

## **THE PINK HOUSE**

**Issue:** Vertical accessibility to second floor rooms and insufficient door width.

**Analysis:** The applicant is requesting a waiver from providing vertical accessibility to guest rooms on the second floor of a historic bed and breakfast. No construction work is being done, the applicant was referred to the Commission prior to receiving a new occupational license. The door widths do not comply and according to the local building official, they cannot be changed without major structural modifications. Note: No plans were submitted, nor is there documentation of the historic nature of the building.

### **Project Progress:**

The project is complete.

### **Items to be Waived:**

Vertical accessibility to the second floor, 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.

Door widths, as required by Section 11-4.13.5

11-4.13.5 Doorways shall have a minimum clear opening of 32 inches with the door open 90 degrees, measured between the face of the door and the opposite stop.

**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: The Pink House  
Address: 501 SW AKRON AVE  
STUART, FL 34994

**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: MICHAEL BRAID  
Applicant's Address: 45 SW SEMINOLE ST, STUART, FL 34994  
Applicant's Telephone: 772 485-6673 FAX 772-324-8902  
Applicant's E-mail Address: COCONUTPOINT@AOL.COM  
Relationship to Owner: SAME  
Owner's Name MICHAEL BRAID  
Owner's Address: 45 W SEMINOLE ST, STUART FL 34994  
Owner's Telephone: 772 485-6673 FAX 772-223-6657  
Owner's E-mail Address: COCONUTPOINT@AOL.COM  
Signature of Owner: Michael Braid  
Contact Person: SAME  
Contact Person's Telephone: 772 485-6673 E-mail Address: COCONUTPOINT@AOL.COM

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.)

PLAN TO RE-OPEN FORMER BED & BREAKFAST

---

---

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

OCCUPATION LICENSE FEES UNDER \$200.00

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.

STUART BUILDING DEPT NEEDS THIS TO  
ISSUE OCCUPATIONAL LICENSE

---

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: HDA ACCESSABILITY

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.

HISTORIC HOME BUILT IN 1913/INN ROOMS ON 2ND FLOOR NO ELEVATOR NO PROPER DOOR WIDTHS.

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

N/A

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.



**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 NINETEENTH day of OCTOBER, 20 09

Michael Braid  
Signature

MICHAEL BRAID  
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. \_\_\_\_\_
- 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 RECOMMENDS APPROVAL OF WAIVER DUE  
TO HISTORIC STRUCTURE AND INABILITY TO COMPLY WITHOUT STRUCTURE MODIFICATIONS

Jurisdiction CITY OF STUART

Building Official or Designee [Signature]

Signature

Joseph J. Hoffkins  
Printed Name

BU 1466  
Certification Number

772-288-5345  
Telephone/FAX

Address 121 SW FLAGLER AVE.  
STUART, FL. 34994

DOWNTOWN APARTMENT MANAGEMENT, LLC  
45 W SEMINOLE STREET  
STUART, FL 34994

772-485-6673 Fax 772-324-8902

October 20, 2009

Dept of Community Affairs  
Florida Building Commission  
2555 Shumard Oak Building  
Tallahassee, FL 32399-2100

RE: application attached

Hello,

Please let me know if I need to travel to you from Stuart for this exemption.

Information of the Historic significance of this home built in 1913 is available from the Stuart Heritage Museum at 772-220-4600. It is known as the Sam Mathews House and at one time was the Home Place Bed & Breakfast.

Thank you for your consideration.

Sincerely,



Michael Braid  
Cell- 772-485-6673  
coconutpoint@aol.com