

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: 2773-1 _____ OEF Assigned Project Number

Brevard Public Schools _____ (X School District Florida College)

Sabal Elementary School _____ (X School Name Campus)

49 _____ (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 _____ July 14 _____, 2020 _____

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

Signature: _____ Date: July 14 _____, 2020 _____
 (X Superintendent President)

SECTION B: (X 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: _____ Date: _____

Firm Name: McCree General Contractor & Architects _____

Address: 500 E. Princeton Street _____ Orlando _____ Fl. _____ 32803 _____
 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, CFM _____

Signature: _____ Date: _____
 X 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: \$ _____ 1,597,687.33 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: _____ January 25, 2017 _____ COMPLETION DATE: _____ March 16, 2018 _____

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

C.O. No. <u> 1 </u> \$ <u>49,944.33</u>	C.O. No. _____ \$ _____
C.O. No. <u> 2 </u> \$ _____	C.O. No. _____ \$ _____
C.O. No. <u> 3 </u> \$ <u>(317,051.00)</u>	C.O. No. _____ \$ _____
C.O. No. _____ \$ _____	C.O. No. _____ \$ _____

10. Date of Occupancy: _____ August 10, 2017 _____

11. Additional Information:

Change Order No. 1 also includes time extension of 104 days.
Change Order No. 2 time extension of 14 days.
Change Order No. 3 (Closeout) includes Owner Direct Purchase amount of \$207,695.56 and \$109,355.44 unused funds.