### KAMAKURA, INC. d.b.a. NAOE

Issue: Providing an accessible entrance to an existing building undergoing an alteration.

Analysis: The applicant is requesting a waiver from providing accessibility to the main entrance of a building located on a zero lot line site. The building is undergoing a \$20,000-30,000 alteration for conversion to a restaurant, which will contain approximately 400 square feet. The issue is not disproportionate cost, but rather the technical infeasibility of providing the entrance given the site constraints. The is confirmed by the local building department.

Project Progress: The project is under design.

#### Items to be Waived:

An accessible public entrance as required by Section 11.4.1.

Exception: Full compliance will be considered structurally impracticable only in those rare circumstances when the unique characteristics of terrain prevent the incorporation of accessibility features. If full compliance with the requirements of this code are structurally impracticable, a person or entity shall comply with the requirements to the extent it is not structurally impracticable.

Technically Infeasible: With respect to an alteration of a building or facility, it has lieele likelihood of being accomplished because exiting structural conditions would require removing or altering a load bearing member which is an essential part of the structural frame; or because other existing physical or site constraints prohibit modification or addition of elements, spaces or features which are in full and strict compliance with the minimum requirements for new construction and which are necessary to provide accessibility.

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.

Council will provide recommendations to the Florida Building Commission. The Commission will review the application. You will have another opportunity to answer questions and /or give a short presentation **not to exceed 15 minutes**. The Commission will consider all information and the Council's recommendation before voting on the waiver.

This application is available in alternate formats upon request.

# 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:Kamakura Inc. d.b.a. NAOE
Address: 333 W 47 Street. Miami Beach, FL 33140
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:Kevin Cory
Applicant's Address:1100 NE 196 Street, Miami, FL 33179
Applicant's Telephone:305-522-1808 FAX:305-468-6579
Applicant's E-mail Address:kc@naoemiami.com
Relationship to Owner:
Owner's Name:
Owner's Address:
Owner's Telephone:FAX
Owner's E-mail Address: Signature of Owner:
Contact Person: Kevin Cory
Contact Person's Telephone:305-522-1808 E-mail Address: _kc@naoemiami.com

This application is available in alter Form No. 2001-01	nate formats upon request.
3. Please check one of the followin	ng:
[] New construction,	
[] Addition to a building or facility.	
X   Alteration to an existing buildi	ng or facility.
[ ] Historical preservation (addition).	•
[ ] Historical preservation (alteration	0.
4. <b>Type of facility.</b> Please describe use of the building (i.e., restaurant, o	the building (square footage, number of floors). Define the ffice, retail, recreation, hotel/motel, etc.)
Commercial-Mixed Use, 2 floors square feet. Lot Size 10,166 square fe	s, $1^{\rm st}$ floor is commercial, $2^{\rm nd}$ floor is apartments, 18,962 eet, Built in 1930
alteration):\$20,000 - \$30,000 6. Project Status: Please check the partial of this application. Describe status	phase of construction that boot downstands.
X   Under Design     Under Constru	
[   In Plan Review     Completed*	
* Briefly explain why the request has i	now been referred to the Commission.
The City of Miami Beach Chief A	Accessibility Inspector, Gladys Salas said, its not feasible to ss; there is no space. She said, I must get a waiver from the

Issue

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3:	
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extrei	ason(s) for Waiver Request: The Florida Building Commission may grant waivers of la-specific accessibility requirements upon a determination of unnecessary, unreasonable one hardship. Please describe how this project meets the following hardship criteria in all that would apply for consideration of granting the waiver.
X   iot af	The hardship is caused by a condition or set of conditions affecting the owner which doe ect owners in general.
Th	ere's no space to build an ADA entrance. Its a zero lot building up against the City's alk which is up against the asphalt for cars.
] Suh	stantial financial costs will be incurred by the owner if the waiver is denied.
	owner has made a <b>diligent investigation</b> into the costs of compliance with the code, but find an efficient mode of compliance. Provide detailed cost estimates and, where iate, photographs. Cost estimates must include bids and quotes.
OFFICE AND ADDRESS OF THE PARTY	and quotes.

	nents <b>MUST</b> be included and certified by signature and a certified by sig	A 44
). Licensed Design oject, his or her comr	Professional: Where a licensed design professional heats MUST be included and certified by signature.	as designe

### 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 _	23	day of	MAY	20 , 4
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Signature	Contraction of the second	(C. B Classical Signature, - representative described in the constitution of the co		
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Printed Name			mile der Palle der Mediciologica de La derença de la colonia de la descripción de la colonia de la descripción	

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. Florida statutes 553.509 Vertical Accessibility to all levels requirement. / 2004 FBC 11-4.1.3(5)
b.
c.
Has there been any permitted construction activity on this building during the past three years? If
so, what was the cost of construction?
[] Yes [X] No Cost of Construction:
Comments/Recommendation The design has not being submitted by the City for permit. However we had pre-design meetings in which we find that due to existing constrains it will be technically infeasible to provide vertical accessibility from the sidewalk to the space of proposed restaurant. The space has a gross area of about 400 sq ft and it is against the property line.
Jurisdiction <u>City Of Miami Beach</u>
Building Official or Designee Signature
Printed Name  Gladys N. Salas, PE

PX0001401

Certification Number

305-673-7610 ext. 6888/ 786-394-4087

Telephone/FAX

Address:

1700 Convention Center Dr. Miami Beach, FL 33139, 2ND Floor.

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