

Clay County District Schools Certificate of Substantial Completion

Having completed all requirements as outlined within the project specifications and drawings, I certify that the project listed below is substantially completed and has been constructed in accordance with said documents.

Project Title: Roof Repair/Replacement (Buildings 1, 2, & 3)

School: S Bryan Jennings Elementary School



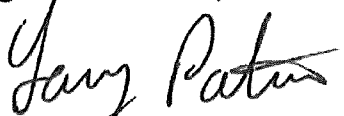
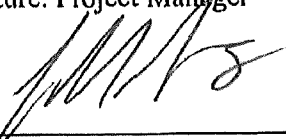
SDCC Project Number: C-14-20/21

OEF Project Number: N/A

Project Architect: Ebert ^{BEADY} Norman Architects.

Project Contractor: BB&G Construction

Date of Substantial Completion: 11/8/2021

Signature: Contractor 	Date: 	 11/9/21
Signature: Architect/Engineer 	Date: 	 11/9/21
Signature: Code Enforcement 	Date: 	 11/2/21
Signature: Project Manager 	Date: 	 11/9/2021

Clay County District Schools Substantial Inspection Report

Project Title: Roof Repair/Replacement (Buildings 1, 2, & 3)

School: S Bryan Jennings Elementary School

SDCC Project Number: C-14-20/21

OEF Project Number: N/A

Project Architect: N/A

Project Contractor: BB&G Construction

Date of Substantial Completion Inspection: 11/8/2021

Inspected by: _____

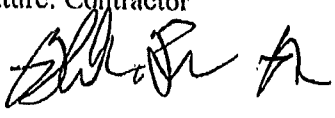
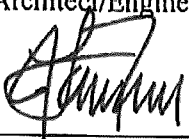
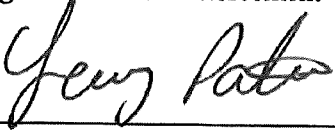
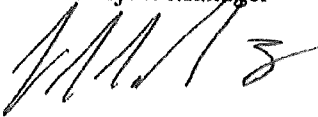
Accompanied By: _____

- A. Threshold Building included in project: Yes No
(If yes, has the District received the letter of certification from the Threshold
Inspector?) Yes No

B. Systems and Areas Inspected (as appropriate):

- | | |
|--|---|
| <input type="checkbox"/> Fire Alarm and Detectors | <input type="checkbox"/> Fire Hydrant Test |
| <input type="checkbox"/> HVAC Shut-down | <input type="checkbox"/> Elevator Certification |
| <input type="checkbox"/> Inter-Com System | <input type="checkbox"/> Well Certification/Test |
| <input type="checkbox"/> Signage | <input type="checkbox"/> Water Certification/Test |
| <input type="checkbox"/> Emergency Power Shut-down | <input type="checkbox"/> Kitchen Hood Certification |
| <input type="checkbox"/> Emergency Generator Operation | <input type="checkbox"/> Fire Sprinkler Certification |
| <input type="checkbox"/> Emergency Lighting | <input type="checkbox"/> Lift Station Test |
| <input type="checkbox"/> Exiting & Exit Lights | <input type="checkbox"/> HVAC Test & Balance |
| <input type="checkbox"/> Glazing | <input type="checkbox"/> Carpet Certification/Test |
| <input type="checkbox"/> Fire Extinguishers | <input type="checkbox"/> DEP Certification/Clearance |
| <input type="checkbox"/> Toilet Facilities | <input type="checkbox"/> SJRWMD Inspection/Clearance |
| <input type="checkbox"/> Food Preparation | <input type="checkbox"/> Safety Conditions Interior |
| <input type="checkbox"/> Site Lighting | <input type="checkbox"/> Safety Conditions Exterior |
| <input type="checkbox"/> Site Parking | |

C. Signatures

Signature: Contractor 	Date:	11/9/21
Signature: Architect/Engineer 	Date:	11/9/21
Signature: Code Enforcement 	Date:	11/2/21
Signature: Project Manager 	Date:	11/9/2021