

FLORIDA DEPARTMENT OF EDUCATION  
Office of Educational Facilities

CERTIFICATE OF FINAL INSPECTION

TO: Office of Educational Facilities (OEF) 325 West Gaines Street, Room 1054 Tallahassee, Florida 32399-0400 (850) 245-0494, Fax (850) 245-0494 or (850) 245-9304	OEF USE ONLY
INSTRUCTIONS: 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: 0951-26-02 OEF Assigned Project Number

School Board of Broward County ( School District  Community College)

Ft. Lauderdale High School ( School Name  Campus)

0951 ( School  College) Code Number

36 Classroom Addition Description of Project

SECTION A: BOARD'S ACCEPTANCE

Upon the recommendation of our Project ( Architect  Engineer) in his certification in Section B below, in accordance with Chapter 1013, F.S., THE BOARD ACCEPTED the above-referenced project on November 9, 2009

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

Signature: James F. Notta Date: 6/4/10

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, FS, and the Florida Building Code.

Signature: \_\_\_\_\_ Date: May 17, 2010

Firm Name: Schmel Shultz Architecture

Address: 2055 Vista Parkway Suite 225 West Palm Beach Florida 33411

103 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.

Name (Type or Print) Robert F. Hamberger

Signature: [Signature] Date: 5-27-10

Building Official  Certified Inspector

SECTION D: FACILITY INFORMATION

1. TYPE OF PROJECT: <input type="checkbox"/> New Plant <input checked="" type="checkbox"/> Addition <input type="checkbox"/> Remodeling <input type="checkbox"/> Renovation <input type="checkbox"/> _____	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 type="checkbox"/> Local <input type="checkbox"/> State <input type="checkbox"/> Federal <input type="checkbox"/> _____	4. ADJUSTED FINAL CONTRACT AMOUNT: \$ _____
	5. PROJECT GROSS SQUARE FOOTAGE: <u>30,535</u> SQ. FT.
	6. COST PER GROSS SQUARE FOOT: \$ _____
7. COST PER STUDENT STATION: \$ _____	

**CERTIFICATE OF FINAL INSPECTION (CFI)**

8. BUILDING CONTRACT DATE: 10/11/05 COMPLETION DATE: 1/22/07

9. CHANGE ORDERS - List of each Change Order and amount:

C.O. No. _____	\$ _____	C.O. No. _____	\$ _____
C.O. No. _____	\$ _____	C.O. No. _____	\$ _____
C.O. No. _____	\$ _____	C.O. No. _____	\$ _____
C.O. No. _____	\$ _____	C.O. No. _____	\$ _____

10. Date of Occupancy: \_\_\_\_\_  
\_\_\_\_\_

11. Additional Information: