

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: 2042200100 OEF Assigned Project Number  
Hernando County School District ( ☐ School District ☐ Florida College )  
Frank W. Springstead High School ( ☐ School Name ☐ Campus )  
\_\_\_\_\_  
( ☐ School ☐ College ) Code Number  
Roof and Mechanical Equipment Replacement on Buildings 7,8, and 9. Description of Project

**SECTION A: BOARD'S ACCEPTANCE**

Upon the recommendation of our Project ( <input checked="" type="checkbox"/> Architect <input type="checkbox"/> 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: _____
( <input type="checkbox"/> Superintendent <input type="checkbox"/> President )	

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

As PROJECT ( <input checked="" type="checkbox"/> ARCHITECT <input type="checkbox"/> 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: _____	Digitally signed by Joseph J. Williams Date: 2025.05.08 11:52:15 -04'00'	Date: <u>May 8th</u> , 2025	
Firm Name: <u>A/R/C Associates, Inc.</u>			
Address: <u>601 North Fern Creek Avenue</u>	<u>Orlando</u>	<u>FL</u>	<u>32803</u>
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) <u>Otto J Letzelter, BU1294</u>	
Signature: <u>Otto J Letzelter</u>	Date: <u>05.08.</u> , 2025
( <input checked="" type="checkbox"/> Building Official <input type="checkbox"/> 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 type="checkbox"/> Re-Roof	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: <u>\$1,133,021.66</u>
	5. PROJECT GROSS SQUARE FOOTAGE: <u>37,800</u> SQ. FT.
	6. COST PER GROSS SQUARE FOOT: <u>\$37.27</u>
7. COST PER STUDENT STATION: \$ _____	

## CERTIFICATE OF FINAL INSPECTION (CFI)

8. BUILDING CONTRACT DATE: March 10, 2022 COMPLETION DATE: August 29, 2024

9. CHANGE ORDERS - List of each Change Order and amount (excluding Direct Purchase amounts).

C.O. No. <u>1</u>	\$ <u>16,186.02</u>	C.O. No. _____	\$ _____
C.O. No. <u>2</u>	\$ <u>2,728.00</u>	C.O. No. _____	\$ _____
C.O. No. <u>3</u>	\$ <u>7,603.64</u>	C.O. No. _____	\$ _____
C.O. No. _____	\$ _____	C.O. No. _____	\$ _____

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

11. Additional Information: