

WESTON CITY HALL

Issue: Placement of wheelchair accessible seating locations in the commission chamber.

Analysis: The applicant is requesting a waiver from dispersing seating locations with different sight lines in a new, \$4,000,000 municipal building with a 162 seat meeting area. The floor of the chamber has a 4.3 degree slope which would not permit wheelchairs to be seated on it. Seats in the area are fixed and the applicant proposes to place wheelchair seating at the front and rear. NOTE: The code section cited, 11-4.33.3 can **NOT** be waived since it is also a component of the federal ADAAG guidelines and is not Florida-specific.

Project Progress:

The project is in plan review.

Items to be Waived. Dispersement of sight lines, as required by Section 11-4.33.3.

11-4.33.3 Placement of Wheelchair Locations. Wheelchair areas shall be an integral part of any fixed seating plan and shall be provided so as to provide people with physical disabilities a choice of admission prices and lines of sight comparable to those for members of the general public.

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.

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: Weston City Hall

Address: 17200 Royal Palm Boulevard, Weston, FL 33326

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: Manuel Synalovski, AIA (Architect of Record)

Applicant's Address: 1800 Eller Drive, Suite 500, Fort Lauderdale, FL 33316

Applicant's Telephone: (954) 961.6806 FAX: (954) 961.6807

Applicant's E-mail Address: msynalovski@synalovskigutierrez.com

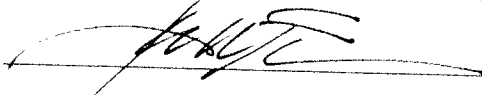
Relationship to Owner: Architect Firm: Synalovski Gutierrez Romanik Architects, Inc.

Owner's Name: City of Weston

Owner's Address: 2500 Weston Road, Weston, FL 33327

Owner's Telephone: (954) 385.2000 FAX: (954) 385.2010

Owner's E-mail Address: JFLINT@WESTONFL.ORG

Signature of Owner: 

Contact Person: John Flint, City Manager

Contact Person's Telephone: (954) 385.2000 E-mail Address: NAME.

This application is available in alternate formats upon request.
Form No. 2001-01

3. Please check one of the following:

- New construction.
- Addition to a building or facility.
- Alteration to an existing building or facility.
- Historical preservation (addition).
- Historical preservation (alteration).

4. Type of facility. Please describe the building (square footage, number of floors). Define the use of the building (i.e., restaurant, office, retail, recreation, hotel/motel, etc.)

City Hall consisting of ±13,000 S.F. of interior (A/C) area. The one story building is defined by administrative space, a lobby area and the commission chamber. Fixed seating (162) is provided in the commission chamber on a slopped floor surface (4.3% slope).

5. Project Construction Cost (Provide cost for new construction, the addition or the alteration):

± 4,000,000.00

6. Project Status: Please check the phase of construction that best describes your project at the time of this application. Describe status.

Under Design Under Construction*

In Plan Review Completed*

* Briefly explain why the request has now been referred to the Commission.

7. **Requirements requested to be waived.** Please reference the applicable section of Florida law. Only Florida-specific accessibility requirements may be waived.

Issue

1: FL Statute 553.509/FAC 11-4.33.3 placement of wheelchair locations... shall be provided so as to provide...a choice of ...lines of sight comparable to those for members of general public.

Issue

2: _____

Issue

3: _____

8. **Reason(s) for Waiver Request:** The Florida Building Commission may grant waivers of Florida-specific accessibility requirements upon a determination of unnecessary, unreasonable or extreme hardship. Please describe how this project meets the following hardship criteria. Explain all that would apply for consideration of granting the waiver.

The hardship is caused by a condition or set of conditions affecting the owner which does not affect owners in general.

Fixed seating as a "slope", similar to "tiered" seating in a theatre, is reasonable to promote improved lines of sight for the public. Providing level/clear ground floor area of 30'x 48" as part of "sloped" seating is technically unreasonable.

Substantial financial costs will be incurred by the owner if the waiver is denied.

For every sloped row of seats an equivalent wheelchair location must be provided causing an increase in required floor area of 4' X 6 rows X 68' = ±1,600 S.F.

The owner has made a **diligent investigation** into the costs of compliance with the code, but cannot find an efficient mode of compliance. Provide detailed cost estimates and, where appropriate, photographs. Cost estimates must include bids and quotes.

9. **Provide documented cost estimates for each portion of the waiver request and identify any additional supporting data which may affect the cost estimates.** For example, for vertical accessibility, the lowest documented cost of an elevator, ramp, lift or other method of providing vertical accessibility should be provided, documented by quotations or bids from at least two vendors or contractors.

a. Cost of additional s.f. required to provide wheelchair locations at every row of sloped seats

is equal to: $\pm 1,600 \text{ S.F.} \times \$250/\text{S.F.} = \pm \$400,000.00$

b. _____

c. _____

10. **Licensed Design Professional:** Where a licensed design professional has designed the project, his or her comments **MUST** be included and certified by signature and affixing of his or her professional seal. The comments must include the reason(s) why the waiver is necessary.

The proposed plan provides 162 fixed seats in 6 rows split into 2 sections by aisles. All seats are fixed along a sloped floor with a slope of 4.3% (accessible route). Flat cross aisles are provided at the top and bottom of the sloped fixed seats.

As per FL Statute 553.509, a choice of lines of sight must be provided. Thus we request a waiver that would allow the choice in two locations. At the top and bottom of the sloped floor at the level cross aisles.

In compliance with FACBC 4.3.1 (19) a total of 6 accessible spaces shall be provided. Further, 2 aisle seats will be aisle seats with no armrests. Also, 7 receivers with appropriate signage and transmitter will be provided for assistive listening.

The proposed location of accessible spaces will allow a minimum clear floor space of 30"x 48". Said floor space will be level.

The proposed plan provides excellent views for the accessible spaces and thus promotes equivalent services for the public requiring accessible seating.



Signature

Manuel Synalovski, AIA/FL LIC #11,628

Printed Name

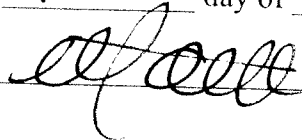
Phone number (954) 961-6806

(SEAL)

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 10 day of May, 20 06


Signature

Manuel Synalovski, AIA
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. FL Statute 553.509/FAC 11-4.33.3 placement of wheelchair locations... shall be provided so as to provide...a choice of ...lines of sight comparable to those for members of general public.

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 No Cost of Construction _____

Comments/Recommendation Recommend approval of waiver

Jurisdiction City of Weston, Broward County, Florida

Building Official or Designee *Cosmo Tornese*
Signature

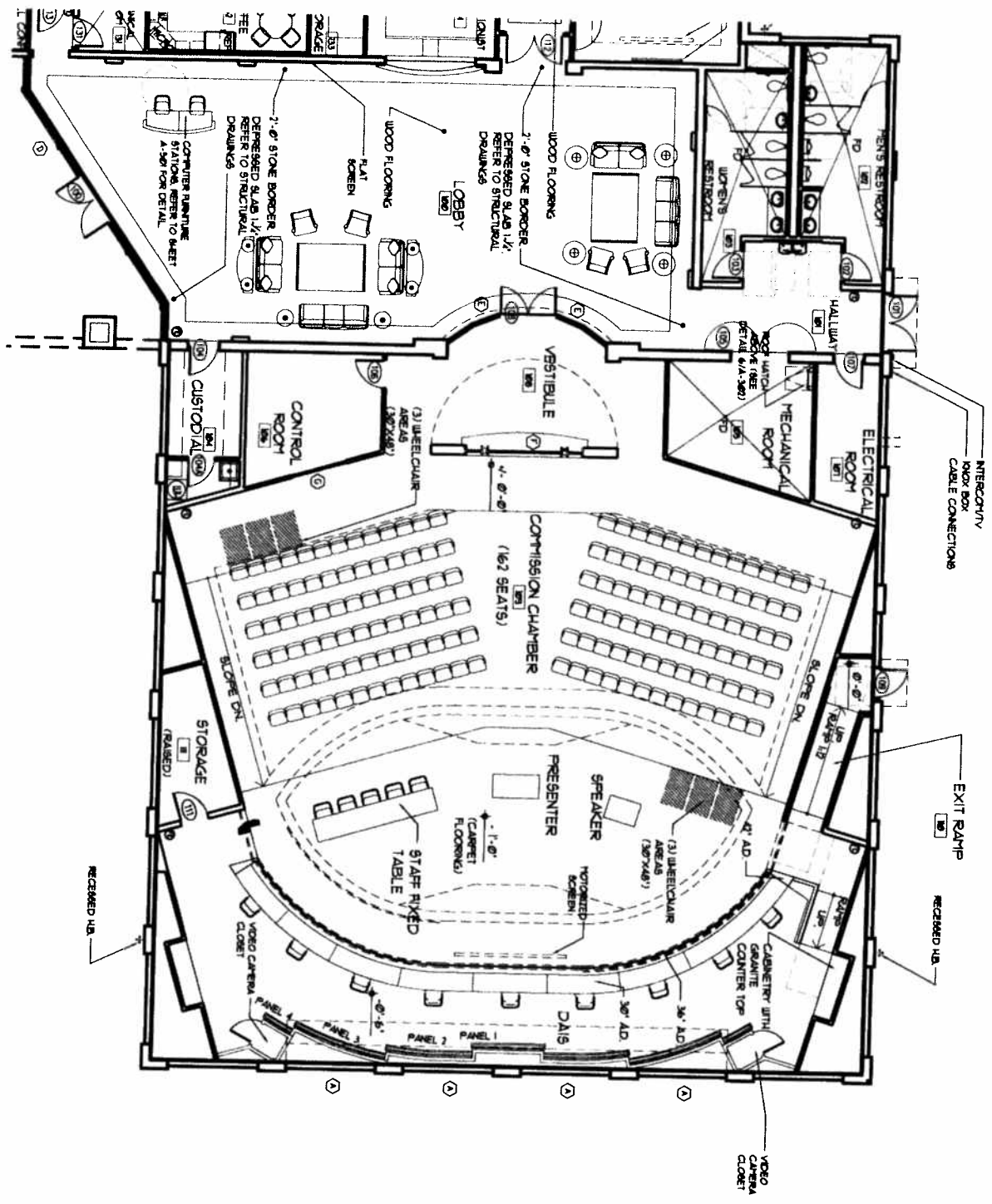
Cosmo Tornese, Building Official
Printed Name

BU0000284
Certification Number

(954) 385.0500/(954) 888.9018
Telephone/FAX

Address: 2700 South Commerce Parkway, Suite 103, Weston, FL 33331

1 FLOOR PLAN



INTERCOM/TV
BOX BOX
CABLE CONNECTORS

EXIT RAMP
RECEIVED H.B.

VIDEO
CAMERA
CLOSET

WESTON CITY HALL

WESTON, FLORIDA



SINALOWSKI
CONSULTING GROUP
ARCHITECTS INC.
10000 W. BOYD BLVD.
SUITE 200
WESTON, FL 33413
TEL: 781-326-4400
FAX: 781-326-4401
WWW.SINALOWSKI.COM

REVISION	1
03-10-08	
04-20-08	
L'CHER NO. AA 0002708	

DATE	03/27/08
BY	AS NOTED
NO.	003
SCALE	AS SHOWN

A-101

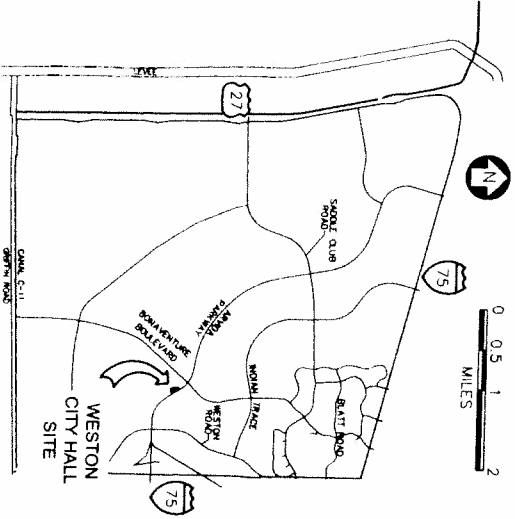
ZONING:
 (U) MUNICIPAL USE ZONING DISTRICT)
WESTON UTILITIES
 WATER & SEWER: _____ CITY OF AVAROE
 ELECTRIC: _____ FPL CO
SET BACKS:
 NORTH: 100'-0"
 SOUTH: 100'-0"
 EAST: 50'-0"
 WEST: 100'-0"

PARKING:
 PARKING PROVIDED: *32 SPACES
 TOTAL PARKING PROVIDED: *37 SPACES

SITE CALCULATION:
 TOTAL SITE AREA: 3,464.5 AC. * (48,230 SF. (100,000))
BUILDING FOOTPRINT: 14,399 SF. (3,190)
COVERED ENTRY AND COVERED SIDEWALKS: 1,421 SF. (0.55%)
VEHICLE LANE AREA: 1,983 SF. (1.14%)
TOTAL PERVIOUS AREA: 17,803 SF. (4.88%)
TOTAL IMPVIOUS AREA: 30,245 SF. (8.73%)
TOTAL PERVIOUS AREA: 58,079 SF. (30.21%)

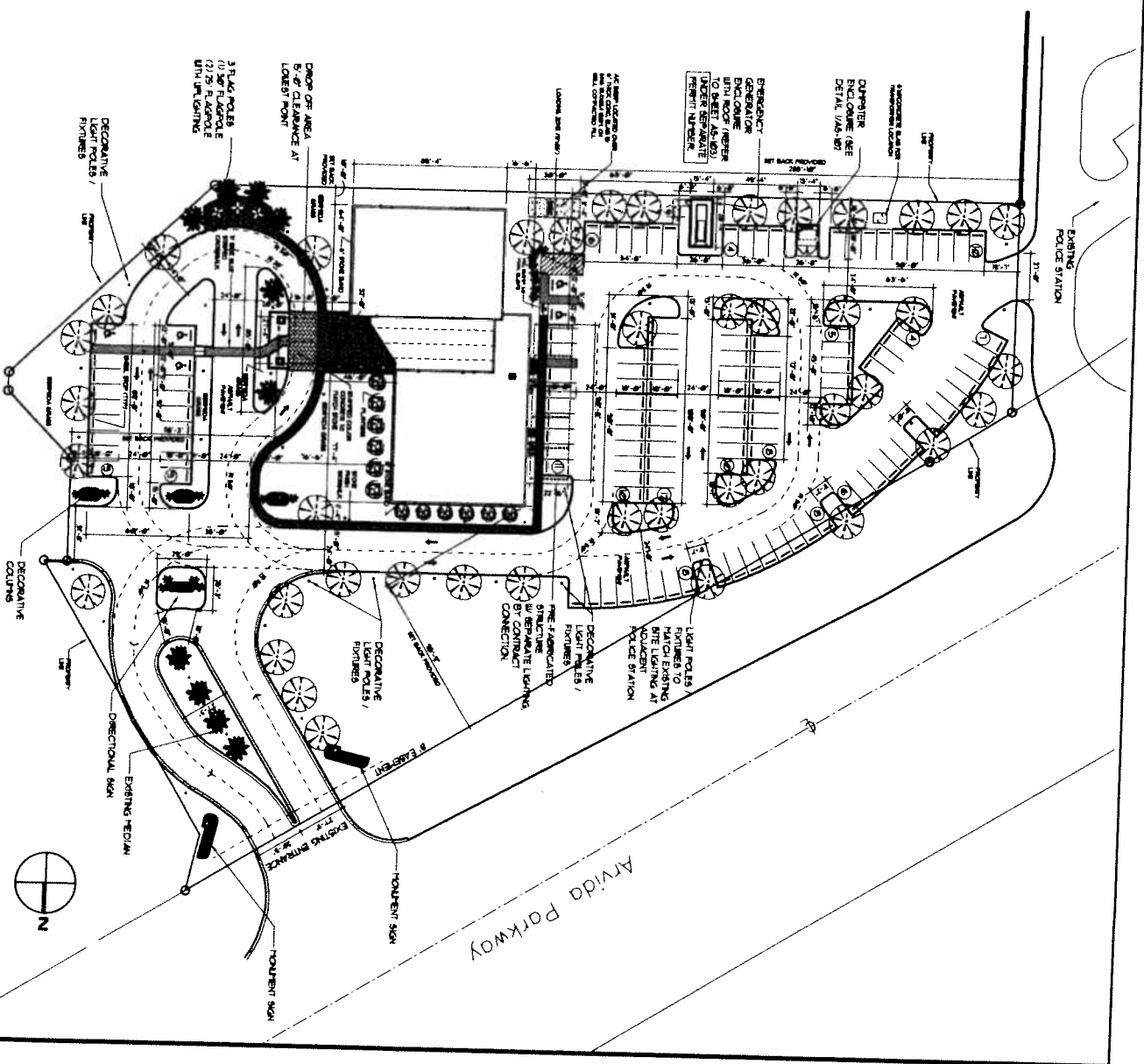
BUILDING INFORMATION:
 TOTAL BUILDING HEIGHT: 37'-8" (TOP OF PARAPET)
SECOND BUILDING AREA: 14,399 SF.
GROUND FLOOR AREA (TOTAL): 14,876 SF.
EXTERIOR WALL AREA: 348 SF.

2 SITE INFORMATION



3 LOCATION MAP

1 SITE PLAN



DATE	
REVISIONS	
NO.	
DESCRIPTION	
BY	
DATE	
DESIGNED BY	AA 0002705
CHECKED BY	
DATE	
SCALE	
AS NOTED	
108 05 003	
SHEET	
AS-101	

SITE PLAN	
SHEET 1 OF 1	

WESTON CITY HALL
 WESTON, FLORIDA

WESTON CITY HALL	
WESTON, FLORIDA	
DATE	
REVISIONS	
NO.	
DESCRIPTION	
BY	
DATE	
DESIGNED BY	AA 0002705
CHECKED BY	
DATE	
SCALE	
AS NOTED	
108 05 003	
SHEET	
AS-101	

STANLORDS
 CONSULTING ENGINEERS
 ARCHITECTS INC.
 1000 WEST 10TH AVENUE
 SUITE 100
 WESTON, FLORIDA 33412
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 FAX: 352.877.1001
 WWW.STANLORDS.COM