

September 15, 2025

**M E M O R A N D U M**

**TO:** Jim Murdaugh, Ph.D.  
President

**FROM:** Barbara Wills, Ph.D.  
Vice President for Administrative Services and Chief Business Officer

**SUBJECT:** Certificate of Final Inspection – CFI 3<sup>rd</sup> Floor Renovations Project

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**Item Description**

This item requests approval from the District Board of Trustees for the attached Certificate of Final Inspection, Office of Educational Facilities (OEF) Form 209, for the CFI 3<sup>rd</sup> Floor Renovations project, located in the Center for Innovation (CFI) Building #01 at the TSC Site 4 – Center for Innovation Campus, 350 South Duval Street, Tallahassee, FL. 32301.

**Overview and Background**

In accordance with TSC Board Policy 6340 - Reduction of Retainage and Final Payment to Contractor for Construction Projects and the State Requirements for Educational Facilities (SREF) Chapter 4 Section 3, final payment cannot be made to the contractor until; project has been inspected by architect or other designated personnel, Certificate of Occupancy and/or Certificate of Final Inspection has been issued, project has been completed and is Board approved. The Construction Manager at Risk (CMAR) for this project, Childers Construction Company, has completed all the required close-out documents and has confirmed the space is in full operation.

**Funding/ Financial Implications**

This construction contract was funded by local college funds. The construction project is complete and final payment to the contractor is contingent upon Board Approval.

**Past Actions by the Board**

The Board previously approved the Guaranteed Maximum Price (GMP) for this project at the October 21, 2024 District Board of Trustees meeting.

**Recommended Action**

Approve the attached Certificate of Final Inspection, Office of Educational Facilities (OEF) Form 209, authorizing final payment to contractor, Childers Construction Company, for the CFI 3<sup>rd</sup> Floor Renovations Project.

FLORIDA DEPARTMENT OF EDUCATION  
Office of Educational Facilities

**CERTIFICATE OF FINAL INSPECTION**

<b>TO:</b> Office of Educational Facilities (OEF) 325 West Gaines Street, Room 1054 Tallahassee, Florida 32399-0400 (850) 245-0494 Fax (850) 245-9236 or (850) 245-9304	<b>OEF USE ONLY</b>
<b>INSTRUCTIONS:</b> Submit for OEF files one copy of the completed form for all projects with construction costs exceeding \$300,000. Mark the appropriate term within the parentheses. Reproduce this form in sufficient quantity for your use. Section 1013.37(2)(c), F.S.	

RE: 5116-1 \_\_\_\_\_ OEF Assigned Project Number  
TALLAHASSEE STATE COLLEGE \_\_\_\_\_ ( ☐ School District ☒ Florida College )  
TSC - SITE 4 - CENTER FOR INNOVATION \_\_\_\_\_ ( ☐ School Name ☒ Campus )  
27 \_\_\_\_\_ ( ☐ School ☒ College ) Code Number  
CFI 3rd FLOOR RENOVATIONS \_\_\_\_\_ Description of Project

**SECTION A: BOARD'S ACCEPTANCE**

Upon the recommendation of our Project ( ☒ Architect ☐ Engineer ) as certified in Section B below, in accordance with Chapter 1013, F.S., THE BOARD ACCEPTED the above-referenced project on \_\_\_\_\_.

Name (Type or Print) BARBARA K. WILLS

Signature: \_\_\_\_\_ Date: \_\_\_\_\_  
 ( ☒ 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; Rule 6A-2.0010, FAC; Chapter 553, F.S.; and the Florida Building Code.

Signature: [Signature] Date: 6/2/2025

Firm Name: ARCHITECTS | LEWIS + WHITLOCK

Address: 206 West Virginia Street, Tallahassee, FL 32301

Street/P.O. Box \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

**SECTION C: ☒ Building Official ☐ Other (Specify) Certification** \_\_\_\_\_

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) J. GLENN DODSON

Signature: [Signature] Date: 3/30/25

( ☒ Building Official ☐ Certified Inspector )

**SECTION D: FACILITY INFORMATION**

<b>1. TYPE OF PROJECT:</b> <input type="checkbox"/> New Plant <input type="checkbox"/> Addition <input type="checkbox"/> Remodeling <input checked="" type="checkbox"/> Renovation <input type="checkbox"/> _____	<b>2. CORRECTED "SPACE INVENTORY REPORT" (land, building, room) HAS BEEN FILED WITH THE OEF:</b> <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A If "No," explain: _____
<b>3. SOURCE OF FUNDS:</b> <input checked="" type="checkbox"/> Local <input type="checkbox"/> State <input type="checkbox"/> Federal <input type="checkbox"/> _____	<b>4. ADJUSTED FINAL CONTRACT AMOUNT:</b> \$ _____ \$665,961.81 <b>5. PROJECT GROSS SQUARE FOOTAGE:</b> _____ 9,640 SQ. FT. <b>6. COST PER GROSS SQUARE FOOT:</b> \$ _____ \$69.08/SQ. FT. <b>7. COST PER STUDENT STATION:</b> \$ _____ N/A

## CERTIFICATE OF FINAL INSPECTION (CFI)

8. BUILDING CONTRACT DATE: 10/27/2025 COMPLETION DATE: 04/10/2025

9. **CHANGE ORDERS** - List of each Change Order and amount (excluding Direct Purchase amounts).

C.O. No. <u>1</u> \$ <u>(\$69,086.19) Deductive</u>	C.O. No. _____ \$ _____
C.O. No. _____ \$ _____	C.O. No. _____ \$ _____
C.O. No. _____ \$ _____	C.O. No. _____ \$ _____
C.O. No. _____ \$ _____	C.O. No. _____ \$ _____

10. **Date of Occupancy:** Certificate of Completion Dated 4/10/2025

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11. Additional Information: