SQUARE FOOTAGE: _____ SQ. FT. 6. COST PER GROSS SQUARE FOOT: \$ _____ 7. COST PER STUDENT STATION: \$ _____

CERTIFICATE OF FINAL INSPECTION (CFI)

8. BUILDING CONTRACT DATE: March 8, 2022 COMPLETION DATE: October 19, 2022

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

C.O. No. <u>1</u> \$ <u>\$6,507.01</u>	C.O. No. _____ \$ _____
C.O. No. <u>2</u> \$ <u>(685.65)</u>	C.O. No. _____ \$ _____
C.O. No. _____ \$ _____	C.O. No. _____ \$ _____
C.O. No. _____ \$ _____	C.O. No. _____ \$ _____

10. Date of Occupancy: July 31, 2022

11. Additional Information:

Change Order No. 2 (closeout) contains the unused amount of \$685.65.