

**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:

- X 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.
- X 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.
- X 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.
- X 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: Please do not send CAD files, but rather scan the CAD files and save as a pdf. Must be in Microsoft Compatible 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:

1. 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
2. One set of reduced scale (11" x 17") versions of the drawings submitted in item one above.
3. One set of overhead transparencies (8 1/2" x 11") of the drawings submitted in item one above. When numerous features are shown on the drawings, please designate the location of the waiver items by highlighting or outlining in color the affected areas.
4. N/A When substantial financial cost of compliance is alleged, supporting cost estimates with quotes from at least two vendors or contractors and catalog information.
5. N/A 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. 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: Coca-Cola North America

Address: 705 Main Street, Auburndale, FL 33823

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: Tom Hellmann

Applicant's Address: 659 Van Meter Street, Cincinnati, OH 45202

Applicant's Telephone: 513.241.1230 FAX: 513.241.1287

Applicant's E-mail Address: thellmann@hixson-inc.com

Relationship to Owner: Design Architect

Owner's Name: Craig Ollinger

Owner's Address: 705 Main Street Auburndale FL 33823

Owner's Telephone: (863) 551-3704 FAX (863) 551-3701

Owner's E-mail Address: collinger@na.ko.com

Signature of Owner: 

Contact Person: Scott Hodel (Project Manager)

Contact Person's Telephone: (513) 969-0323 E-mail Address: shodel@hixson-inc.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.)

634,000 SF, Single story industrial beverage manufacturing facility

5. Project Construction Cost (Provide cost for new construction, the addition or the alteration): Approximately \$2,000,000

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 plans have been approved for construction subject to compliance with FBC

Accessibility.

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 11-4.1.3 (5) Elevator Access to Mezzanine.

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.

Construction of 11,000 SF mezzanine for product packaging equipment that requires two (2) operators to run (see attached letter to Mickey Matison and Operator Descriptions).

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. The Owner is not requesting this waiver based on construction cost of compliance but
impact to their daily operation and ability to produce product (i.e. reduced floor space,
blockage of maintenance access and ongoing maintenance costs.)

b. _____

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 project includes a large mezzanine (11,000 SF) for product packaging equipment.
This equipment requires a large area and is totally automated except for two (2) operators to supply unfolded cardboard boxes and product wrapping film. We seek a waiver for the passenger elevator requirement of 11-4.1.3(5).



Signature

Thomas J. Hellmann
Printed Name

Phone number 513.241.1230

(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 21 day of December, 2010



Signature

Thomas J. Hellmann

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. 11-4.1.3 Accessible buildings: new construction

b. _____

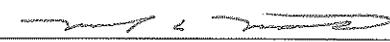
c. _____

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 \$ 11,363,000

Comments/Recommendation Based on the intended use of this mezzanine space
it seems reasonable not to require it to be accessible.

Jurisdiction City of Auburndale

Building Official or Designee 
Signature

Michael E. "Mickey" Matison
Printed Name

BU 1098, PX 1699, BN 3475
Certification Number

863-965-5530 Fax 863-965-5598
Telephone/FAX

Address: P.O. Box 186 Auburndale, Fl. 33823



Craig Ollinger

705 Main Street

Auburndale Fl. 33823

Phone: 863-551-3704

▶ Mr. Mickey Matison

Dear Mr. Matison

The Coca-Cola Main Street facility is constructing an elevated mezzanine (approximately 13,000 sq. ft.) for the purposed of installing product packaging equipment. This equipment will require 2 employees per shift to operate. Two new ADA compliant stairs will be provided for access to the mezzanine from the ground floor. Employee work duties to operate the equipment are as follows:

- Operator 1: (Packaging Operator Description).
- Operator 2: (Job Bid Maintenance Tech II).

The existing building in which the mezzanine is located is a one story industrial facility. Section 11-4.1.3 (Accessible buildings: new construction) of the Florida Building Code requires a passenger elevator to serve the mezzanine but does provide an exemption for occupiable rooms or spaces that are not open to the public with no more than 5 persons. We believe that this situation is compliant with the exception in Section 11-4.1.3 (5) of the Florida Building Code and are requesting an interpretation and exemption if necessary.

Sincerely,

Craig Ollinger

A handwritten signature in black ink, appearing to read "Craig Ollinger", is written over a horizontal line. The signature is stylized and cursive. Below the line, the name "Craig Ollinger" is printed in a simple, sans-serif font.

MAIN STREET PLANT JOB DESCRIPTION

Title: Packaging Operator
Area: Production
Reports to: Production Supervisor

Minimum Job Requirements: High school diploma or GED. Working knowledge of production environment and machinery. Ability to read, write, speak and comprehend English. Ability to troubleshoot production-related problems. Must be able to understand and follow directions. Must be able to demonstrate good attendance. Ability to read equipment operations manuals. Ability to recognize material and product defects. Ability to lift up to 50 pounds. Manual and finger dexterity. Ability to work on all shifts. Ability to work up to twelve (12) hour shifts to satisfy business needs. Ability to work extended hours and/or overtime as required. Ability to visually identify materials defects. Ability to hear machine operations sounds to detect jams, changes in speed and other routine running conditions. Must be able to rotate positions. Must be able to participate in job development training (i.e. troubleshooting, etc.). and must be able to cross-train on all equipment. Must be able to follow standard operating procedures required by TCCC Quality System. Must be able to work in a team environment. Must be certified on the training plan for this position within six months of start date.

Summary: Ensure compliance with TCCC Quality Systems standards. Perform all job tasks in a safe manner to ensure achieving Quality, Service and Cost objectives. Maintain packing of all downstream equipment. Comply with all standard operating procedures and requirements.

Essential Duties:

- Ensure efficient operation of chilled juice case forming, case packing and all downstream equipment
- Ensure case forming equipment is supplied with required materials, (e.g., adhesives).
- Maintain accurate records and logs as required.
- Perform operator-related preventative maintenance duties as required.
- Maintain equipment and area cleanliness to ensure compliance with all GMP standards.
- Work directly with maintenance personnel, other line personnel and management to problem-solve to ensure maximum production efficiencies.
- Comply with all standard safety practices, safety rules, and all Company rules and policies.
- Maintain proper safety conditions of equipment including immediately correcting or reporting safety issues to your supervisor.
- Perform package quality checks as required.
- Troubleshoot and correct machinery or quality problems during chilled juice case packer and case former operation.
- Read and understand standard operating procedures.
- Able to participate in team assignments.
- Able to identify deficiencies within area of responsibility and implement or recommend appropriate corrective actions.
- Able to set up and/or changeover chilled juice case packers and case former by yourself to different packages sizes in a timely manner.
- Able to set up and change settings on case coding equipment by yourself.
- Able to explain and demonstrate job tasks to all internal and external visitors.
- Ensure that all security procedures are allowed
- Read, understand and comply MSDS sheets.
- Properly label all containers used in your work area.

ESSENTIAL JOB FUNCTIONS *(continued)*:

- Ensure that all tasks are performed toward achieving the safety, quality, service, and cost objectives of TCCC.
- Comply with all standard safety practices, safety rules and all Company rules and policies.
- Perform all essential job skills (functions), procedures, work instructions and Company standards identified for this position in order to be certified for the position.
- Keep work area clean at all times.

Working Conditions: Work is performed in high-speed bottling and production environment. Work requires exposure to all temperature changes, high noise levels, working around moving equipment, tanks heights, wet conditions, fumes, vibrations, dust, etc. Working hours must be flexible with the ability to work all shifts and extended hours as required

Equipment Used: Personal protective equipment. MSDS sheets. Hoist, hand cart, hand tools, measuring instruments, equipment operations manuals. Safety glasses, hearing protection.

Non-essential Functions:

- Train new associates
- Travel to vendor and other TCCC locations
- Delivering presentations
- Operate FAX and copy machines
- Order supplies

Main Street Plant Job Description

JOB TITLE: Maintenance Technician II
POSITION #: 20037307
DEPARTMENT: Maintenance
SHIFT: Day Shift – 5-day flex PM Crew
HOURLY RATE: \$22.16
DATE BID OPENS: October 22, 2010
DATE BID CLOSES: November 2, 2010

Job Requirements:

Achieve a passing score on the Maintenance Technician test. High school diploma/GED equivalency required. Extensive maintenance background, which may include hydraulics, controls, welding, electrical, PLC's, machine tools and pneumatics. Able to lift up to 50 pounds. Must pass an annual physical and respiratory test. Ability to work on multiple levels, such as catwalks, ladders, etc. and ability to work in extreme temperatures. Manual and finger dexterity. Ability to read, write, speak and understand instructions given in English. Able to read diagrams, blueprints and schematics. Ability to see to identify defective parts and hear machine operations sounds to detect machine failures, changes in speed and other routine running conditions. Ability to work eight-hour shifts, 12 hour shifts or other work schedules as determined by business need, including overtime as required. Must supply own tools per the Maintenance required tool list. Must be certified on the training plan for this position within sixty working days of start date.

Summary:

Perform equipment preventive maintenance and equipment maintenance troubleshooting to meet or exceed plant and departmental goals. Comply with all standard operating procedures and requirements, and with all regulations (local to federal). Participate in project assignments as necessary. Direct and track contractor needs and activities as directed by management. Perform all tasks in a safe manner to ensure achievement of Quality, Service, and Cost objectives. Comply with all standard operating procedures and requirements under TCCC Quality System.

Essential Duties:

Properly install, repair or service machinery, equipment, and support systems as required.
Properly perform all necessary maintenance tasks to production lines (i.e. rebuilding of equipment, equipment upgrades, welding, fabricating and maintaining equipment to OEM standards, etc.)
Use computer and associated software on PLC's to troubleshoot and correct equipment issues.
Ability to size conduits, wiring, thermal overloads, and starters. Able to check voltage, amperage, and continuity with a multi-meter. Possess ability to troubleshoot electrical systems including PLC's and Servo Motors. Able to read electrical diagrams.
Ability to troubleshoot and rebuild mechanical components to a precision level. Have thorough working knowledge of pneumatic and hydraulic systems. Possess ability to troubleshoot pneumatic and hydraulic systems. Able to read and understand mechanical blueprints and diagrams.
Work directly with production associates and management to problem-solve and correct production issues that will ensure maximum production efficiencies.

Main Street Plant Job Description

Properly develop, implement and fully utilize CMMS system for all documentation requirements and production equipment. Actively assist with tracking parts use and inventory with CMMS.

Perform systematic preventative maintenance, including electrical or mechanical adjustments, inspections and minor repairs. Provide input to improve PM process.

Properly complete shift/departmental maintenance records including Work Order generation for shift tasks completed.

Understand all plant and department safety and operational rules.

Perform all essential job skills (functions) affecting TCCC Quality System. Perform according to procedures, work instructions, and Company standards identified for this position.

Keep all work areas clean and maintain Good Manufacturing Practices.

Working Conditions:

Work is performed in a manufacturing plant. Work involves exposure to temperature extremes, high noise levels, wetness, heights, dust, moving equipment, vibrations and vapors. Work is performed around moving equipment and in confined spaces.

Equipment Used:

Must be able to wear and properly use all necessary Personal Protective Equipment (PPE) required by the position including, but not limited to respirator, safety glasses, steel-toed shoes and hearing protection. Personal protective equipment including, but not limited to safety glasses, steel-toed shoes and hearing protection. Able to properly use a Supplied Air Respirator (Airline with helmet/hood and continuous flow) and Class B or C Haz-mat suit as required by OSHA and NIOSH. MSDS sheets, computer and associated software, hand tools, measuring instruments, power tools, hard hat/bump cap, fire extinguisher and lockout devices. Confined space equipment. Company truck and forklift.

Non-essential Functions:

Travel to other locations. Perform other duties as assigned. Explain and demonstrate job tasks to visitors. Operate a forklift.

transmittal

HIXSON
659 Van Meter Street
Cincinnati, Ohio
45202-1568
513 241 1230
FAX 513 241 1287

TO: Department of Community Affairs
Codes & Standards Section
2555 Shumard Oak Blvd.
Tallahassee, FL 32399-2100

JOB NO. 7754.20

DATE: 12/29/10

SUBJECT: Capacity Enhancements
Elevator Waiver

ENCLOSED

UNDER SEPARATE COVER

ATTENTION: Mary-Kathryn Smith

DELIVERED BY:
UPS Next Day Air

COPIES	DESCRIPTION
	Please see the enclosed.
1	Set of full size documents bound (as reviewed and approved by the City of Auburndale) of Index, LS1.1, A00.2, A1.1.bf and A1.2bf
1	Set of 11 x 17 documents unbound of Index, LS1.1, A00.2, A1.1.bf and A1.2bf
1	Set of 8 ½ x 11 transparencies of Index, LS1.1, A00.2, A1.1.bf and A1.2bf
1	Notice to Waiver Applicants
1	Letter to Mickey Matison
1	Compact Disc with electronic copies of the above

HIXSON



Scott R. Hodel
Project Manager

SRH/mam

cc: Jonathan Cohen w/ trans only
Dack Vaught w/ trans only
Tom O'Keefe w/ trans only

CAPACITY IMPROVEMENTS AUBURNDALE, FLORIDA



BULLETIN NO. 3		BULLETIN NO. 2		BULLETIN NO. 1		ORIGINAL ISSUE	
INDEX OF DRAWINGS							
DWG NO DESCRIPTION							
ARCHITECTURAL							
0	0	0	0	0	0	0	0
LS1.1	PARTIAL FIRE & LIFE SAFETY PLANS						
A00.2	OVERALL FLOOR PLAN						
A1.1bf	PARTIAL FIRST FLOOR PLAN						
A1.2bf	MEZZANINE PLAN						
A3.1	WALL SECTION AND DETAILS						
AS.1	ENLARGED STAIR PLANS, SECTIONS AND DETAILS						
AS.2	MISCELLANEOUS ELEVATIONS, SECTIONS AND DETAILS						
A8.1	PARTIAL ROOF PLAN						
STRUCTURAL							
2	1	0	0	0	0	0	0
S1.1	PARTIAL FOUNDATION PLAN, SECTIONS AND DETAILS						
1	0	0	0	0	0	0	0
S2.1bf	MEZZANINE FRAMING PLAN						
S2.2bf	PARTIAL ROOF FRAMING PLANS						
1	0	0	0	0	0	0	0
S3.1	STEEL SECTIONS AND DETAILS						
FIRE PROTECTION							
0	0	0	0	0	0	0	0
FP00.1	FIRE PROTECTION GENERAL INFORMATION						
MECHANICAL							
0	0	0	0	0	0	0	0
M00.1	MECHANICAL GENERAL INFORMATION						
M00.2	MECHANICAL SCHEDULES						
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M1.1bf	PARTIAL FIRST FLOOR MECHANICAL PLAN						
0	0	0	0	0	0	0	0
M1.2	PARTIAL MECHANICAL PLANS						
M1.2bf	MEZZANINE MECHANICAL PLAN						
0	0	0	0	0	0	0	0
M2.1	MECHANICAL DETAILS						
0	0	0	0	0	0	0	0
M5.1	HVAC CONTROLS						

BUILDING CODE INFORMATION

GENERAL CODE INFORMATION	
APPLICABLE CODES:	2007 FLORIDA BUILDING CODE W/2008 AND 2009 AMENDMENTS.
BUILDING	2007 NATIONAL ELECTRICAL CODE
ELECTRICAL	2007 FLORIDA MECHANICAL CODE
HVAC	2007 FLORIDA PLUMBING CODE
PLUMBING	2007 FLORIDA BUILDING CODE (CHAPTER 13)
ENERGY	2007 FLORIDA FIRE CODE
FIRE PROTECTION	2007 FLORIDA BUILDING CODE (CHAPTER 11)
ACCESSIBILITY	2007 FLORIDA BUILDING CODE (CHAPTER 11)

PROJECT TYPE: RENOVATION (ADDITION TO EXISTING LINES)

PROJECT SUMMARY: CONSTRUCT APPROX 13,000 SF OF MEZZANINE FOR NEW PACKAGING EQUIPMENT TO SUPPORT LINES 3 AND 7

FIRE PROTECTION: EXISTING APPROVED AUTOMATIC FIRE SUPPRESSION SYSTEM

USE AND OCCUPANCY CLASSIFICATION

USE GROUP(S): A-2, B, F, S-2 (NO CHANGE)

CONSTRUCTION TYPE: IIB (UNPROTECTED)

BUILDING LIMITATIONS

EXISTING BUILDING: 834,213 SF

ALLOWABLE AREA: UNLIMITED (PER 507.3)

ALLOWABLE HEIGHT: 55'

ACTUAL HEIGHT: 42'

EGRESS

TRAVEL DISTANCE: 400' (PER TABLE 1016.1)

LOAD: 1091

CITY OF AUBURNDALE

OFFICE COPY
 JOB COPY

REVIEWED FOR COMPLIANCE
2007 FLORIDA BUILDING CODE
AND APPLICABLE REVISIONS

Reviewed by:

THIS PLAN MUST BE ON-SITE
FOR INSPECTIONS

705 MAIN ST
ADDRESS

DATE 12/8/10

PLAN REVISION
Permit 100810
Date 12/8/10 By

FIRE DEPARTMENT REVIEW BY

APPROVED SUBJECT TO
COMPLIANCE WITH FBC-ACCESSIBILITY



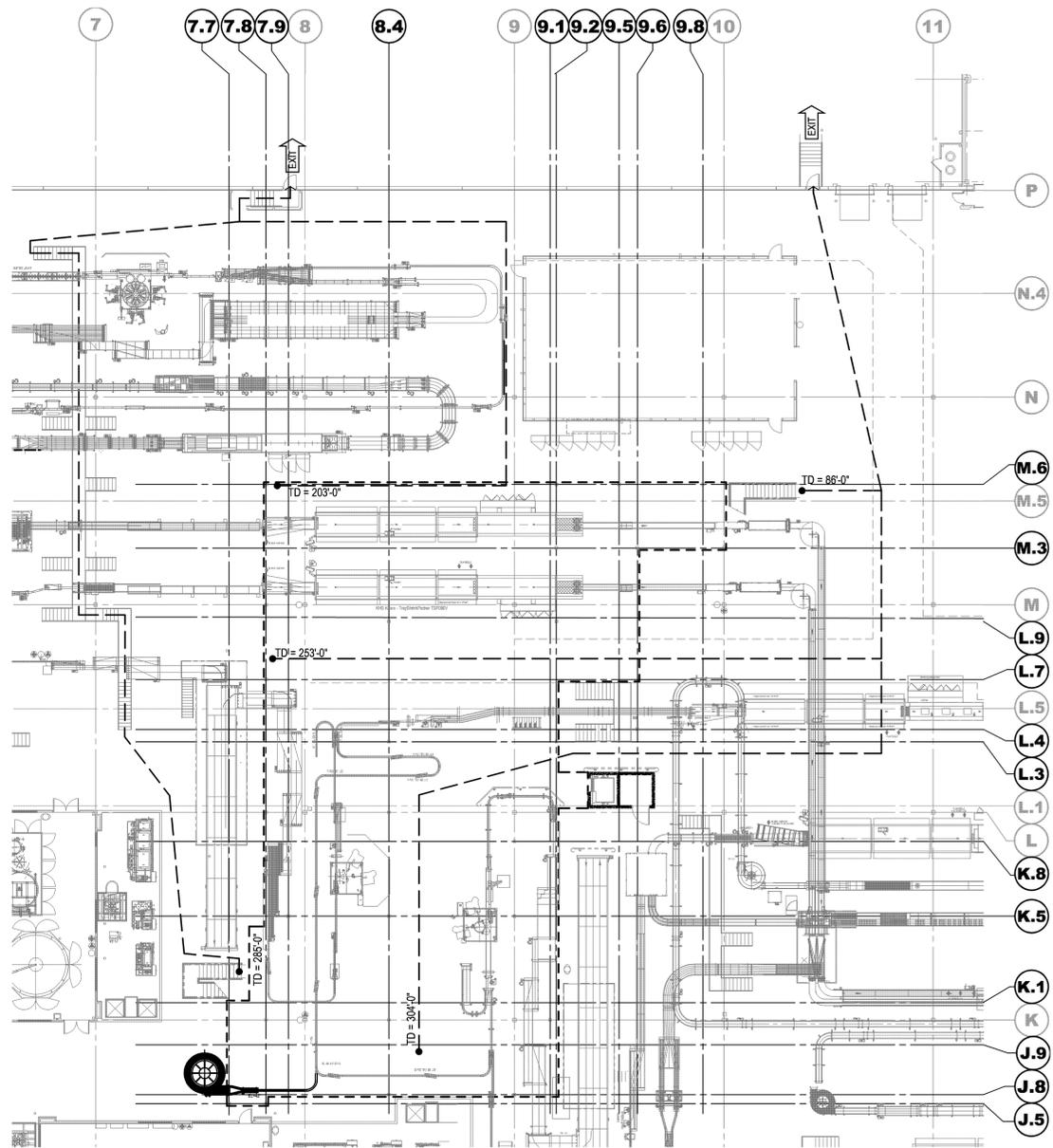
Donald E. Ginner
11.24.10



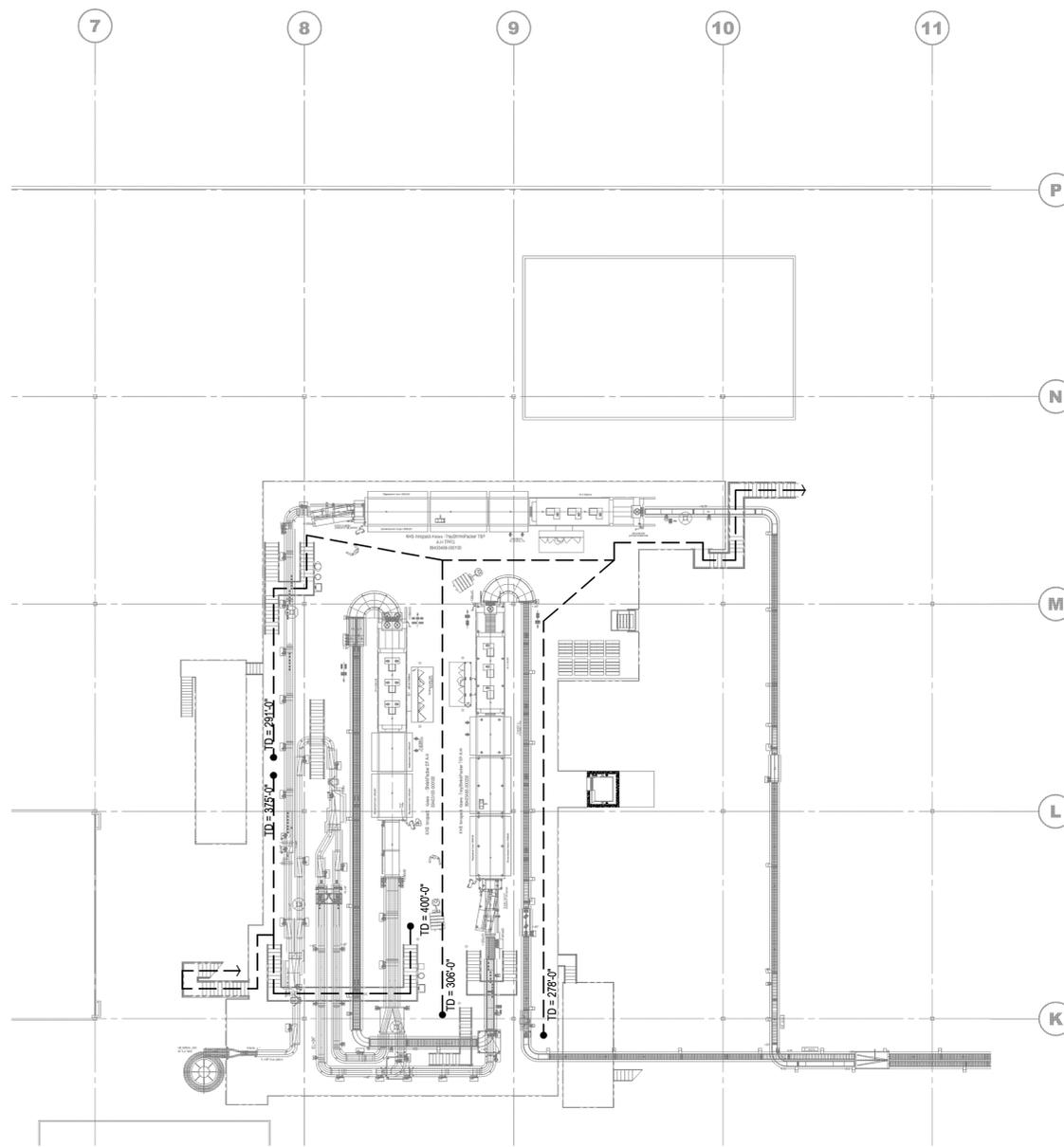
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f 513 241 1287
www.hixson-inc.com

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other projects or for additions or changes to this
project without prior and specific written approval
of Hixson.

LATEST REV:	3
REV DATE:	11/19/10
DRAWING DATE:	100810
JOB NUMBER:	7754.20
PRINT DATE:	11/22/10 08:30



PARTIAL FIRE & LIFE SAFETY FIRST FLOOR
1/16" = 1'-0"

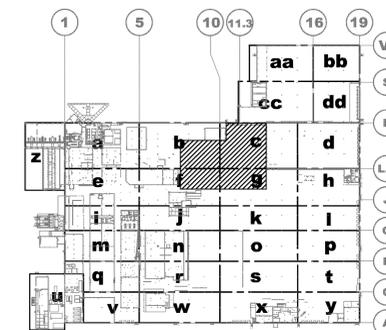


PARTIAL FIRE & LIFE SAFETY MEZZANINE LEVEL
1/16" = 1'-0"



LEGEND

- TD = TRAVEL DISTANCE OF EGRESS PATH
- = 1 HR FIRE RATED WALL UL 90S
- EXIT = NEW OR EXIST EXIT



KEY PLAN
NTS



	DATE: _____ PERSON: _____ DATE: _____ REVISION: _____ DATE: _____ REVISION: _____ DATE: _____ REVISION: _____
<p style="font-size: small;">For use only by authorized parties, including HIXSON INC. No part of these documents may be reproduced or used in any other form or by any means without the prior written approval of HIXSON.</p> <p style="font-size: x-small;">GRAPHIC SCALE 1" = 10' 1/4" = 2 1/2' 1/8" = 1 1/4'</p>	
<p style="font-size: x-small; margin: 0 auto;">659 Van Meter Street Channahon, IL 61515 Tel: 815.241.1230 www.hixson-inc.com</p>	
<p>PARTIAL FIRE & LIFE SAFETY PLANS</p> <p>CAPACITY IMPROVEMENTS</p> <p>COCA - COLA</p> <p>NORTH AMERICA</p> <p>AUBURNDALE, FL</p>	
DWG FILE: 775420_1611.dwg DRAWN: TSL CHECKED: SRK Q.C. REVIEW: SRK DRAWING DATE: 111910 JOB NUMBER: 7754.20 PRINT DATE: 111910 14:31	
LS1.1	

