

MARQUIS

Issue: Vertical accessibility to the cold plunge pool in the spa area.

Analysis: The applicant is requesting a waiver from providing vertical accessibility to the cold pool located in the spa area of a new, \$185,000,000 high rise residential building. Mechanical, electrical and plumbing requirements as well as HRS rules constrict the amount of space available adjacent to the pool in the spa. A pool deck spa has comparable facilities, but entrance into the water requires the assistance of an attendant. The spas and saunas have been designed to be accessible, and the only issue is independent access to the pool. The building official concluded that the pool deck facility is equivalent to the services provided in the main spa area.

Project Progress:

The project is completed.

Items to be Waived:

Vertical accessibility to the cold pool, 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.

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: MARQUIS

Address: 1100 BISCAYNE BLVD. MIAMI, FLORIDA 33127

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: SERGIO S. BAKAS

Applicant's Address: 801 BRICKELL AVENUE, SUITE 1100, MIAMI, FLORIDA 33131

Applicant's Telephone: (305) 372-1812 FAX: (305) 372-1175

Applicant's E-mail Address: SBAKAS@ARQUITECTONICA.COM

Relationship to Owner: ARCHITECT OF RECORD

Owner's Name: LEVIEV BOYMELGREEN MARQUIS DEVELOPERS, LLC.

Owner's Address: 3050 BISCAYNE BLVD, SUITE 700, MIAMI, FLORIDA 33137

Owner's Telephone: (305) 571-4030 FAX: (305) 571-2016

Owner's E-mail Address: AGALBUT@HUDCAP.COM

Signature of Owner:  via president

Contact Person: ALEX SMITH JR.

Contact Person's Telephone: (954) 914-1695 E-mail Address: ASMITH@AFRICAISRAEL.US

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.)

A RESIDENTIAL BUILDING WITH ON-SITE PARKING CONSISTING OF 52 STORIES
OR APARTMENTS & 11 LEVELS OF PARKING, HOTEL ROOMS, LOBBY, & RETAIL /
RESTAURANT WITH 2 ADDITIONAL LEVELS OF AMENITIES INCLUDING A SPA,
POOL, GYM, AND TOWNHOUSES.

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

\$185,000,000.00.

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.

THE CITY OF MIAMI BUILDING DEPT. HAVING JURISDICTIONAL AUTHORITY HAS
INDICATED THAT THE AREAS IN QUESTION, WHILE PERMITTED FOR
CONSTRUCTION, DO NOT MEET THE ADA ACCESSIBILITY CODE.

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

Issue

1: Section 553.509, Florida Statutes, "Vertical Accessibility" and Florida Building Code
2001 Section 11-4.1.13.

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.

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

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. _____

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.

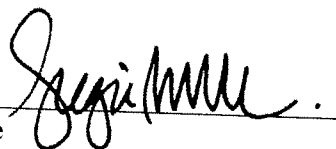
This is a summary of the accessibility issue for the cold plunges located on the level 12 women's and men's spas. The program for these areas called for a cold plunge adjacent to the steam room and sauna that would give patrons an option to experience the health benefits of going from a heated environment to a cold environment. The areas that are designated for the cold plunges, steam rooms and saunas are areas with limited space due to structural and MEP components, which made it difficult simultaneously to meet both HRS and ADA requirements. Due to the limited space, permanent vertical access to the cold plunges contained on the spa levels could not be introduced. However, the layout for both the women's and men's cold plunges meets the requirements set by HRS, which require at least 50% of the area surrounding

the pool to be accessible to at least 48". (The steam rooms and saunas are designed for accessibility and meet the clearances as required by ADA 2004 Guidelines). During the permitting review process, the City plans reviewer raised the question of accessibility to the cold plunges, and we in turn addressed the question by providing a substantially equivalent facility on the pool deck on level 14. On the pool deck, the design includes an accessible route to the cold and hot spa water's edge. This was seen by the plans reviewer as an equivalent facilitation as stated in Chapter 1 of the ADA 2004 Guidelines Section 103 "Equivalent Facilitation." With this interpretation established, we proceeded with the scheduled construction activities with no further revisions to the cold plunges on level 12.

During the TCO process, the building inspector reversed the prior decision of the plans reviewer and did not accept the pool deck hot and cold spa as equivalent facilitation. This new interpretation was brought to the attention of the building official, and he found that a vertical means of access is required for the cold plunges on the 12th floor. Although ADA guidelines for spa and pools are not written into any federal or local statutes, vertical accessibility is required per the Florida Building Code 2001 Section 11-4.1.3. Due to the limited space in these areas on the 12th floor, as well as the requirement to comply with HRS regulations regarding access surrounding pool areas, introducing a permanent chair lift would not be practical, as it will decrease the clear width for egress from the pools.

A portable lift is provided at the level 12 spa to assist in access to the cold plunges, allowing a person with disability to rise to the level of the cold plunge deck; however, this system requires assistance by staff. Section 103 of the ADA 2004 Guidelines states, "Nothing in these requirements prevents the use of designs, products, or technologies as alternatives to those prescribed, provided they result in substantially equivalent or greater accessibility and usability."

The waiver should be granted because the spirit of the ADA guideline was addressed by providing the portable lift for the level 12 cold plunges, together with access to the pool deck spas on level 14, which are accessible as prescribed by ADAG 2004 and FBC 2001 Section 11-4.1.3. Moreover, in addition to the accessible cold plunge area on the 14th floor, the steam and sauna rooms in the spa areas are located within 35' (in the men's area) and 40' (in the women's area) of the shower areas, which would allow for a similar experience as a cold plunge--i.e., the opportunity to experience the health benefits of going from a heated environment to a cold environment.

Signature 

SERGIO S. BAKAS
Printed Name

Phone number: (305) 372-1812

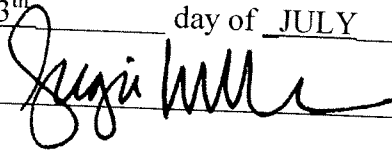
(SEAL)

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 13th day of JULY, 2009

Signature



SERGIO S. BAKAS

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. SECTION 11-4.1.13 FBC.

b. SECTION 553.509 F.S.

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 \$185,000,000.00

Comments/Recommendation WE RECOMMEND APPROVAL BASED ON THE SAME LEVEL OF EXPERIENCE TO THE CUSTOMERS.

Jurisdiction CITY OF MIAMI, FLORIDA

Building Official or Designee:

Signature



MARIANO V. FERNANDEZ
Printed Name

BU 689
Certification Number

(305) 416 1107 (305) 416 1060
Telephone/FAX

Address: 444 SW 2 AVE . MIAMI FL 33130

INTERSTATE 395

METROOVER ABOVE

N.E. 11TH TERRACE

N.E. 11TH STREET (2-WAY PROPOSED)

11TH STREET METROOVER STATION

N.E. 2nd AVENUE

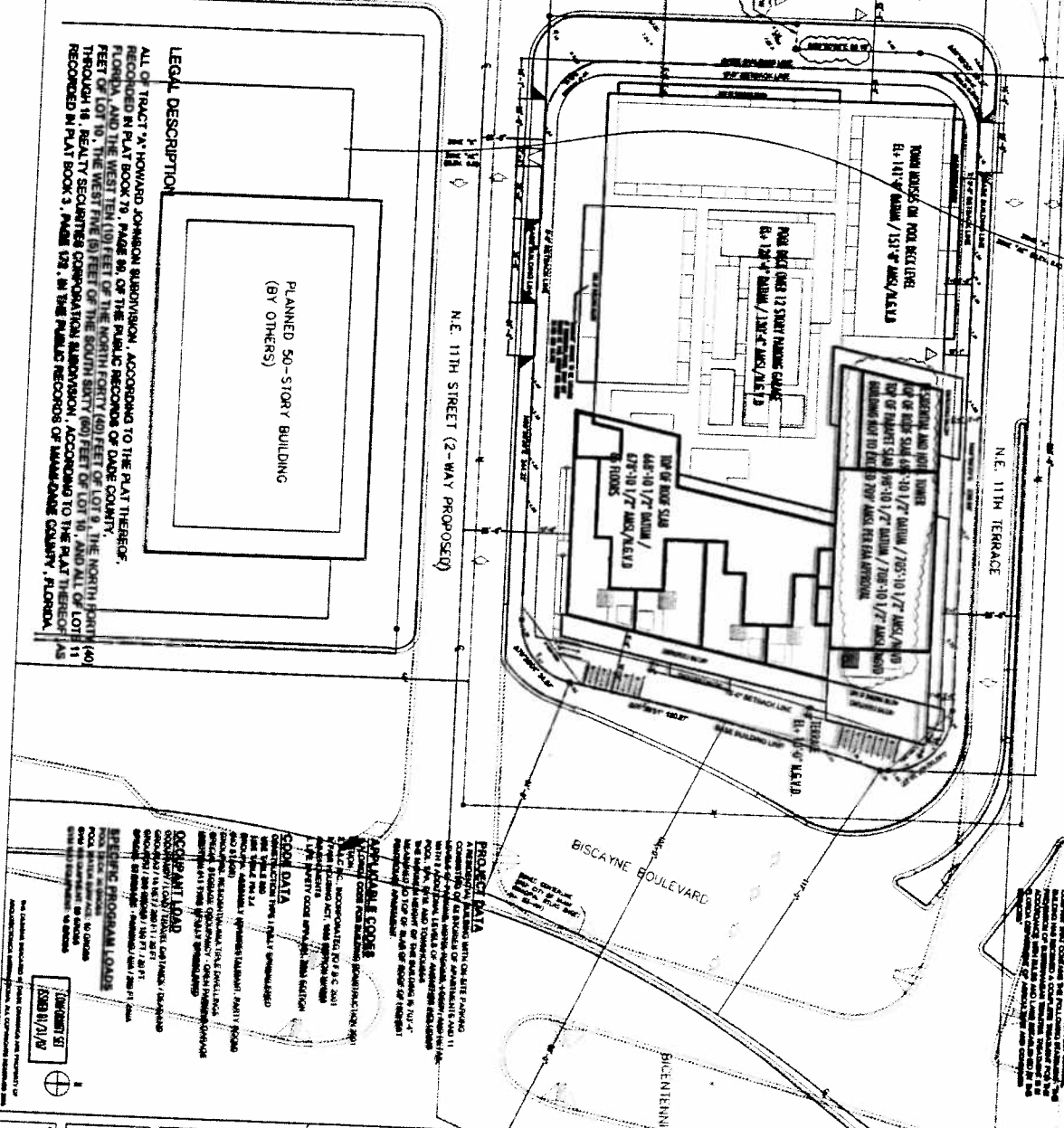
BISCAYNE BOULEVARD

BUCENTENNIAL

LEGAL DESCRIPTION

ALL OF TRACT "A" HOWARD JOHNSON SUBDIVISION, ACCORDING TO THE PLAT THEREOF, RECORDED IN PLAT BOOK 79, PAGE 86, OF THE PUBLIC RECORDS OF DADE COUNTY, FLORIDA, AND THE WEST TEN (10) FEET OF THE NORTH FORTY (40) FEET OF LOT 10, THE WEST FIVE (5) FEET OF THE SOUTH FIFTY (50) FEET OF LOT 9, THE NORTH FORTY (40) FEET OF LOT 10, THE WEST FIVE (5) FEET OF THE SOUTH FIFTY (50) FEET OF LOT 10, AND ALL OF LOT 11 AS RECORDED IN PLAT BOOK 3, PAGE 128, IN THE PUBLIC RECORDS OF DADE COUNTY, FLORIDA.

PLANNED 50-STORY BUILDING (BY OTHERS)



ALL BUILDINGS SHALL BE CONSTRUCTED IN ACCORDANCE WITH THE CITY OF MIAMI BUILDING CODE AND ALL OTHER APPLICABLE CODES AND REGULATIONS. THE CONTRACTOR SHALL BE RESPONSIBLE FOR OBTAINING ALL NECESSARY PERMITS AND APPROVALS FROM THE CITY OF MIAMI AND THE STATE OF FLORIDA. THE CONTRACTOR SHALL BE RESPONSIBLE FOR OBTAINING ALL NECESSARY PERMITS AND APPROVALS FROM THE CITY OF MIAMI AND THE STATE OF FLORIDA. THE CONTRACTOR SHALL BE RESPONSIBLE FOR OBTAINING ALL NECESSARY PERMITS AND APPROVALS FROM THE CITY OF MIAMI AND THE STATE OF FLORIDA.

PROJECT DATA

REVISIONS TO BE MADE WITH THE ARCHITECT'S APPROVAL. ALL CHANGES TO BE MADE IN THE ORIGINAL DRAWINGS SHALL BE INDICATED BY A CIRCLED NUMBER AND A LETTER. THE CONTRACTOR SHALL BE RESPONSIBLE FOR OBTAINING ALL NECESSARY PERMITS AND APPROVALS FROM THE CITY OF MIAMI AND THE STATE OF FLORIDA.

NOTICE TO CONTRACTOR

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GENERAL NOTES

ALL DIMENSIONS ARE TO FACE UNLESS OTHERWISE NOTED. ALL DIMENSIONS ARE TO FACE UNLESS OTHERWISE NOTED. ALL DIMENSIONS ARE TO FACE UNLESS OTHERWISE NOTED.

PERMIT LOAD

ALL DIMENSIONS ARE TO FACE UNLESS OTHERWISE NOTED. ALL DIMENSIONS ARE TO FACE UNLESS OTHERWISE NOTED. ALL DIMENSIONS ARE TO FACE UNLESS OTHERWISE NOTED.

ENERGY PROGRAM LOADS

ALL DIMENSIONS ARE TO FACE UNLESS OTHERWISE NOTED. ALL DIMENSIONS ARE TO FACE UNLESS OTHERWISE NOTED. ALL DIMENSIONS ARE TO FACE UNLESS OTHERWISE NOTED.

MARKITIS
1100 BISCAYNE BOULEVARD
MIAMI, FL 33130

ARCHITECTONICA
ARCHITECTS
1100 BISCAYNE BOULEVARD
MIAMI, FL 33130

CONTRACTOR

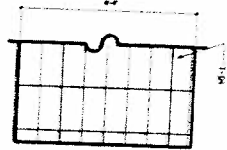
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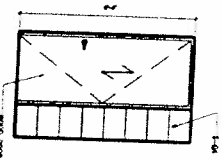
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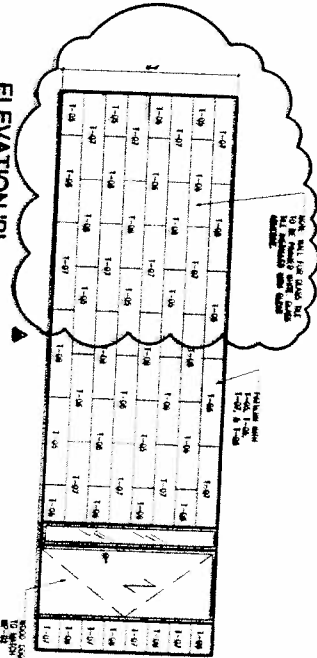
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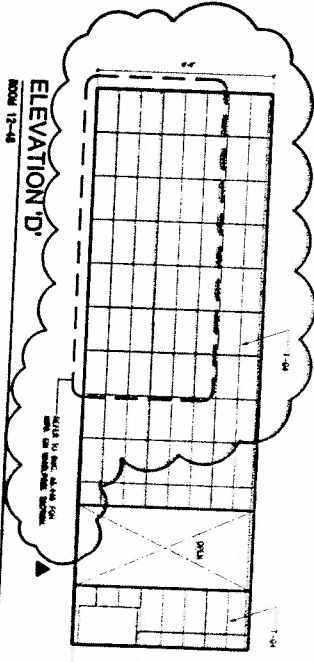
ELEVATION 'A'
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ELEVATION 'C'
ROOM 13-48 SCALE AS SHOWN



ELEVATION 'B'
ROOM 13-48 SCALE AS SHOWN



ELEVATION 'D'
ROOM 13-48 SCALE AS SHOWN

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BY: [Signature]



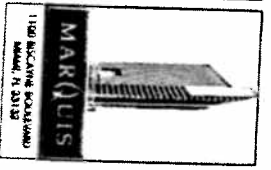
ADJUSTRONICA
1180 BUCKINGHAM BOULEVARD
ANN ARBOR, MI 48106

CONTRACT SERIAL
Contract No. 13-48
Project Name: [Blank]
Contractor: [Blank]
Architect: [Blank]

A5.439
1/2" = 1'-0"



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 CHECKED BY: [Name]

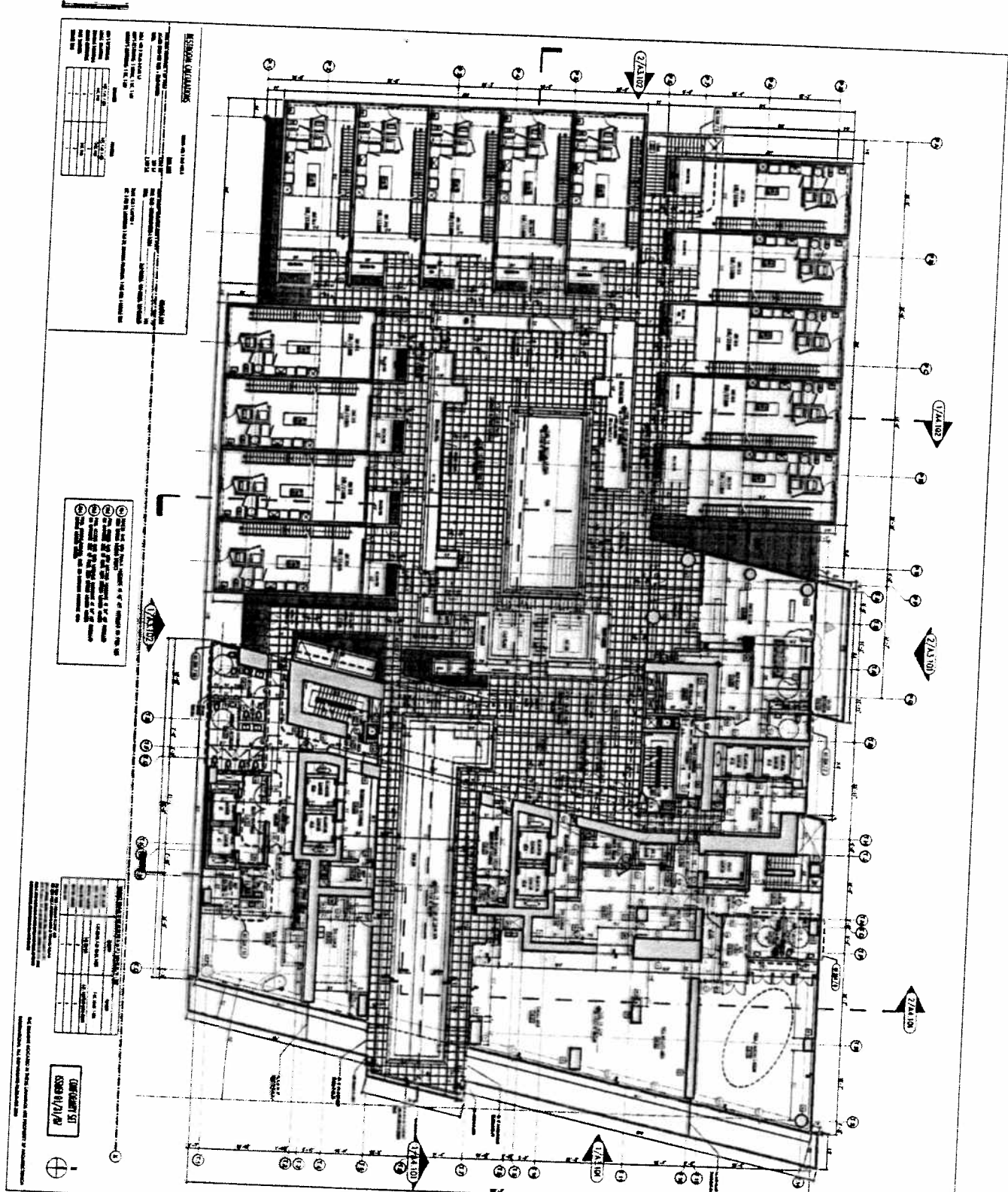


ARCHITECTONICA
 ARCHITECTS
 1100 BUCKINGHAM BUILDING
 SUITE 1000
 WASHINGTON, DC 20004
 TEL: 202.462.1100
 FAX: 202.462.1101
 WWW.ARCHITECTONICA.COM

CONTRACT BILL
 CONTRACT NO. 1100B
 PROJECT NO. 1100B
 DATE: 02/01/10
 DRAWN BY: [Name]
 CHECKED BY: [Name]

SECTION 8 - BLOW-UP
 SCALE: 3/8\"/>

A4.202



GENERAL NOTES

1. ALL WORK TO BE IN ACCORDANCE WITH THE SPECIFICATIONS AND DRAWINGS.

2. THE CONTRACTOR SHALL BE RESPONSIBLE FOR OBTAINING ALL NECESSARY PERMITS AND APPROVALS.

3. THE CONTRACTOR SHALL MAINTAIN ACCESS TO ALL ADJACENT PROPERTIES AT ALL TIMES.

4. THE CONTRACTOR SHALL PROTECT ALL EXISTING UTILITIES AND STRUCTURES.

5. THE CONTRACTOR SHALL MAINTAIN ADEQUATE SAFETY MEASURES THROUGHOUT THE PROJECT.

6. THE CONTRACTOR SHALL SUBMIT ALL MATERIALS AND WORKMANSHIP FOR INSPECTION AND APPROVAL.

7. THE CONTRACTOR SHALL MAINTAIN RECORD DRAWINGS THROUGHOUT THE PROJECT.

8. THE CONTRACTOR SHALL BE RESPONSIBLE FOR OBTAINING ALL NECESSARY INSURANCE COVERAGE.

9. THE CONTRACTOR SHALL MAINTAIN ADEQUATE COMMUNICATIONS WITH THE ARCHITECT AND OWNER.

10. THE CONTRACTOR SHALL MAINTAIN ADEQUATE RECORDS OF ALL WORK DONE.

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REVISIONS

NO.	DATE	DESCRIPTION
1	10/15/10	ISSUED FOR PERMIT
2	11/05/10	REVISED PER ARCHITECT COMMENTS
3	12/01/10	REVISED PER ARCHITECT COMMENTS
4	01/15/11	REVISED PER ARCHITECT COMMENTS
5	02/01/11	REVISED PER ARCHITECT COMMENTS
6	03/01/11	REVISED PER ARCHITECT COMMENTS
7	04/01/11	REVISED PER ARCHITECT COMMENTS
8	05/01/11	REVISED PER ARCHITECT COMMENTS
9	06/01/11	REVISED PER ARCHITECT COMMENTS
10	07/01/11	REVISED PER ARCHITECT COMMENTS

DATE: 08/08/11

A1.108

CONTRACTOR'S MANUAL

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ARQUITECTONICA

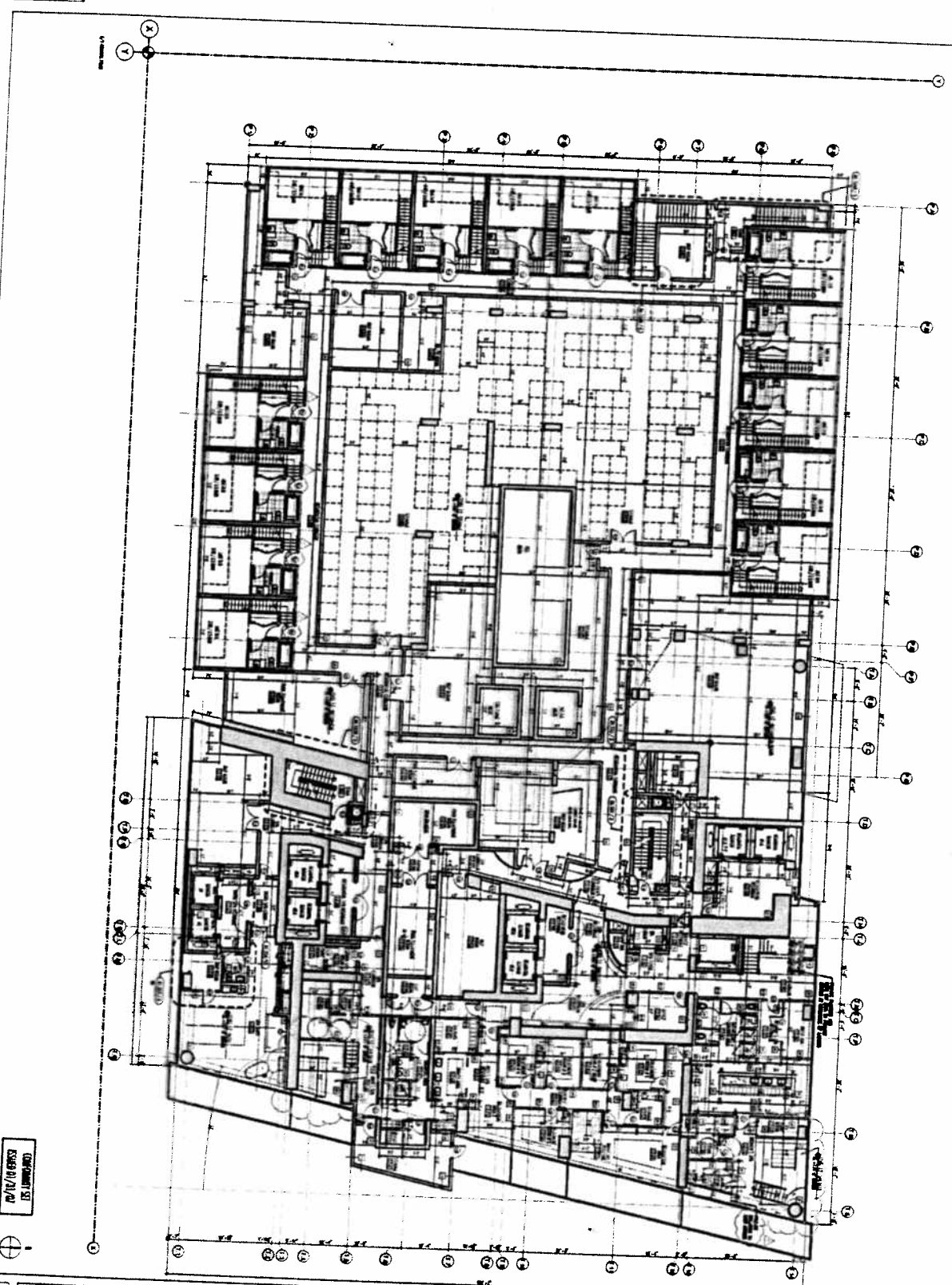
1100 BUCKINGHAM BOULEVARD
SUITE 1000
DALLAS, TX 75205

PHONE: (214) 760-1000
FAX: (214) 760-1001
WWW.ARQUITECTONICA.COM

DATE: 08/08/11

MARKQUIS

1100 BUCKINGHAM BOULEVARD
SUITE 1000
DALLAS, TX 75205



DATE: 05/21/07
 DRAWN BY: [Signature]

THIS DRAWING IS THE PROPERTY OF MARQUIS ARCHITECTONICA. IT IS TO BE USED ONLY FOR THE PROJECT AND SITE SPECIFICALLY IDENTIFIED HEREON. ANY REUSE OR MODIFICATION OF THIS DRAWING WITHOUT THE WRITTEN PERMISSION OF MARQUIS ARCHITECTONICA IS STRICTLY PROHIBITED.

A1.107

DATE: 05/21/07
 DRAWN BY: [Signature]

CONTRACT NAME

PROJECT: [Project Name]

OWNER: [Owner Name]

ARCHITECT: [Firm Name]

DATE: [Date]

SCALE: 1/8" = 1'-0"

ARCHITECTONICA

1100 SCOTLAND SQUARE
 SUITE 1100
 CHARLOTTE, NC 28203
 TEL: 704.375.1100
 FAX: 704.375.1101
 WWW.ARCHITECTONICA.COM

