CLEAR TRACK PRODUCTIONS

Issue: Providing accessible high/low water fountain in a recording studio.

Analysis: The applicant is requesting a waiver from providing an accessible high/low water cooler for its staff and clients. According to the applicant, piping to the cooler would open a sound penetrating pathway into the walls of the recording studio. The applicant feels the additional sound generated by the cooling equipment is not acceptable. The applicant also objects to the treated water supplied by the city. NOTE: Section 11-4-1.3(10) allows accessibility to be provided by the high/low fountain; by two standard drinking fountains mounted to accommodate wheelchair users and those having difficulty bending; or by an accessible water fountain and a cooler.

Project Progress:

The project is completed.

Items to be Waived:

Accessible drinking fountains, as required by Section 11-4.1.3(10).

(10) Drinking fountains:

(A) Where only one drinking fountain is provided on a floor, there shall be a drinking fountain which is accessible to individuals who use wheelchairs in accordance with 11-4.15 and one accessible to those who have difficulty bending or stooping. (This can be accommodated by the use of a hi-10 fountain: by providing one fountain accessible to those who use wheelchairs and one fountain at a standard height convenient for those who have difficulty bending; by providing a fountain accessible under 11-4.15 and a water cooler; or by such other means as would achieve the required accessibility for each group on each floor.)

Waiver Criteria: There is no specific guidance for a waiver of this requirement in the code. The Commission's current rule, authorized in Section 553.512, Florida Statutes, provides criteria for granting waivers and allows consideration of unnecessary or extreme hardship to the applicant if the specific requirements were imposed.

REQUEST FOR WAIVER FROM ACCESSIBILITY REQUIREMENTS OF CHAPTER 553, PART V, FLORIDA STATUTES

Your application will be reviewed by the Accessibility Advisory Council and its recommendations will be presented to the Florida Building Commission. You will have the opportunity to answer questions and/or make a short presentation, not to exceed 15 minutes, at each meeting. The Commission will consider all information presented and the Council's recommendation before voting on the waiver request.

1. Name and address of project for which the waiver is requested.

Name: Clear Track Productions (a sound recording studio)

Address: 816 Franklin St., Clearwater FL 33756

2. Name of Applicant. If other than the owner, please indicate relationship of applicant to owner and written authorization by owner in space provided:

Applicant's Name: Michael Johnson

Applicant's Address: 816 Franklin St., Clearwater FL 33756

Applicant's Telephone: (727) 449-8888 FAX: (727) 449-8881 Applicant's E-mail Address: mike@cleartrackproductions.com

Relationship to Owner:

Owner's Name: Michael Johnson

Owner's Address: 816 Franklin St., Clearwater FL 33756

Owner's Telephone: (727) 449-8888 FAX: (727) 449-8881 Owner's E-mail Address: mike@cleartrackproductions.com

Signature of Owner: Mull July

Contact Person: Michael Johnson

Contact Person's Telephone: (727) 449-8888 Email: Mike@cleartrackproductions.com

This application is available in alternate formats upon request.

Form No. 2001-01

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[] Ad	dition to a building or facility.
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4. Typ use of	e of facility. Please describe the building (square footage, number of floors). Define the building (i.e., restaurant, office, retail, recreation, hotel/motel, etc.)
	դ. ft. single floor sound recording studio.
5. Proj	ect Construction Cost (Provide cost for new construction, the addition or the
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Only Florida Issue	
1:_ Hi-Lo w	ater cooler required by A.D.A Florida Building Code 11-4.1.3 (10) 9-11-4.1.6
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CERTIFICATION OF APPLICANT:

I hereby swear or affirm that the applicable documents in support of this Request for Waiver are attached for review by the Florida Building Commission and that all statements made in this application are to the best of my knowledge true and correct.

Dated this 15^{+1} day of _	January	, 20 / 0	
Signature SL	,		
Michael Johnson Printed Name			

By signing this application, the applicant represents that the information in it is true, accurate and complete. If the applicant misrepresents or omits any material information, the Commission may revoke any order and will notify the building official of the permitting jurisdiction. Providing false information to the Commission is punishable as a misdemeanor under Section 775.083, Florida Statutes.

REVIEW AND RECOMMENDATION BY LOCAL BUILDING DEPARTMENT.

Please state why the issue is being referred to the Florida Building Commission as well as a recommendation for disposition. The Building Official or his or her designee should review the application and indicate that to the best of his or her knowledge, all information stipulated herein is true and accurate. Further, if this project is complete, explain why it is being referred to the Commission. The Building Official or his or her designee should sign a copy of the plans accompanying this application as certification that such plans are the same as those submitted for building department review. Please reference the applicable section of the Accessibility Code.

a. We interpret the ca combination of Plurecording studio. Reb. Applicant states sthe water fountain. c. Water can be pro	Building Official or his or her designee should sign a copy of the plans application as certification that such plans are the same as those submitted for review. Please reference the applicable section of the Accessibility Code. code to require this project to include an accessible drinking fountain through ambing code and accessibility chapter of the Building code. This facility is a eference Building Code sections 11-4.1.3 (10) and 11-4.1.6 (2). uper-sensitive recording equipment will be adversely affected by the noise of vided to all occupants through alternate means. Accessibility is addressed r.
	ermitted construction activity on this building during the past three years? Is
[] Yes [X] No Cost	of Construction
federal guidel keep bacteriol water is a requestion fluoride to its our locally pro-	ecommendation: The City of Clearwater has no objection to the quest. City of Clearwater's drinking water meets or exceeds all state and ines for clean, safe drinking water. Chloramines are the disinfectant used to logical growth from occurring in the drinking water. Disinfecting drinking airement of the Safe Drinking Water act. Although the City does not add drinking water, we have .6 ppm in our drinking water obtained from mixing oduced water with the water purchased from Pinellas County. The health ride have been analyzed over 50 years and have been found to be safe and ducing tooth decay.
Jurisdiction: City of OBuilding Official or D	Clearwater Florida Designee Signature Kevin Garriott Printed Name BU854 Certification Number 727-562-4588 Telephone/FAX

Address: _ 100 South Myrtle Avenue, Suite 210, Clearwater, Florida 33756_____

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