

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

OEF 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: School Board of Broward County (School District Florida College)
Flamingo Elementary School (School Name Campus)

Re-roof Section A Bldg.1

Description of Project

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: _____ Date: _____
 Superintendent President Designee

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* and the facility are 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.] _____ Rating Achieved _____

Thomas J. Twomey P.E. 25626 _____ 2/28/19
 Name (Type or Print) License # Expiration Date

Signature: _____
 Architect Engineer 11/2/18

Building Official:
R F HAMBERGER BU1112 _____ 11-30-19
 Name (Type or Print) License # Expiration Date

Signature: _____ DEC 17 2018

Contractor:

Advanced Roofign Inc. CGC1507377 _____ 8/31/2018
 Name (Type or Print) License # Expiration Date

Threshold Inspector (if applicable):

 Name (Type or Print) License # Expiration Date

Project Information

As-built lowest floor elevation (for new construction) _____

Code/Edition 2014 Occupancy Type(s) E Construction Type(s) 2A Occupant Lo _____

Automatic Sprinkler System Required X Y N District/Florida College Permit Number 1425410217

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.