

Design Professional:  
Return completed form to:  
Hernando County School  
District  
Facilities Operations  
Department

## CERTIFICATE OF COMPLETION



Facility Name: John D. Floyd Elementary School \_\_\_\_\_ (X School ☐ Other Facility)

Project Description / Phase: Buildings 12 & 13: Roof Replacement & Elevation Repairs. Permit No \_\_\_\_\_

In accordance with Section 111.5 of the Florida Building Code, and as indicated below by the Building Code Official and Fire/Safety Official, the project is hereby certified to be complete.

### SECTION A: (ARCHITECT / ENGINEER)

I have inspected the project and, in my considered professional opinion, the work required by the Construction Contract has been completed in accordance with approved Contract Documents, Florida Statutes, and the Florida Building Code.

Signature/Seal: \_\_\_\_\_

Date: 8/23/2024

Firm Name: A/R/C Associates, Inc.

AR0007684

Address: \_\_\_\_\_

601 North Fern Creek Avenue, Suite 100  
Street

FL 32803  
State Zip

#### 1. TYPE OF PROJECT:

☐ New Facility ☐ Addition  
☐ Remodeling ☒ Renovation  
☐ Other \_\_\_\_\_

#### 2. COMPLETED FACILITY SPACE CHART HAS BEEN FILED WITH THE DISTRICT:

☐ Yes ☐ No ☒ N/A If "No", explain: \_\_\_\_\_

#### 3. OCCUPANCY DATE:

N/A, Occupied throughout project.

#### 4. COMPLETION DATE:

March 12<sup>th</sup>, 2024

(enter the date that all contractual work, including close out requirements are complete)

### SECTION B: ☒ BUILDING OFFICIAL ☐ OTHER (specify Certification: \_\_\_\_\_):

I have inspected the project and, in my considered opinion, the work is in compliance with applicable statutes, rules and codes.

Name (type/print) \_\_\_\_\_

Otto J Letzelter, BCA

License # BU1294 Expiration Date 11.2025

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

Otto J Letzelter  
Digitally signed by Otto J Letzelter  
Date: 2024.08.27 10:46:09 -0500

Date: 08.27.2024

(☒ Building Official ☒ Certified Inspector)

### SECTION C: ☒ FIRE / SAFETY OFFICIAL ☐ OTHER (specify Certification: \_\_\_\_\_):

I have inspected the project and, in my considered opinion, the work is in compliance with applicable statutes, rules and codes.

Name (type/print) \_\_\_\_\_

William L Hall  
Signature: William L Hall

License # 143319 Expiration Date 12/26

Date: 8/27/2024

(Fire / Safety Inspector)

### SECTION D: OWNER ACCEPTANCE

Upon the recommendation and Certification of the Design Professional in Section A above, and in accordance with Chapter 1013, F.S., the above referenced project is ACCEPTED by the Owner.

Name (type or print): \_\_\_\_\_

Desmond Munn

Signature of Designee: \_\_\_\_\_

Signature

Date: 8/27/2024



Inspection Report #

Project Code: 6000.175

Project Name: 6000.175 JD Floyd Roof

## INSPECTION REPORT

Inspection Date:	7/17/2024 5:00:00 PM	Trade:	Building
Project Name:	6000.175 JD Floyd Roof	Inspector's Name:	Otto Letzelter
Location:	3139 Dumont Ave, Spring Hill, FL 34609	Owner:	Hernando County School District
Master Permit	B-044-23-JDFES	Contractor:	N/A
Permit (assigned):	B-044-23-JDFES		
Was the Permitting Agency notified of Inspection:	No		
Area called for Inspection:			
Type of Inspection:	Building Final		
Result of Inspection:			
Correction/Further action required:	No		
Remarks:			
Call for Re-inspection:	No		
Plans to be submitted for review and approval:	No		
Contractor to submit RFI to Design Professional:	No		
Inspector's Name and Certificate #:	Otto Letzelter BN 2952 & SRI34		

Respectfully Submitted