

Return completed form as needed to:
Office of Educational Facilities
325 West Gaines Street, Room 1054
Tallahassee, Florida 32399-0400
(850) 245-0494
Fax (850) 245-9236 or (850) 245-9304

FLORIDA DEPARTMENT OF EDUCATION
Office of Educational Facilities

OEF USE ONLY

CERTIFICATE OF OCCUPANCY

INSTRUCTIONS: Submit one copy of the completed form for each project over \$300,000.
Reproduce this form in sufficient quantity for your use.

RE: The School Board of Broward County (School District Community College)
Hollywood Hills High School (School Name Campus)
Remodeling and Renovations - Auditorium Only Description of Project
1661-22-01 P.000299 EFIS Number (if applicable)

In accordance with Section 1013.37(2)(c), Florida Statutes, and upon recommendation of the project architect/engineer and the certified inspector, as stated below, the subject project is ready for occupancy.

Signature: Robert W. Runcie Robert W. Runcie Date: 7/10/13
 Superintendent President Designee

Intended Occupancy Date: December 16, 2010

PROJECT ARCHITECT/ENGINEER AND CERTIFIED INSPECTOR I have inspected the subject project and, to the best of my knowledge and ability, I have determined that the safety systems* are working satisfactorily; the facility is in compliance with statutes, rules and codes affecting the health and safety of its occupants; and that no asbestos-containing materials were specified for use in this building, nor to the best of my knowledge were asbestos containing materials used in the construction of this project.

Architect or Engineer of Record:

N/A

High Performance Green Building Standard Used (S. 255.2575(2), F.S.)

2013 JUL 15 AM 7:59
FACILITIES AND CONSTRUCTION
Rating Achieved
February 28, 2015
Expiration Date
11/30/13
Expiration Date

George H. Hohmann, AIA, Principal AR-0008448
Name (Type or Print) License #

Signature: George H. Hohmann
 Architect Engineer

Building Official:

Robert F. Hamberger BU1112
Name (Type or Print) License #

Signature: Robert F. Hamberger 7-9-13

Contractor:

Cedars Electro-Mechanical, Inc. CGC058543
Name (Type or Print) License #

August 31, 2014
Expiration Date

Threshold Inspector (If applicable):

Name (Type or Print) License #

Expiration Date

Project Information

Code/Edition FBC 2004 Ed. Occupancy Type(s) A-1 Construction Type(s) IIB Occupant Load Existing
Automatic Sprinkler System Required X Y N District/Community College Permit Number _____

Special Permit Stipulations _____

*Safety systems include, but are not limited to: exiting, safety, rescue, fire rating, fire protection, means of egress, master valves, eye wash and dousing shower in science labs; emergency disconnects in shops; fume and dust collection systems; heat and smoke detectors, stage protection including curtain operation, smoke vent, sprinklers, etc.; kitchen hood; fire sprinklers; smoke venting; illumination of means of egress; emergency lighting; emergency power; exit lights; fire alarm systems with required incidental functions; fire extinguishers; fuel fired heaters; electrical illumination; electrical system required ventilation; toilet facilities; kitchen hot water supply; water supply; and sewage disposal as they apply to this project.