

DOMO JAPONES LLC

Issue: Vertical accessibility to a mezzanine in a restaurant.

Analysis: The applicant is requesting a waiver from providing vertical accessibility to an existing mezzanine in a 2,482 square foot restaurant undergoing a \$100,000 alteration. An estimate of \$34,175 to install a wheelchair lift was submitted; however, according to the applicant, the equipment could not be installed because it would encroach into the required clear stair space required by the life safety code.

Project Progress:

The project is in plan review.

Items to be Waived:

Vertical accessibility to a mezzanine, as required by Section 553.509, F. S.

553.509 Vertical accessibility. Nothing in Sections 553.501-553.513 or the guidelines shall be construed to relieve the owner of any building, structure or facility governed by those sections from the duty to provide vertical accessibility to all levels above and below the occupiable grade level regardless of whether the guidelines require an elevator to be installed in such building, structure or facility, except for:

- (1) Elevator pits, elevator penthouses, mechanical rooms, piping or equipment catwalks and automobile lubrication and maintenance pits and platforms;
- (2) Unoccupiable spaces, such as rooms, enclosed spaces and storage spaces that are not designed for human occupancy, for public accommodations or for work areas; and
- (3) Occupiable spaces and rooms that are not open to the public and that house no more than five persons, including, but not limited to equipment control rooms and projection booths.

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.

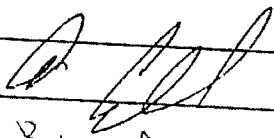
**REQUEST FOR WAIVER FROM ACCESSIBILITY REQUIREMENTS
CHAPTER 553, PART V, FLORIDA STATUTES**

Your application will be reviewed by the Accessibility Advisory Council and its recommendations will be presented to the 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: "Dome Japanese Hill"
Address: 4000 NE 2 Ave Miami, FL 33137

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: Amir Ben-Zion
Applicant's Address: 5700 Collins PH A Miami Beach, FL 33140
Applicant's Telephone: 305-573 8700 FAX 305 573 4234
Applicant's E-mail Address: amir@flshy.com
Relationship to Owner: _____
Owner's Name Amir Ben-Zion / Ari Gymbal
Owner's Address: "
Owner's Telephone: " FAX "
Owner's E-mail Address: _____
Signature of Owner: 
Contact Person: Shari Ben-Ami / Ari Gymbal (305) 573-8700
Contact Person's Telephone: 305-2153618 E-mail Address: Dnamir.Shari@jmail.com

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

3. Please check one of the following:

Florida Building Code, 2004 Complete Collection

- 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.)

- 2483 Square Foot, 1 Floor + Mezzanine,

- Restaurant

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

\$ 100,000

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.

The accessibility requirements ~~are~~ requires the owner/applicant to block the fire egress stairs and will also pose severe financial hardship on the owner.

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

Issue

1: Section # 4.10 Elevators

Issue

2: Section # 4-11 Platform Lift

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.

The Lift introduced with its platform will take up the width of the stairwell fire egress and block it entirely.

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

- Accessibility lift compliance estimated at 35% of construction costs (\$35k +)

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.

- Accessibility lift compliance estimated at 35% (or greater) of construction costs

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.

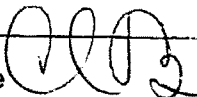
a. _____

b. _____

c. _____

10. Licensed Design Professional: Where a 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 REQUIRE STAIR LIFT WIDTH ENCROACHES COMPLETELY
INTO THE REQUIRED 44" WIDE EGRESS FROM MEZZANINE.

Signature  Printed Name CHARLES BENSON

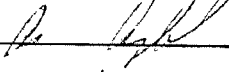
Phone Number 305-532-6161

(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 be the best of my knowledge true and correct.

Dated this 22nd day of May, 2007

Signature 

Printed Name AS Cymbal

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.

Florida Building Code, 2004 Complete Collection

- a. _____
- 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 _____

Jurisdiction _____

Building Official or Designee _____
Signature

Printed Name _____

Certification Number _____

Telephone/FAX _____

Address _____

Form No.: 2001-02, Page 1 of 2
Certification of Licensed Design Professional for Replicated Designs to be Placed on Consent Agenda

NOTE: This form is to be used only for cases in which design documents are duplicates of previously approved waivers and the project can be placed on a Consent Agenda pursuant to Rule 9B-7.003(3), Florida Administrative Code.

I, _____, a licensed architect/engineer in the state of Florida, whose Florida license number is _____, hereby state as follows:

1. I am the architect/engineer of record for the project known as (name of project) _____, for which the Owner seeks a waiver of one or more accessibility requirements in an application to which this Certification is



E & K Developers, LLC
Construction, Design, and Consulting
C.G.C. # 1511691

May 22nd, 2007

Asi Cymbal
President
Paradise Development
112 NE 41st Street
Miami, FL

RE: **Domo Japonese**

Dear Mr. Cymbal,

Thank you for the opportunity to provide you with an estimate for the installation of a wheel chair lift on the above referenced location. As you are aware, we will be requiring a permit for the work and as such I have included an allowance for that expense. However, we will not know the final number until we submit the drawings. Please find the following breakdown below for the scope of work;

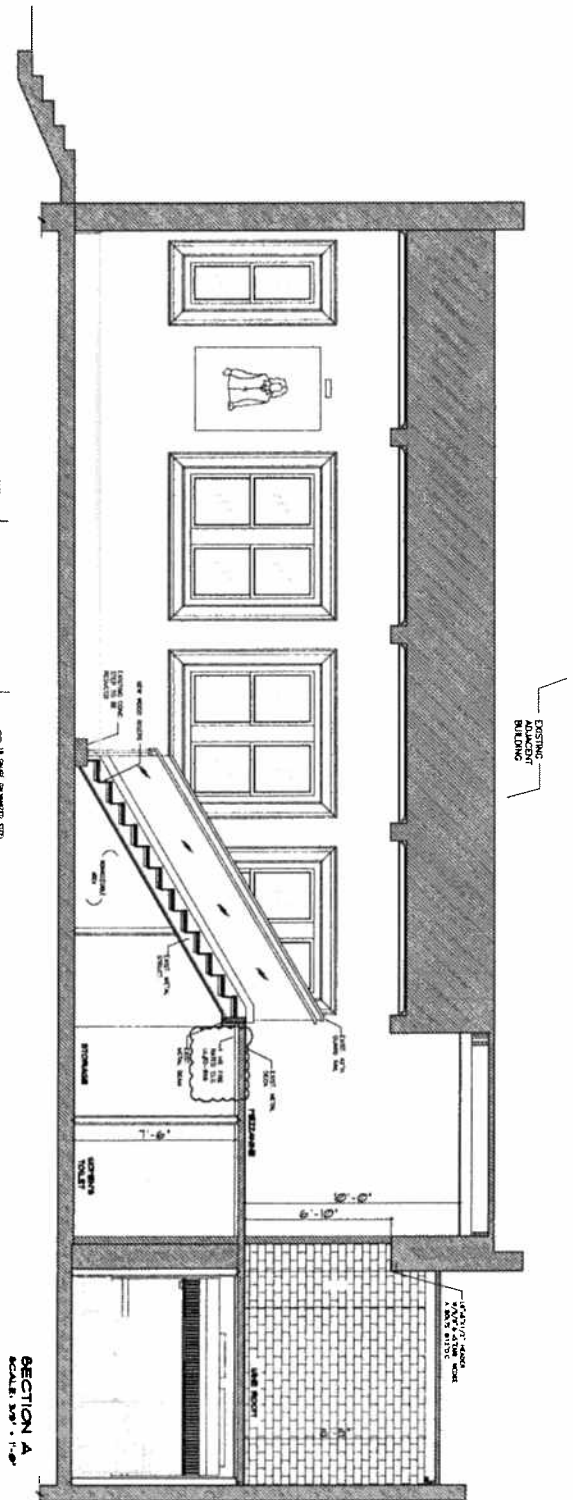
Scope of Work	Cost	Clarifications
Signed and sealed drawings	2000	A/ E
Permit	500	Allowance
Plans Processing	600	Allowance
Equipment	17000	Inclined wheel chair lift
Installation	1500	Installation.
Structural work	3000	Modification of slab to receive the lift
Electrical	3000	Electrical work required for lift 240V Single Phase 20 amp.
General Conditions	1800	
Overhead + Profit	4775	Flooring to be discussed. We have assumed a VCT finish and standard cabinets.
Total	\$34,175	Tenant requirements should be clarified. We have assumed some storage/ supplies cabinetry.

If you have any questions or would like to discuss the assumptions made please don't hesitate to call me at 305-970-2344.

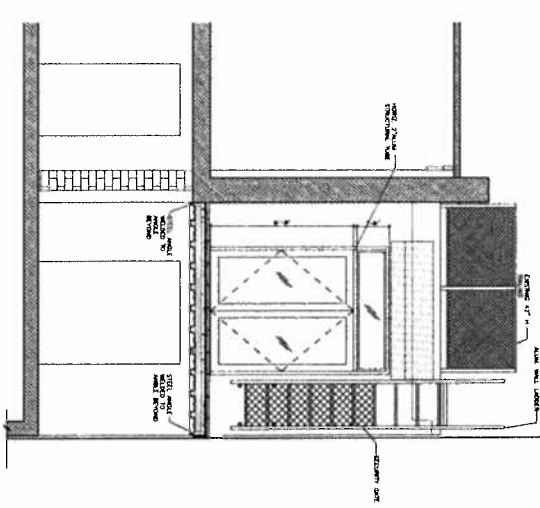
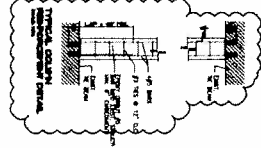
Sincerely,

Chaim Elkoby
President

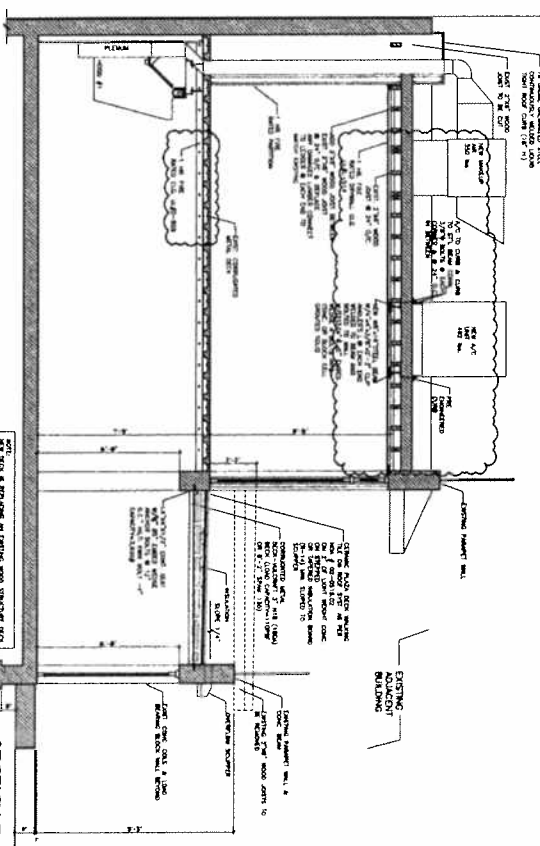
453 SW 52nd Court, Fort Lauderdale, FL 33312



SECTION A
SCALE 3/8" = 1'-0"



SECTION C
SCALE 3/8" = 1'-0"



SECTION B
SCALE 3/8" = 1'-0"

CONTRACTOR SHALL VERIFY ALL DIMENSIONS AND ALL CONDITIONS BEFORE PROCEEDING WITH WORK. ANY DISCREPANCIES BETWEEN THE DRAWINGS AND THE CONDITIONS OF THE PROJECT SHALL BE REPORTED TO THE ARCHITECT IMMEDIATELY. THE ARCHITECT SHALL BE NOTIFIED BY THE CONTRACTOR OF ANY DISCREPANCIES IN WRITING. THE CONTRACTOR SHALL BE RESPONSIBLE FOR OBTAINING ALL NECESSARY PERMITS AND APPROVALS FROM THE LOCAL AUTHORITIES. THE CONTRACTOR SHALL BE RESPONSIBLE FOR OBTAINING ALL NECESSARY INSURANCE COVERAGE. THE CONTRACTOR SHALL BE RESPONSIBLE FOR OBTAINING ALL NECESSARY UTILITIES INFORMATION. THE CONTRACTOR SHALL BE RESPONSIBLE FOR OBTAINING ALL NECESSARY ADJACENT PROPERTY INFORMATION. THE CONTRACTOR SHALL BE RESPONSIBLE FOR OBTAINING ALL NECESSARY ADJACENT BUILDING INFORMATION. THE CONTRACTOR SHALL BE RESPONSIBLE FOR OBTAINING ALL NECESSARY ADJACENT ZONING INFORMATION. THE CONTRACTOR SHALL BE RESPONSIBLE FOR OBTAINING ALL NECESSARY ADJACENT SETBACK INFORMATION. THE CONTRACTOR SHALL BE RESPONSIBLE FOR OBTAINING ALL NECESSARY ADJACENT EASEMENT INFORMATION. THE CONTRACTOR SHALL BE RESPONSIBLE FOR OBTAINING ALL NECESSARY ADJACENT ENCROACHMENT INFORMATION. THE CONTRACTOR SHALL BE RESPONSIBLE FOR OBTAINING ALL NECESSARY ADJACENT INTERFERENCE INFORMATION. THE CONTRACTOR SHALL BE RESPONSIBLE FOR OBTAINING ALL NECESSARY ADJACENT OBSTRUCTION INFORMATION. THE CONTRACTOR SHALL BE RESPONSIBLE FOR OBTAINING ALL NECESSARY ADJACENT ENCLOSURE INFORMATION. THE CONTRACTOR SHALL BE RESPONSIBLE FOR OBTAINING ALL NECESSARY ADJACENT ENCLOSURE INFORMATION.

RESTAURANT FOR
DOMO SUSHI
4000 NE 2nd Avenue

MIAMI, FL., 33137

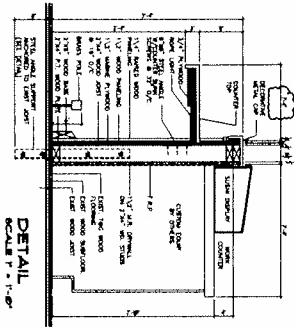
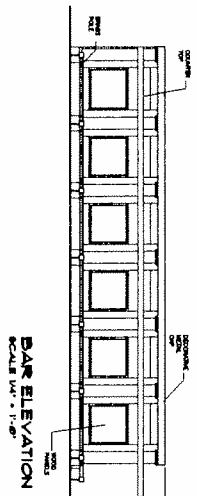
CHARLES H. BENSON & ASSOCIATES ARCHITECTS, P.A.
Architect
1885 N.W. 10th Ave. Suite 1000 Miami Beach, Florida 33139
Interior Design
1100 Brickell Ave. Suite 1000
Miami, Florida 33131

DATE: 11/11/11
L.P.A.# 11111
SCALE: 1/4" = 1'-0"

PROJECT: 2701

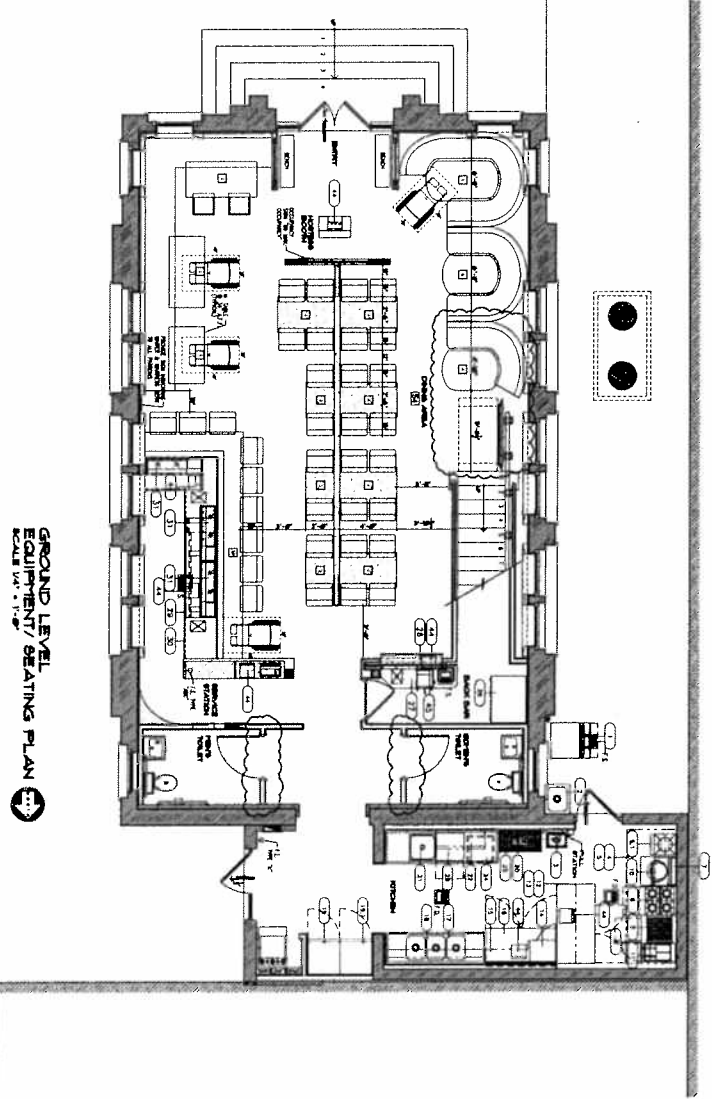
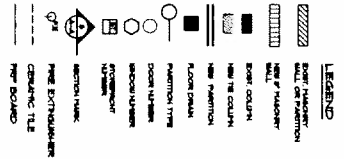
A-11
OF 11





BAR ELEVATION
SCALE 1/4" = 1'-0"

NO.	QTY.	DESCRIPTION	MANUFACTURER	MODEL NUMBER
1	1	WOOD STAIR	WOOD	WOOD
2	1	WOOD STAIR	WOOD	WOOD
3	1	WOOD STAIR	WOOD	WOOD
4	1	WOOD STAIR	WOOD	WOOD
5	1	WOOD STAIR	WOOD	WOOD
6	1	WOOD STAIR	WOOD	WOOD
7	1	WOOD STAIR	WOOD	WOOD
8	1	WOOD STAIR	WOOD	WOOD
9	1	WOOD STAIR	WOOD	WOOD
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26	1	WOOD STAIR	WOOD	WOOD
27	1	WOOD STAIR	WOOD	WOOD
28	1	WOOD STAIR	WOOD	WOOD
29	1	WOOD STAIR	WOOD	WOOD
30	1	WOOD STAIR	WOOD	WOOD
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33	1	WOOD STAIR	WOOD	WOOD
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94	1	WOOD STAIR	WOOD	WOOD
95	1	WOOD STAIR	WOOD	WOOD
96	1	WOOD STAIR	WOOD	WOOD
97	1	WOOD STAIR	WOOD	WOOD
98	1	WOOD STAIR	WOOD	WOOD
99	1	WOOD STAIR	WOOD	WOOD
100	1	WOOD STAIR	WOOD	WOOD



GROUND LEVEL
EQUIPMENT/SEATING PLAN
SCALE 1/4" = 1'-0"

OCCUPANT LOAD BASED ON TABLE 1004.1.2		OCCUPANT Load based on table 7.3.1.2 OF FLORIDA FIRE PREVENTION CODE		PLUMBING FACILITIES REQUIRED			
ROOM	AREA	NO. OF OCCUPANTS	NO. OF OCCUPANTS	OCCUPANCY	WATER CLOSETS	FIXTURES	REQUIREMENTS
ME. KITCHEN	100	10	10	1	1	1	1
ME. RESTROOM	100	10	10	1	1	1	1
ME. STORAGE	100	10	10	1	1	1	1
ME. SERVICE	100	10	10	1	1	1	1
ME. BAR	100	10	10	1	1	1	1
ME. SEATING	100	10	10	1	1	1	1
ME. TOTAL	500	50	50	5	5	5	5

RESTAURANT FOR:
DOMO SUSHI
4000 NE 2nd Avenue
MIAMI, FL, 33137

CHARLES H. BENSON & ASSOCIATES ARCHITECTS, P.A.
ARCHITECT
180 WASHINGTON AVENUE, SUITE 2000
ARCHITECTURE LICENSE # 48148

SCALE: 1/4" = 1'-0"
DATE: 4-8-07

PROJECT: 2701

A-3
11

ARCHITECT
 CHARLES H. BENSON & ASSOCIATES, ARCHITECTS, P.A.
 1848 SHERIDAN AVE. 2ND FLOOR MIAMI BEACH, FL 33139

- A-1 SITE PLAN, INDEX OF DRAWINGS & LOCATION MAP
- A-2 GROUND LEVEL FLOOR PLAN, GENERAL NOTES
- A-3 GROUND LEVEL EQUIPMENT/MECHANICAL PLAN, EQUIP. SCHEDULE, CAPACITY LOAD CHART, BAR ELEVATION
- A-4 GROUND LEVEL FINISH PLAN, BALANCED BATHROOM PLANS, BATHROOM'S ELEVATIONS
- A-5 GROUND LEVEL REFLECTED CEILING PLAN
- A-6 MEZZANINE FLOOR PLAN
- A-7 MEZZANINE EQUIPMENT/MECHANICAL PLAN
- A-8 MEZZANINE FINISH PLAN
- A-9 MEZZANINE REFLECTED CEILING PLAN
- A-10 ROOF PLAN, PARTITION DETAILS, SCHEDULES
- A-11 SECTIONS

PLUMBING, MECHANICAL & ELECTRICAL
 LAUREDO ENGINEERING COMPANY
 1500 ALHERNA AVENUE SUITE 220 CORAL GABLES, FLORIDA 33134

- M-1 HVAC GROUND LEVEL FLOOR PLAN & DETAILS
- M-2 HVAC MEZZANINE FLOOR PLAN & DETAILS
- M-3 HVAC ROOF PLAN & DETAILS
- M-4 HVAC SCHEDULES, DETAILS, GENERAL NOTES & LEGENDS
- E-1 GROUND FLOOR POWER PLAN
- E-2 GROUND FLOOR LIGHTING PLAN
- E-3 MEZZANINE POWER PLAN
- E-4 MEZZANINE LIGHTING PLAN
- E-5 ROOF LEVEL POWER PLAN & GENERAL NOTES
- E-6 ELECTRICAL RISER DIAGRAM
- P-1 SANITARY AND GREASE GROUND LEVEL PLAN & SCHEDULES
- P-2 GROUND LEVEL WATER AND GAS DISTRIBUTION PLAN
- P-3 MEZZANINE WATER DISTRIBUTION PLAN
- P-4 WATER, GREASE & WASTE DISTRIBUTION SYSTEM, BATHROOM AND GAS ISOMETRICS

HOOD DRAINAGE
 HOOD DEPOT
 TO SOUTH POWER LINE NO. DEERFIELD BEACH, FL

- H-1 HOOD GROUND FLOOR PLAN & GENERAL NOTES
- H-2 HOOD MEZZANINE AND ROOF FLOOR PLAN & SCHEDULES
- H-3 HOOD SECTIONS & DETAILS
- H-4 HOOD SECTIONS & DETAILS
- H-5 HOOD SECTIONS & DETAILS
- H-6 FIRE SUPPRESSION SYSTEM, SECTION, SCHEDULES & NOTES

LEVEL OF ALTERATION: 2

CONTRACTOR SHALL VERIFY ALL DIMENSIONS AND ALL CONDITIONS BEFORE PROCEEDING WITH WORK. ALL WORK SHALL BE SUBJECT TO INSPECTION AND APPROVAL BY THE CITY OF MIAMI AND CONTRACTOR SHALL BE RESPONSIBLE FOR OBTAINING ALL NECESSARY PERMITS AND APPROVALS FROM THE CITY OF MIAMI, MIAMI-DADE COUNTY, STATE OF FLORIDA AND FEDERAL AGENCIES. THE CONTRACTOR SHALL BE RESPONSIBLE FOR OBTAINING ALL NECESSARY PERMITS AND APPROVALS FROM THE CITY OF MIAMI, MIAMI-DADE COUNTY, STATE OF FLORIDA AND FEDERAL AGENCIES.

RESTAURANT FOR:
 DOMO SUSHI
 4600 NE 2nd Avenue

RESTAURANT FOR:
 DOMO SUSHI
 4600 NE 2nd Avenue



CHARLES H. BENSON & ASSOCIATES ARCHITECTS, P.A.
 architect planner interior
 1908 WASHINGTON AVE. 2ND FLOOR MIAMI BEACH, FLORIDA 33139
 ARCHITECTURE LICENSE # AH-15086 BOARD CERTIFICATE # A-1139

SCALE AS SHOWN
 DATE 4-25-07

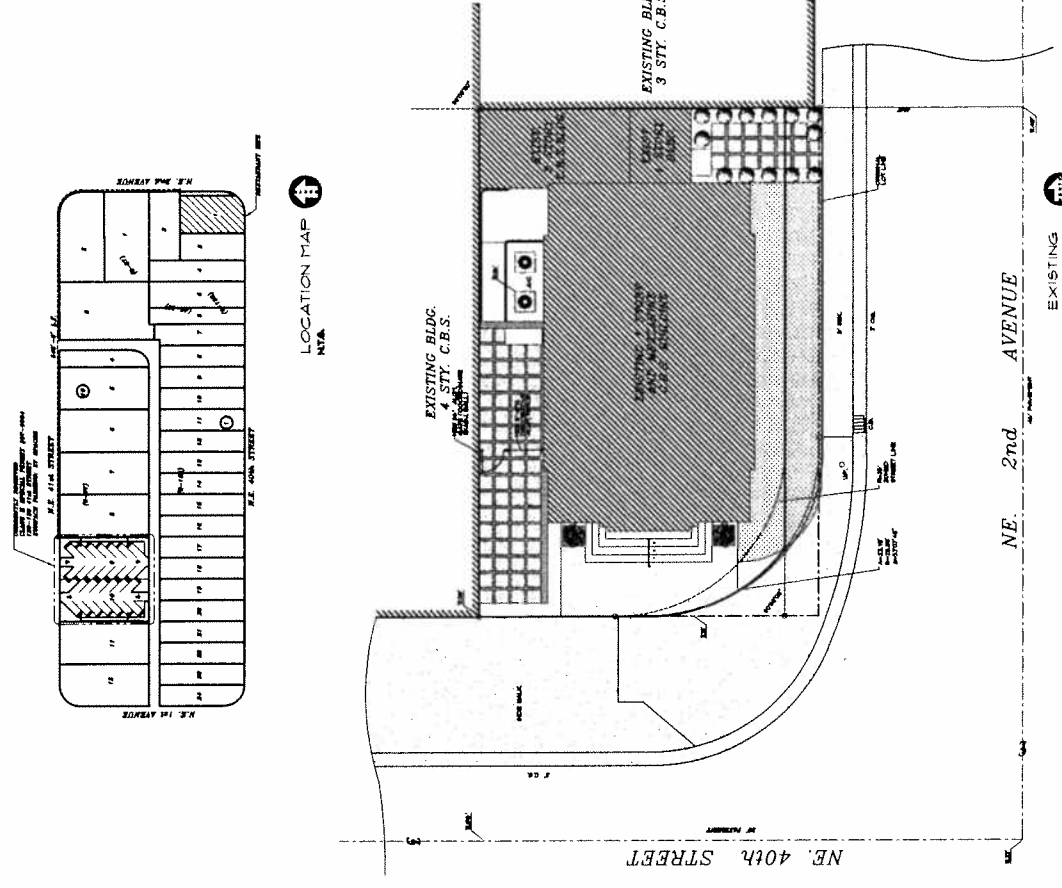
DESIGNED BY L. PEARCE

PROJECT NUMBER 2701

A-1 of 11



EXISTING SITE PLAN SCALE 1/8" = 1'-0"



LOCATION MAP
 NE 40th STREET
 NE 2nd AVENUE
 EXISTING BLDG. STY. C.B.S.
 EXISTING BLDG. STY. C.B.S.
 NE 40th STREET
 NE 2nd AVENUE

CHARLES H. BENSON & ASSOCIATES ARCHITECTS, P.A.
 1848 SHERIDAN AVE. 2ND FLOOR MIAMI BEACH, FLORIDA 33139
 ARCHITECTURE LICENSE # AH-15086 BOARD CERTIFICATE # A-1139
 ARCHITECT