

Board Meeting Agenda Item Executive Summary

Supt.'s Office Use Only

Board Meeting 11-06-07

Agenda Consent

Item No. G. 13. d.

Board Meeting Date:	November 6, 2007
Submitted By:	Ed Gable
Item Description:	SBAC R0506 – Gainesville High School Gymnasium Air Conditioning and Roof Replacement Certificate of Final Inspection (CFI)

Purpose and Explanation:

CONSENT

This project has been inspected by the project architect and the facilities department staff. It is requested that the Board authorize final payment to the contractor upon total acceptance of this project. Final contract amount is \$849,380.02.

BUDGETARY IMPACT

Funding Source (Description): Two Mill **Amount:**

Staff Attorney Review & Approval <i>(For Contracts Only)</i>	Date: _____ Initial: _____	ADDITIONAL INFORMATION Yes: _____ No: _____
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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, SUNCOM 205-0494 Fax (850) 245-0494 S/C 205-0494 or (850) 245-9304 S/C 205-9304	OEF USE ONLY
INSTRUCTIONS: Submit for OEF files one copy of the completed form for all projects with construction costs exceeding \$200,000. Mark the appropriate term in each parenthesis. Reproduce form in sufficient quantity for your use. Section 1013.37(2)(c), F.S.	

RE: SBAC R0506 _____ OEF Assigned Project Number

School Board of Alachua County _____ (School District Community College)

Gainesville High School _____ (School Name Campus)

0151 _____ (School College) Code Number

Reroofing Gymnasium _____ 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 _____, 2007

Name (Type or Print) W. Daniel Boyd, Jr., ED.D. _____

Signature: _____ Date: _____, 20____

(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, SBE Rules 6-2.001, FAC, Chapter 59C, FS, and the Florida Building Code.

Signature: *James W. Murphy* _____ Date: 9-11-07 _____

Firm Name: A/R/C Associates, Incorporated _____

Address: 601 N. Fern Creek Ave., Suite 100 _____ Orlando _____ FL _____ 32803 _____

Street/P.O. Box _____ City _____ State _____ Zip _____

SECTION C: Building Official Other (Specify) Certification Limited Inspector

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) Ed Souza _____

Signature: *Edward J. Souza* _____ Date: 10-11-07 _____

Building Official 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 checked="" type="checkbox"/> Reroof	2. CORRECTED "SPACE INVENTORY REPORT" (land, building, room) HAS BEEN FILED WITH THE OEF: <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A If "No," explain: _____
3. SOURCE OF FUNDS: <input type="checkbox"/> Local <input checked="" type="checkbox"/> State <input type="checkbox"/> Federal <input type="checkbox"/> _____	4. ADJUSTED FINAL CONTRACT AMOUNT: \$ <u>849,380.02</u> 5. PROJECT GROSS SQUARE FOOTAGE: <u>17,476</u> _____ SQ. FT. 6. COST PER GROSS SQUARE FOOT: \$ <u>48.60</u>
	7. COST PER STUDENT STATION: \$ <u>N/A</u>