

February 16, 2026

**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 – Library Improvements - Maker Space Renovations

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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 Main Campus Library Improvements - Maker Space Renovations project. The project is located within the Library (LB) Building#30 on the Tallahassee State College, Site 1 – Main Campus, 444 Appleyard Drive, Tallahassee, FL. 32304.

**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. Southern Standard Construction LLC and Tallahassee State College have completed all the required close-out documents and have confirmed the space is in full operation.

**Funding/ Financial Implications**

This construction contract was funded by a state grant and 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 March 17, 2025 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 Southern Standard Construction LLC, for the Main Campus Library Improvements - Maker Space 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) 245-0494e Fax (850) 245-9236 or (850) 245-9304e	<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: 5134-1 \_\_\_\_\_ OEF Assigned Project Number  
Tallahassee State College \_\_\_\_\_ (□ School District  Florida College)  
Site 1 - Main Campus \_\_\_\_\_ (□ School Name  Campus)  
27 \_\_\_\_\_ (□ School  College) Code Number  
Library Improvements - Maker Space (CapGrant) \_\_\_\_\_ 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 February 16, 2026

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: e SJK Campbell Date: e January 26, 2026

Firm Name: BKJ, Inc

Address: 1621 Physicians Dr., Tallahassee, FL, 32308  
 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) Lorenzo Hillman

Signature: Lorenzo Hillman PBC 435 Date: Feb 3 2026  
 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 checked="" type="checkbox"/> Renovation <input type="checkbox"/> _____	2. CORRECTED "SPACE INVENTORY REPORT" (land, building, room) HAS BEEN FILED WITH THE OEF: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A If "No," explain: _____
3. SOURCE OF FUNDS: e <input checked="" type="checkbox"/> Locale <input checked="" type="checkbox"/> State <input type="checkbox"/> Federal <input type="checkbox"/> _____	4. ADJUSTED FINAL CONTRACT AMOUNT: \$ <u>3,671,155.03</u> 5.e PROJECT GROSS SQUARE FOOTAGE: <u>10,000</u> SQ. FT. 6. COST PER GROSS SQUARE FOOT: \$ <u>367.12</u> 7. COST PER STUDENT STATION: \$ <u>N/A</u>

### CERTIFICATE OF FINAL INSPECTION (CFI)

8. BUILDING CONTRACT DATE: 04/16/25 COMPLETION DATE: 02/13/26

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

C.O. No. <u>01</u>	\$ <u>\$ -10,493.48</u>	C.O. No. _____	\$ _____
C.O. No. <u>02</u>	\$ <u>\$ -168,351.49</u>	C.O. No. _____	\$ _____
C.O. No. _____	\$ _____	C.O. No. _____	\$ _____
C.O. No. _____	\$ _____	C.O. No. _____	\$ _____

10. Date of Occupancy: 02/13/26

11. Additional Information: