CERTIFICATE OF FINAL INSPECTION

Facility Name:	Brooksville Elementary School	School Other Facility
Project Description:	Capacity Improvements	Project No:
SECTION A: OWNE	R ACCEPTANCE	
Upon the recomm F.S., the above re	endation and Certification of the Design Professional in ferenced project is ACCEPTED by the Owner.	Section B below, in accordance with Chapter 1013,
Name (type or prin	nt): Richard Oakley gnee: Fided Oaklee	01/02/2014
Signature of Desig	gnee: Fridad Callee	Date: 06/07/2024
SECTION B: (ARCH	ITECT / ENGINEER)	
I have inspected to been completed in	he project and, in my rehandered projectional opinion, a accordance with elaproved contract to the ments, Flori	da Statutes, and the Florida Building Code.
Signature/Seal: _	AR101138 1D6792	Date: 6/6/74
Firm Name:	STATE STATE	hitechs/Engineers, inc
Address:	Street FLORIDA CO	Date: 6/6/24 NG AND IASSOCIATES NITECRIFICATION OF THE STATE OF THE ST
1. TYPE OF PRO New Facility Remodeling Other	Addition 2. COMPLETED PACIEIT SPACE	CHART HAS BEEN FILED WITH THE DISTRICT: If "No", explain:
3. OCCUPANCY	DATE: 04/12/23	
4. COMPLETION	N DATE: 04/10/24 (enter the date that all contractual v	vork, including close out requirements are complete)
SECTION C: 🔼 BU	JILDING OFFICIAL OTHER (specify Certification:):
I have inspected	the project and, in my considered opinion, the work is	n compliance with applicable statutes, rules and codes.
Name (type/print)	Otto J Letzelter, PE, BCA License	# BU1294 Expiration Date 11.2025

CERTIFICATE OF FINAL INSPECTION

acility Name:	Suncoat Elementary School	School Other Facility
Project Description:	Capacity Improvements	Project No: NA
ECTION A: OWNE	R ACCEPTANCE	
F.S., the above re	ferenced project is ACCEPTED by the Owner.	in Section B below, in accordance with Chapter 1013,
Name (type or pri	nt): Kichard Oakley	
Signature of Desig	nt): Richard Dakley gnee: Richard Oakley	Date: 06/07/2024
SECTION B: (ARCH	ITECT / ENGINEER)	
I have inspected to been completed in	he project and, in my consider of professional opinion accordance with positive Contract Desuments, Florida Contract Desuments (Contract Desuments)	n, the work required by the Construction Contract has orida Statutes, and the Florida Building Code.
Signature/Seal:	ARIO 1138 DOV	a and Associates Avaniteds)
Firm Name:	STATE OF	MEONS INC
Address:	Street FLORIDA RED ARC	City Tawwa State PL zip 33611
1. TYPE OF PRO ☑ New Facility ☐ Remodeling ☐ Other		E CHART HAS BEEN FILED WITH THE DISTRICT:
3. OCCUPANCY		
4. COMPLETION	I DATE: 04/10/2024 (enter the date that all contractua	work, including close out requirements are complete)
SECTION C: 🖽 ВІ	JILDING OFFICIAL OTHER (specify Certification	n:):
I have inspected	the project and, in my considered opinion, the work i	s in compliance with applicable statutes, rules and codes.
Name (type/print)	Otto J Letzelter, PE, BCA Otto J Digitally signed by Otto J Letzelter Licen	se # BU1294 Expiration Date 11.2025
Signature:		06.07.2024

CERTIFICATE OF FINAL INSPECTION

Facilities Operations Department		FINAL INS	SPECTION		
Facility Name:	Westside Element	ary School	**************************************	✓ School C	Other Facility
Project Description:	roject Description: Capacity Improvements Project No:				
SECTION A: OWNE				www.cr.	
F.S., the above re	ferenced project is AC	CEPTED by the Owner.	ssional in Section B below	v, in accordance with Ch	apter 1013,
Name (type or pri	nt): hichara	Dakly			
Signature of Designature	gnee:	Deet	Dat	te: 04/97/z	024
SECTION B: (ARCH	ITECT / ENGINEER)				**
I have inspected to been completed in	IVU, - 1		opinion, the work required hts, Florida Statutes, and	d by the Construction Co the Florida Building Cod	ntract has e.
Signature/Seal: _		AR101138 1D6792	Da Oland ARSNO	ite: 6/6/24 Notes Archite	de l
Firm Name:	BR.	STATE OF			
Address:	Street	FLORIDA RED ARC	City Jamps Sta	ate Pl zip 334	
1. TYPE OF PRO New Facility Remodeling Other	Addition	COMPLETED FACILITY	SPACE CHART HAS BE		ISTRICT:
3. OCCUPANCY	DATE: 04/12/23				
4. COMPLETION	N DATE: 04/10/24 (ei	nter the date that all cont	tractual work, including clo	ose out requirements are	complete)
SECTION C: B	UILDING OFFICIAL	OTHER (specify Cert	ification:):	
I have inspected	the project and, in my	considered opinion, the	work is in compliance wit	h applicable statutes, rul	les and codes.
Name (type/print)		ned by Otto J	License # BU1294 Date: 06.07.2024	Expiration Date	11.2025
THE COMMERCE OF THE PARTY OF TH		W.			

CERTIFICATE OF FINAL INSPECTION

Facility Name:	Westside Elementary School	School Other Facility
Project Description:	Fire Alarm Replacement	Project No:
SECTION A: OWNE	ER ACCEPTANCE	
F.S., the above re	nendation and Certification of the Design Professional in Section of the Design Profession of the	Date: 06/07/このとり
SECTION B: (ARCH	ITECT / ENGINEER)	
I have inspected to been completed in Signature/Seal: Firm Name: Address:	the project and, in my considered resistant pointing, the worn accordance with the proved contract popular to a summents, Florida State AR 101138 ID6792 STATE OF FLORIDA City ON	The required by the Construction Contract has utes, and the Florida Building Code. Date: 6/6/74 ASSOCIATES AVENIFICATE SINC. PAR State FL Zip 33411
1. TYPE OF PRO ☐ New Facility ☐ Remodeling ☐ Other	Addition Z. CONFLETED FACILITY SPACE CHAR	T HAS BEEN FILED WITH THE DISTRICT:
OCCUPANCY COMPLETION	N DATE:	cluding close out requirements are complete)
SECTION C: BU	UILDING OFFICIAL OTHER (specify Certification:):
I have inspected	the project and, in my considered opinion, the work is in comp	liance with applicable statutes, rules and codes.
Name (type/print) Signature:	Otto J Letzelitetiy BEs BCA Otto J Letzeler Letzelter Letzelter Date: 06.07.2 X Building Official Certified Inspector C	

CERTIFICATE OF FINAL INSPECTION

Facility Name:	Brooksville Elementary School	School Other Facility
Project Description:	Fire Alarm Replacement	Project No:
SECTION A: OWNE	R ACCEPTANCE	
	endation and Certification of the Design Profe ferenced project is ACCEPTED by the Owner	ssional in Section B below, in accordance with Chapter 1013,
Name (type or prin	ne: Kickard Vakley	11 0/07/2111
Signature of Desig	nee: Frickend Val	kly Date: 06/07/2024
SECTION B: (ARCHI	TECT / ENGINEER)	
	10000	opinion, the work required by the Construction Contract has nts, Florida Statutes, and the Florida Building Code.
Signature/Seal: _	AR101138 ID6792	Date: 6/6/74
Firm Name: WASSOCIALES Address:	and Asi STATE IN	4525 S. Mannattan Ave
	Street SERED AR	City Town State PL Zip 33Lell
1. TYPE OF PRO New Facility [Remodeling [Addition 2. COMPLETED FACILITY	SPACE CHART HAS BEEN FILED WITH THE DISTRICT:
3. OCCUPANCY	DATE: 02/15/2024	
4. COMPLETION	DATE: 04/10/2024 (enter the date that all cont	ractual work, including close out requirements are complete)
SECTION C: 🍱 BU	ILDING OFFICIAL OTHER (specify Cert	ification:
I have inspected t	he project and, in my considered opinion, the	work is in compliance with applicable statutes, rules and codes.
Name (type/print)	Otto J Letzelter, PE, BCA	License # BU1294 Expiration Date 11.2025
Signature:	Otto J Letzelter Depaids to constitute the Date 2004 George 1603744 Octor Building Official Certified Inspector	Date: 06.07.2024