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

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INSTRUCTIONS: Submit one copy of the completed form for each project over \$300,000.

Reproduce this form in sufficient quantity for your use. RE: The School Board of Broward County, Florida (School District Community College)

Walker Elementary School (m School Name □ Campus) **New Multipurpose Building Description of Project** #031-23-01/000051 EFIS Number (if applicable)

In accordance with Section 1013.37(2)(c), Florida Sta	atutes, and upon recommendation	of the project architect/engineer and th
certified inspector, as stated below, the subject project is	s ready for occupancy.	, ,
Signature: James F. Wolfe	/	e: 3/17/10
Signature: Superintendent President		e:
Intended Occupancy Date:		
PROJECT ARCHITECT/ENGINEER AND CERTIFIED	INSPECTOR I have improved the	all blood project and to the heat of my
knowledge and ability, I have determined that the s		
statutes, rules and codes affecting the health and safe	ity of its occupants; and that no asbe	estos-containing materials were specified
for use in this building; nor to the best of my knowledge Architect or Engineer of Record:	e were asbestos containing materials	used in the construction of this project.
Not Applicable		N/A
High Performance Green Building Standard Used (S. 2	55.2575(2), F.S.)	Rating Achieved
Zelch & McMahon, Architects	AA-P000244	February 28, 2011
Name (Type ox Print)	License #	Expiration Date
Signature:		•
Robert E. McMahon	w Architect	
Building Official:	•	
ROBERT HAMBERGER	Bullz- License#	11-305-11
Name (Type or Print))	License #	
Signature:	3-12-10	
Signature.		
Contractor:		
Gary Hennings		
The Weitz Company	CGC-1509819	August 31,2012
Name (Type or Print)	License #	Expiration Date
Threshold Inspector:		
John Slaig, Chief Engineer	•	
Nutting Engineers of Florida, Inc.	0660	February 28, 2011
Name (Type or Print)	License #	Expiration Date
Project Information	<u> </u>	
	Complemental II & Harris	Assist Convents and EEO
Code/Edition 2004 Occupancy Type(s) E	• • • • • • • • • • • • • • • • • • • •	
Automatic Sprinkler System RequiredYes	District/Community College Per	mit Number <u>#031-23-01/000051</u>
Special Permit Stipulations None		

*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 etectors, 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; tollet facilities; kitchen hot water supply; water supply; and sewage disposal as they apply to this project.