

Return completed form as needed to:  
Office of Educational Facilities  
325 West Gaines Street, Room 1054  
Tallahassee, Florida 32399-0400  
(850) 245-0494, SUNCOM 205-0494  
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 \$200,000. Reproduce this form in sufficient quantity for your use.

RE: Cooper City High School  
New Kitchen / Cafeteria and Central Utility Plant  
School Board of Broward County  
Project No.: 1931-23-02

☐ School District ☐ Community College)  
☐ School Name ☐ Campus)  
Description of Project  
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: 5/5/10

Intended Occupancy Date: 4/5/10

**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.)

Rating achieved.

James W. Piersol

AR 0008079

February 28, 2011

Name (Type or Print)

License #

Expiration Date

Signature:

☒ Architect ☐ Engineer

**Building Official:**

Ronald Morra

B01651

11/30/11

Name (Type or Print)

License #

Expiration Date

Signature:

4/3/10

**Contractor:**

Pavarini Construction Co. (SE) Inc.

CGC 1505639

August 31, 2010

Name (Type or Print)

License #

Expiration Date

**Threshold Inspector (if applicable):**

Marcus Unterweger, P.E., S.I.

70027309

February 28, 2011

Name (Type or Print)

License #

Expiration Date

**Project Information**

Code/Edition FBC 2007 Occupancy Type(s) E Construction Type(s) II B Occupant Load 1,347

Automatic Sprinkler System required (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.