

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  
**CERTIFICATE OF OCCUPANCY**

OEI USE ONLY

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

RE: Parkway Middle School  
Replacement - Phase 1B  
0701-2501  
BLDGs. 25, 26 & 29 INCL MODIFIED SITE

School District     Community College  
 School Name     Campus  
 Description of Project Phased replacement  
 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: [Signature]  
 Superintendent     President     Designee

Date: 10/23/12

Intended Occupancy Date: \_\_\_\_\_

**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:**  
 High Performance Green Building Standard Used (S. 255.2575(2), F.S.)  
Jose Murguido    AR0010670    Rating Achieved 02-28-13  
 Name (Type or Print)    License #    Expiration Date  
 Signature: [Signature]     Architect     Engineer  
**Building Official:**  
BOBBER HANBERGER    BU 1112    11-30-13  
 Name (Type or Print)    License #    Expiration Date  
 Signature: [Signature]    10-19-12

**Contractor:**  
[Signature]    66150506    MUG 2014  
 Name (Type or Print) BALFOUR BEATTY CONSTRUCTION    License #    Expiration Date  
**Threshold Inspector (if applicable):**  
PSI    PE 37557    FEB 2013  
 Name (Type or Print)    License #    Expiration Date

<b>Project Information</b>	25	EDU	25	IB	25	1360
Code/Edition <u>2004</u>	26	EDU	26	IB	26	980
Occupancy Type(s)	29	EDU	29	IB	29	N/A
Automatic Sprinkler System Required <u>X</u> Y ___ N						
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.

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RE: The School District of Broward County (X) School District ( ) Community College)  
Parkway Middle School Replacement (X) School Name ( ) Campus)  
Replacement PARTIAL FIELDS & COURTS Description of Project See attached for conditional areas  
SBBC NO. P-000133 - 0701 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: [Signature]  Superintendent  President  Designee

Date: 9-12-11

Intended Occupancy Date: \_\_\_\_\_

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:

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

Rating Achieved

Name (Type or Print)

AR0010670  
License #

02/28/2013  
Expiration Date

Signature: \_\_\_\_\_

Architect  Engineer

Building Official:

Name (Type or Print)

BU1651  
License #

11/30/11  
Expiration Date

Signature: [Signature] 8/30/11

Contractor:

Balfour Beatty Construction

Name (Type or Print)

JAMES TURNER

License #

CCL005023

Expiration Date

8/31/2012

Threshold Inspector (if applicable): N/A

Name (Type or Print)

License #

Expiration Date

Project Information

Code/Edition: FBC-2004

Occupancy Type(s): Education

Construction Type(s) I-B

Occupant Load: 240

Automatic Sprinkler System Required  Y  N

District/Community College Permit Number

Special Permit Stipulations N/A

\*Safely 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.

OEF 110B

Revised August 2009