FAU/UF JOINT USE FACILITY BT-624

Issue: Vertical accessibility to all tiers of seats in a university classroom.

Analysis: The applicant is requesting a waiver from providing vertical accessibility to all tiers of seats in a classroom. Access is provided at the mid-level from the main lobby and at the lower section via a ramp outside the classroom. According to the applicant, the multi-level design is intended to provide the most efficient and comfortable sight lines for students to learn through a case study teaching methodology. Visual and verbal interaction between students and instructors is available from every seat in the facility.

Project Progress:

The project is under design and in plan review.

Items to be Waived:

Vertical accessibility to all rows of seats, as required by Section 553.509, Florida Statutes.

- 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.

SCHENKELSHULTZ

TRANSMITTAL/FAX

DATE: May 29, 2009 FAX, NO. OF PAGES ____ TO: **Department of Community Affairs TRANSMITTAL Codes and Standards Section** 255 Shumard Oak Boulevard PICK - UP Tallahassee, FL 32399-2100 COURIER ATTENTION: Mary-Kathryn Smith **US MAIL** PHONE: 850-410-2598 X OVERNIGHT FAX: **REMARKS:** FROM: Joe Thomas

FROM: Joe Thomas

COMM NO.: 0820203

FOR YOUR USE

X AS REQUIRED

PROJECT: Florida Atlantic University

Florida Atlantic University
FAU-UF Joint Use Facility

REVIEW / COMMENT

| COPIES | DATED | NOTES |
|--------|----------|---|
| 1 | 05-01-09 | Cover letter |
| 1 | 05-29-09 | Notice to Waiver Application (signed and sealed) |
| 1 | 05-29-09 | Drawings A010, A101, A203, and A702 (42"x30") |
| 1 | 05-29-09 | Drawings A010, A101, A203, and A702 (11"x17") |
| 1 | 05-29-09 | Drawings A010, A101, A203, and A702 (8-1/2"x11" transparency) |
| 1 | 05-29-09 | PDF copies of application and drawings of CDrom |

SIGNATURE: Joe Thomas, AIA CC: 0820203 / Permit

ENKELSHULTZ

May 1, 2009

Department of Community Affairs Florida Building Commission 255 Shumard Oak Boulevard Tallahassee, Florida 32399-2100

RE: Request for Waiver FBC 2007 edition, Chapter 11 Florida Accessibility Code for Building Construction Florida Statute Section 553-509 Vertical Accessibility FAU/UF Joint Use Facility, BT-624

Dear Mr. Chairman:

Transmitted herewith is our Request for Waiver of the requirement for vertical accessibility to every level above and below the occupiable grade level for the specific classroom occurrence submitted.

Included are three 30 inch by 42 inch drawings; three 11 inch by 17 inch copies of the documents; three 8 1/2 inch by 11 inch transparencies; a hard copy of the request signed and sealed and a CD of the items listed above in PDF format.

We believe this fulfills the requirements and look forward to a positive determination after the Florida Building Commission reviews and considers the intent of the design.

Sincerely,

SCHENKELSHULTZ

cc: Vince Cucchiella Cathy Roche

0820203 permitting

Department of Community Affairs FLORIDA BUILDING COMMISSION 2555 Shumard Oak Boulevard Tallahassee, Florida 32399-2100

NOTICE TO WAIVER APPLICANTS

Please make certain you comply with the following:

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| The person submitting the waiver request application as the Applicant MUST sign the application. Should you fail to do so, your application will be returned. |
|---|
| If a licensed design professional (architect or engineer) has designed the project, his or her comments MUST be included as a part of this application. |
| Be as explicit as possible. The more information provided to the Florida Building Commission, the more informed its decisions can be. If you are claiming financial hardship, please specify why and to what degree. |
| If at all possible, PLAN TO ATTEND the Accessibility Advisory Council and the Florida Building Commission meetings. Sometimes pertinent facts are inadvertently omitted, or information provided/presented in the Request for Waiver application is not clear. Your attendance at the meetings to answer questions will enhance the possibility of the waiver being approved, since the Council and the Commission will receive the most complete information – from you. When we receive the completed application, we will send you a notice of the time, date, and place for both the Council and the Commission meetings. |

Enclosed is a List of Required Information and the Request for Waiver application.

If you have any questions or would like additional information, please call the Codes and Standards Section at (850) 487-1824.

Please mail this application to the Department of Community Affairs at the address above. As well as a hard copy, please include a copy of the application and drawings or plans on a CD in PDF format.

NOTE: Failure to submit electronically will not have any bearing on whether your petition is heard by the Commission, however, electronic filing will facilitate the Commission's movement toward utilizing CD technology to display the waiver application and attached floor plans to the Counsel and Commission.

This application is available in alternate formats upon request.

LIST OF REQUIRED INFORMATION:

- X Drawings that will clearly present your project and that identify the issue(s) that relate to the waiver you are requesting. As a minimum, the following drawings must be submitted:
 a. Project site plan
 b. 24" x 36" minimum size drawings
 c. Building/project sections (if necessary to assist in understanding the waiver request)
 d. Enlarged floor plan(s) of the area in question
- above.

 3. X One set of overhead transparencies (8 ½" x 11") of the drawings submitted in item one above. When numerous features are shown on the drawings, please designate the location

2. X One set of reduced scale (11" x 17") versions of the drawings submitted in item one

4. <u>NA</u> When substantial financial cost of compliance is alleged, supporting cost estimates with quotes from at least two vendors or contractors and catalog information.

of the waiver items by highlighting or outlining in color the affected areas.

- 5. NA If you feel photographs and/or renderings are necessary for your presentation, provide 40 legible color photocopies of the photographs and/or renderings. If color photocopies of photographs are provided, use a minimum size of 4" x 6" photographs with a maximum of two photographs per photocopied page.
- 6. X Please submit a hard copy of this application to the Department of Community Affairs. PLEASE NOTE: Although not required by Rule 9B-7, F.A.C., in addition to the hard copy please include a copy of the application and drawings or plans on a CD in PDF format.

General Information:

- a. **Equipment:** A CD projector is provided at the Accessibility Advisory Council and Florida Building Commission meetings. Any other equipment necessary for your presentation, such as an overhead projector, TV/VCR, slide or LCD projectors, etc., is the responsibility of the applicant.
- b. **Verbal Descriptions:** Presentations may be to sight or hearing impaired persons; visual presentations should consider adequate verbal and text descriptions of charts and pictures.

Your application will be reviewed by the Accessibility Advisory Council. You will have the opportunity to answer questions and/or make a short presentation **not to exceed 15 minutes**. The 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: <u>FAU/UF JOINT USE FACILITY</u> , <u>BT-624</u> | |
| Address: FLORIDA ATLANTIC UNIVERSITY | |
| BOCA RATON, FLORIDA | |
| 2. Name of Applicant. If other than the owner, please indicate relationship of applicant owner and written authorization by owner in space provided: | to |
| Applicant's Name <u>: SCHENKELSHULTZ</u> | |
| Applicant's Address: 1300 NORTH CONGRESS AVENUE WEST PALM BEACH, FLORIDA 33409 | |
| Applicant's Telephone (561) 697-3451 | |
| Applicant's E-mail Address: sferreri@schenkelshultz.com | |
| Relationship to Owner: <u>ARCHITECT</u> | |
| Owner's Name: <u>FLORIDA ATLANTIC UNIVERSITY</u> | |
| Owner's Address: 777 GLADES ROAD BOCA RATON, FLORIDA 33431-0991 | |
| Owner's Telephone: (561) 297-3000 FAX (561) 297-2260 | |
| Owner's E-mail Address: rrichman@fau.edu | |
| Signature of Owner: | |
| Contact Person: VINCE CUCCHIELLA | |
| Contact Person's Telephone (954) 762-5026 E-mail Address: cucchiel@fau.edu | |

| 3. Please check one of the following: |
|---|
| [X] 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.) |
| THE FACILITY IS A FOUR STORY LABORATORY AND CLASSROOM BUILDING. THE |
| STRUCTURE IS REINFORCED CONCRETE FOUNDATION AND COLUMNS, WITH STEEL |
| FRAMING; THE EXTERIOR IS BRICK AND MASONRY/STUCCO WITH ALUMINUM |
| WINDOWS AND CURTAINWALL INFIL. THE FACILITY IS COMPOSED OF |
| LABORATORIES, CLASSROOMS, AND OFFICES. |
| 5. Project Construction Cost (Provide cost for new construction, the addition or the alteration): \$\(\sum_{0.00} \) \$\(\sum_{0.00} \) \$\(\sum_{0.00} \) \$\(\sum_{0.00} \) |
| 6. Project Status: Please check the phase of construction that best describes your project at the time of this application. Describe status. |
| [X] Under Design [] Under Construction* |
| [X] In Plan Review [] Completed* |
| * Briefly explain why the request has now been referred to the Commission. |
| PLAN REVIEWERS HAVE COMMENTED THAT THE TIERED CLASSROOM DOES NOT |
| COMPLY WITH THE INTENT OF THE GUIDELINES REQUIRING VERTICAL |
| ACCESSIBILITY TO ALL LEVELS ABOVE AND BELOW THE OCCUPIABLE GRADE |
| LEVEL BY INTREPRETATION OF THE CODE. WE AND OUR DESIGN STAFF |

1 1

| SUBMIT THIS REQUEST FOR RELIEF AS ACCESSIBLE SEATING IS PROVIDED ON TWO |
|--|
| LEVELS OF THE TIERED CLASSROOM (#103). THE MID- LEVEL IS ACCESIBLE |
| THROUGH THE MAIN DOORS FROM THE LOBBY AND ACCESS TO THE LOWEST LEVEL |
| IS PROVIDED BY A RAMP OUTSIDE OF THE CLASSROOM. THIS ALLOWS PHYSICALLY |
| DISABLED USERS A CHOICE OF SEATING AT TWO LEVELS. |
| 7. Requirements requested to be waived. Please reference the applicable section of Floridalaw. Only Florida-specific accessibility requirements may be waived. |
| Issue |
| 1: FLORIDA STATUTE SECTION 553.509; VERTICAL ACCESSIBILITY |
| |
| 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. |
| [X] The hardship is caused by a condition or set of conditions affecting the owner which does not affect owners in general. |
| THE "CASE STUDY STYLE" TEACHING METHOD DICTATES THAT THE PLAN |
| ARRANGEMENT PROVIDE OPTIMUM SIGHT LINES FOR THE STUDENTS |
| PARTICIPATION IN CLASSROOM EXERCISES. AS NOTED ABOVE THE DESIGN |
| PROVIDES SEATING AREAS ON TWO OF THE LEVELS AND WITH MOVABLE CHAIRS |

| SEATING POSITIONS ARE FLEXIBLE. | | |
|--|--|--|
| [] Substantial financial costs will be incurred by the owner if the waiver is denied. | | |
| NOT APPLICABLE | | |
| [] 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. NOT APPLICABLE | | |
| 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. <u>THE RAMP ACCESS IS ALREADY PART OF THE PROJECT AND IS NOT A SEPARATE</u> <u>LINE ITEM IN THE COST ESTIMATE.</u> | | |
| | | |
| 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 WAIVER IS NECESSARY IN ORDER TO SUPPORT THE TEACHING METHODOLOGY. | | |
| THE DESIGN OF THE CLASSROOM IS BASED ON A "CASE STUDY STYLE" TEACHING | | |

A Comment

METHODOLOGY THAT ALLOWS FOR INTERACTION BOTH VERBAL AND VISUAL OF

EVERY SEAT TO EVERY OTHER SEAT IN THE ROOM, FURTHERMORE THE INSTRUCTOR

MUST HAVE VERBAL AND VISUAL ACCESS DIRECTLY TO EACH STUDENT IN A MORE

DIRECT MANNER THAN FOUND IN A "TRADITIONAL" CLASSROOM FORMAT. IN THE

PROPOSED DESIGN NOT ONE STUDENT SEAT IS MORE THAN 4 ROWS AWAY FROM

THE INSTRUCTOR, THE MOST EFFICIENT AND INTIMATE WAY OF PROVIDING THIS

PROXIMITY IS BY STEPPING UP THE ROWS.

Signatry

Samuel J. Ferreri, AIA

Printed Name

Phone number (561) 697-3451

(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 | day of | , 20 |
|-------------------|--------|--|
| Samuel J. Ferreri | AIA | |
| Signature | | |
| | | |
| Printed Name | | The same of the sa |

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.

| | lorida Statutes section 553.509 Vertical Accessibility |
|--------------------|--|
| | Florida Statutes section 553.512 Modifications and waivers |
| c | |
| Has there so, what | e been any permitted construction activity on this building during the past three years? If was the cost of construction? |
| [] Yes [|] No Cost of Construction |
| Commer | nts/Recommendation |
| | |
| Jurisdicti | ion |
| Building | Official or Designee Signature Printed Name PBC 393 Certification Number 561-997-3894 Telephone/FAX |
| Address: | |
| | BUILDING CODE ADMINISTRATION Reviewed for Code Compliance FLORIDA ATLANTIC James Preston Baker PE 47263 PBC 1993 Signature Date |







