

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: 2607-1 _____ OEF Assigned Project Number
School Board of Brevard County _____ (X School District Florida College)
Ocean Breeze Elementary School _____ (X School Name Campus)
71 _____ (X School College) Code Number
HVAC/Electrical Renovations _____ 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 August 23, 2016.

Name (Type or Print) Desmond K. Blackburn, Ph.D.

Signature: _____ Date: August 23, 2016
 (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: *J.C. Mullen* Date: August 1, 2016

Firm Name: TLC Engineering for Architecture

Address: 874 Dixon Boulevard Cocoa FL 32922
 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) Gary Geiser

Signature: *Gary Geiser* BUI704 Date: 8-1-16
 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: \$1,076,921.00 5. PROJECT GROSS SQUARE FOOTAGE: NA SQ. FT. 6. COST PER GROSS SQUARE FOOT: \$ 7. COST PER STUDENT STATION: \$

CERTIFICATE OF FINAL INSPECTION (CFI)

8. BUILDING CONTRACT DATE: February 24, 2015 COMPLETION DATE: July 31, 2015

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

C.O. No. <u>01</u>	\$ <u>498,849.00</u>	C.O. No. _____	\$ _____
C.O. No. <u>02</u>	\$ <u>(359,481.00)</u>	C.O. No. _____	\$ _____
C.O. No. _____	\$ _____	C.O. No. _____	\$ _____
C.O. No. _____	\$ _____	C.O. No. _____	\$ _____

10. Date of Occupancy: July 31, 2015

11. Additional Information:

Change Order No. 2 (Closeout) Includes Owner Direct Purchase amount of \$195,194.81.