

**FLORIDA DEPARTMENT OF EDUCATION  
Office of Educational Facilities**

**CERTIFICATE OF FINAL INSPECTION**

<b>TO:</b> 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	<b>OEF USE ONLY</b>
<b>INSTRUCTIONS:</b> 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: Building Permit #1435810364, Roofing Sub permit #1435810618 \_\_\_\_\_ OEF Assigned Project Number \_\_\_\_\_

School Board of Broward County \_\_\_\_\_ ( School District  Florida College)

Silver Shores ES 1701 SW 160<sup>th</sup> Ave, Miramar, FL -33027 \_\_\_\_\_ ( School Name  Campus)

Location No. #3581, P.001906 \_\_\_\_\_ ( School  College) Code Number \_\_\_\_\_

Reroofing Building 1, HVAC improvements \_\_\_\_\_ 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 \_\_\_\_\_

Name (Type or Print) \_\_\_\_\_

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

( Superintendent  President)

**SECTION B: ( ARCHITECT  ENGINEER) CERTIFICATION**

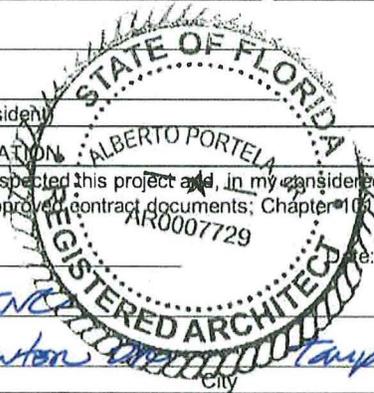
As PROJECT ( ARCHITECT  ENGINEER), I have inspected this project and, in my considered professional opinion, the work required by the contract for this project has been completed in accordance with approved contract documents; Chapter 1013, Florida Statutes; Rule 6A-2.0010, FAC; Chapter 553, F.S.; and the Florida Building Code.

Signature: \_\_\_\_\_ Date: 10/4/19

Firm Name: GUE ASSOCIATES, INC.

Address: 5405 Cypress Canyon \_\_\_\_\_ FL 33809

Street/P.O. Box \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_



**SECTION C:  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.

**Robert F. Hamberger**

Name (Type or Print) \_\_\_\_\_

Signature: \_\_\_\_\_ Date: OCT 18 2019

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 type="checkbox"/> Renovation <input checked="" type="checkbox"/> <u>GOB</u>	2. CORRECTED "SPACE INVENTORY REPORT" (land, building, room) HAS BEEN FILED WITH THE OEF: <input type="checkbox"/> Yes <input type="checkbox"/> No <input 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: \$ <u>1,798,491.95</u> 5. PROJECT GROSS SQUARE FOOTAGE: _____ SQ. FT. 6. COST PER GROSS SQUARE FOOT: \$ _____ 7. COST PER STUDENT STATION: \$ _____

