The School Board of Broward County, Florida

The Building Department

Robert F. Hamberger, *Chief* Building Official

CERTIFICATE OF COMPLETION

Project:	Project Number:
Facility:	Project Manager:
Contractor:	Consultant:
Permit Number:	Date:

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. I have further determined that the safety systems utilized in conjunction with the scope of work are functioning satisfactorily. This project is in compliance with statutes, rules and codes affecting the health and safety of its occupants to the extent that is governed by the contract scope.

Architect or Engineer of Record:

Name (Type or Print)	License #	Exp. Date

Signature ☐ Architect ☐ Engineer	Date

Contractor:

Name (Type or Print)	License #	Exp. Date

Building Official:

Name (Type or Print)	License #	Exp. Date

Signature	Date