FLORIDA DEPARTMENT OF EDUCATION Office of Educational Facilities

CERTIFICATE OF FINAL INSPECTION

| | • | | | | |
|---|--|-------------------------------------|----------------------------------|---------------------------|----------------------------|
| TO: Office of Educ | ational Facilities | (OEF) | | OEF US | E ONLY |
| | 325 West Gaines Street, Room 1054 | | | | |
| | Florida 32399-0 | 400 | | | |
| (850) 245-049 | | | | | |
| | -9236or (850) 2 | | | | |
| | | one copy of the complete | | | |
| | | 0,000. Mark the appropri | | | |
| 1013.37(2)(c), F.S. | ce this form i | n sufficient quantity for | your use. Section | | |
| 1010.07 (2)(0), 1 .0. | | | | | |
| RE: | | | | OEF A | Assigned Project Number |
| | | | | (□ School D | istrict □ Florida College) |
| | | | | (n S | School Name Campus) |
| | | | | (□ School | □ College) Code Number |
| | | | | | Description of Project |
| | | | | | , Decomplian of Froject |
| SECTION A: BOARD'S AC | | A 12 (E :) | | | |
| BOARD ACCEPTED the al | or our Project (□ pove-referenced pro | Architect □ Engineer) as ce ject on | entified in Section B below, | in accordance with Ci | napter 1013, F.S., THE |
| Name (Type or Print) | | | | | |
| Signature: | | | Date: | | , |
| | (□ Superintende | ent 🗆 President) | | | , |
| SECTION B: (ARCHITEC | T = ENGINEER) (| CERTIFICATION | | | |
| As PROJECT (ARCHITE | CT - ENGINEER |), I have inspected this proje | | | |
| contract for this project has Chapter 553, F.S.; and the | been completed in | accordance with approved c | ontract documents; Chapte | r 1013, Florida Statutes | ; Rule 6A-2.0010, FAC; |
| | | ae. | Date: | | |
| | | | | | |
| Firm Name: | | | | | |
| Address: | | | | | |
| | Street/P.O. Box | | City | State | Zip |
| SECTION C: Building Offi | cial Other (Spec | fy) Certification | | | |
| I have inspected the project | t. and in my conside | ered opinion, it is complete an | d in accordance with application | able statutes, rules, and | l codes. |
| . , | | , , | | , , | |
| Name (Type or Print) | | | | | |
| • | | | _ | | |
| Signature: | D 1111 O// | | Da | ate: | |
| | | cial Certified Inspector | | | |
| SECTION D: FACILITY INF | | 1 | | | |
| 1. TYPE OF PROJECT: | □ New Plant | | E INVENTORY REPORT" (I | - | |
| □ Addition | □ Remodeling | THE OEF: Yes | s □ No □ N/A | If "No," explain: _ | |
| □ Renovation | <u> </u> | | | | |
| 3. SOURCE OF FUNDS | : | 4. ADJUSTED FINAL CO | NTRACT AMOUNT: \$ | | |
| □ Local | □ State | 5. PROJECT GROSS SO | QUARE FOOTAGE: | | SQ. FT. |
| □ Federal | | 6. COST PER GROSS S | QUARE FOOT: \$ | | |
| | | 7. COST PER STUDENT | • | | |
| | | I. COSTTER STUDENT | OTATION. # | | |

CERTIFICATE OF FINAL INSPECTION (CFI)

| 8. BUILDING CONTRACT DA | TE: | COMPLETION DATE: | | |
|-----------------------------|----------------------------|---|----|--|
| 9. CHANGE ORDERS - List o | f each Change Order and am | ount (excluding Direct Purchase amounts). | | |
| C.O. No | \$ | 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: | | | | |
| | | | | |
| 11. Additional Information: | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |

OEF 209 Rule 6A-2.0010, FAC