

**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: Penguin Hotel

Address: 1418 Ocean Drive, Miami Beach, FL 33139

**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: Juan Alayo, RA

Applicant's Address: 2307 Douglas Road, Suite 204, Miami FL 33145

Applicant's Telephone: 917-208-1439 FAX: \_\_\_\_\_

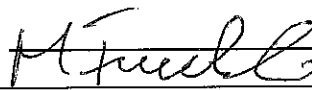
Applicant's E-mail Address: jalayo@alayo.com

Relationship to Owner: Architect/Design Professional

Owner's Name: Markus Friedli

Owner's Address: 1418 Ocean Drive, Miami Beach FL 33139

Owner's Telephone: 305-534-9334 FAX: 305-534-8096

Owner's E-mail Address: \_\_\_\_\_  
Signature of Owner: 

Contact Person: Guven Sen

Contact Person's Telephone: 305-904-3847 E-mail Address: gsen@penguinhotel.com

This application is available in alternate formats upon request.

Form No. 2001-01

**3. Please check one of the following:**

☐ New construction.