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: 1676 James Ave - Hostel
Address: 1676 James Avenue, 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: Elsa Urquiza
Applicant's Address: 227 E Alto Rivo Drive, Miami Beach, FL 33139
Applicant's Telephone: (305) 494-9060  FAX: ____________________________
Applicant's E-mail Address: elsa.urquiza@att.net
Relationship to Owner: Self
Owner's Name: Elsa Urquiza
Owner's Address: 227 E Alto Rivo Drive, Miami Beach, FL 33139
Owner's Telephone: (305) 494-9060  FAX: ____________________________
Owner’s E-mail Address: elsa.urquiza@att.net
Signature of Owner: ______________________________
Contact Person: Juan R. Alvarenga, Shulman + Associates
Contact Person’s Telephone: (305) 438-0609  E-mail Address: juan@shulman-design.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).

[X] 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.)

Change of use of an existing 2 story apartment building (built in 1941) to a high end Hostel. Mix of private and group rooms, 14,908 square feet total for building. No additional square footage is being added. Renovation of historic front façade and some reconfiguration of interior partitions. Existing apartment rooms are converted to hostel rooms by removing bathroom, kitchen and repurposing space to separate water closet and shower.

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

As of this time, that total estimated cost of the renovation being performed is $777,261

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*

[X] In Plan Review [ ] Completed*

* Briefly explain why the request has now been referred to the Commission.

Due to the change of use of the building, the local building department is requiring an elevator for the second floor. Providing access to the second floor will present a very high renovation cost to the existing project. This is an extreme hardship for a project of this scale. Therefore, the request is to waive Florida Statute Section 553.509 down to meet the Federal ADA requirements which do not require vertical accessibility in 2 story buildings. Also the access to the existing courtyard will be from the outside new ADA ramp (see plans).
7. **Requirements requested to be waived.** Please reference the applicable section of Florida law. Only Florida-specific accessibility requirements may be waived.

**Issue**

1: Florida Statutes 553.509 Vertical Accessibility to all levels requirement. / 2010 FBC, Accessibility Code, 206.2.3 Multi-Story Buildings and Facilities

**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 renovation to the building will not increase the size of the current apartment building structure. Due to change of use, the building department is requiring vertical ADA accessibility to the 2nd floor.

All amenities on second floor will be provided at ground floor. Accessibility to the ground floor has been ensured throughout with: (see attached plans)

- New ramps from the street and courtyard
- Hydraulic chair lift at lobby level to upper ground level
- 2 accessible rooms with hearing impaired + 2 hearing impaired rooms
- One accessible restroom for each sex
- Accessible routes

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

The cost to comply if waiver is denied will represent over 12% of the costs of the renovation to date. Cost of elevator $96,520. Cost of renovation $777,261 (without an elevator)
[X] 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.

Renovation budget is $777,261. Cost to add an elevator is $96,520. See attached budget 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. Otis Elevator Company – $49,720 (not including additional structure, electric work, etc.)

   b. Schindler Elevator Corp – $43,100 (not including additional structure, electric work, etc.)

   c. See attached Cuesta Construction for budget to install full elevator - $96,520

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 cost to install and elevator and related infrastructure would be a substantial increase to the overall budget of this renovation project. Per the attached plans the building will have the required accessible rooms on the ground floor. Also all amenities on the second floor will be provided on the ground accessible floor.

Allan T. Shulman, FAIA, LEED AP

Phone number (305) 438-0609

(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 20th day of August, 2018

[Signature]

Elsa M. Urbizta

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 ____________________________________________

Jurisdiction ____________________________________________

Building Official or Designee ____________________________________________

Signature ____________________________________________

Printed Name ____________________________________________

Certification Number ____________________________________________

Telephone/FAX ____________________________________________

Address: ____________________________________________
# Preliminary Construction Cost Budget

**Chatham Apartments Hostel**  
*July 27, 2012*

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<td><strong>TOTAL CONSTRUCTION BUDGET</strong></td>
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August 17, 2012

Juan R. Alvarenga, Assoc. AIA
Associate
Shulman + Associates
100 NE 38 Street, Space 2
Miami, FL 33137

RE: 1676 James Avenue Hostel

Mr. Alvarenga:

Please accept this correspondence as a budget to install a new 2,100 lbs. capacity passenger elevator, elevator shaft and electrical gear for the above referenced project:

- Concrete Masonry Shaft $30,000
- 2,100 lbs. Elevator $49,720
- Roof Patch $2,000
- Electrical Switch Gear $6,000
- Contractor Management Fee $8,800

Total $96,520

Please note that this does not include design and permit fees.

Regards,

George L. Cuesta
January 1, 2010

Cuesta Construction
1414 NW 107th Avenue
Suite 401
Miami, FL 33172

Re: Italian Studios Building
Miami Beach, FL

We are pleased to provide you with our proposal to furnish and install within the mentioned facility: **One (1) Otis LVMT Telescopic Hole-less Hydraulic elevator** for the sum of:

Forty Nine Thousand Seven Hundred Twenty Dollars and 00/100 ($49,720.00)

Please take note of the following Attachments, which are a part of this proposal:

- Attachment “A”: Scope of Work
- Attachment “B”: General Clarifications/ Terms & Conditions
- Attachment “C”: Alternates
- Attachment “D”: Preparatory Work by Others-typical where required

We appreciate this opportunity to provide you with our proposal on this project and look forward to working with you and your project team. Upon your review / evaluation of the foregoing, please give me a call to discuss in detail / value engineering options. My direct phone line is (305) 816-5779.

Sincerely,

[Signature]

Frank Smith
Otis Elevator Company

Enclosures
January 19, 2010

Mr. Michael Cuesta
Cuesta Construction
1414 NW 107th Ave
Suite 401
Miami, FL 33172

Project: Italian Studios Building
Location: Miami Beach, FL 33139

Dear Mr. Cuesta:

Schindler Elevator Corporation is pleased to submit our proposal to furnish and install in the above building Units: 01, Hydraulic Elevator for the sum of Forty Three Thousand One Hundred Dollars and 00/100, ($43,100.00) if applicable including tax.

The above proposal is based on furnishing our standard equipment as defined by the attached specifications summary, in accordance with our attached standard terms and conditions. This proposal will become part of our agreement with you for this work.

We offer our proposal with the following clarifications:

1. Please note elevator dimensions shown in building plans do not meet FBC code, clear hoistway will need to be 8’-4” X 6’-0”
2. We will provide standard Schindler jamb mounted fixtures.
3. We have quoted standard baked enamel entrance frames and doors.
4. Quote based on standard cab finishes.
5. Please insure that elevator machine room locations on building plans meets code.
6. Please read specification summary for equipment Schindler will be supplying.

Schindler’s installation schedule is based on the proper job ready conditions being available (including but not limited to dry/complete hoistway, 3-phase power to control room, etc…). Schindler will begin manufacture of elevator components in the soonest available factory timeslot after confirmation that all preparatory work by others has been completed (see Schindler’s Job Readiness Checklist). If all installation ready conditions are not available at least one (1) week prior to the projected delivery date, Schindler may elect to store the equipment off-site until installation ready conditions are confirmed by a Schindler representative (Storage fee of $500.00/unit & $150.00/week (no prorate) shall be the responsibility of the Contractor). At time of installation readiness confirmation, the soonest available installation team shall be assigned to the Project.

For your convenience, we will provide you with an invoice equal to 35% of the above price upon acceptance of our proposal. Payment of the initial invoice is a condition precedent to production of materials.

We will also submit to you, upon acceptance of this proposal, our detailed specifications and our standard form of contract for execution.

Please note our proposal is valid for 45 days.

You may indicate your acceptance of our proposal by signing and returning this document to me.

Respectfully submitted,

Christopher Ducaho
New Equipment Sales
Schindler Elevator Corp
PROJECT ZONING DATA

GENERAL

ZONE X-DISTRICT: 0-3 MUSEUM HISTORIC DISTRICT
LOT AREA: 7,000 SF
FLOOR AREA RATIO: 1.2
ALLOWED: REQUIRED
PROPOSED: 1,732 X 1,000 SF + 725 SF
GROSS LIVING AREA: 1,732 X 1,000 SF + 725 SF
GROSS LIVING AREA: 1,400 SF
EXISTING: 2 STORIES EXISTING
STOREY: 2 STORIES
HEIGHT: 27'-0" EXISTING

EXISTING/PROPOSED FLOOR AREA

EXISTING FLOOR AREA
GROUND FLOOR: 745 SF
BASEMENT: 745 SF
TOTAL: 745 SF

PROPOSED UNIT SUMMARY

TOTAL, HOTEL UNITS: ALLOWED: 20
PROVIDED: 20
HOTEL UNITS 300-399 SF: 10
HOTEL UNITS 400-499 SF: 10
HOTEL UNITS 500+ SF: 8

SETBACK REQUIREMENTS AS PER SECTION 142-247

1. ALL EXISTING TO REMAIN

NOTE: ALL DIMENSIONS TO BE VERIFIED IN FIELD (V.I.F.)
ALL EXTERIOR DIMENSIONS ARE EXISTING TO REMAIN U.N.O.
NEW WALLS AND PARTITIONS

EXISTING WALLS AND PARTITIONS

WALL AND PARTITION KEY

A-5

1

A-4

A-6

1

2

3

V.I.F.

5' - 0"

124' - 8"

20' - 4"

PER SURVEY MAP

150' - 0"

80' - 0"

6' - 0"

70' - 0"

4' - 0"

43' - 1"

33' - 7"

48' - 0"

20' - 4"

6' - 0"

40' - 10"

33' - 2"

6' - 0"

68' - 0"

RESTORE HISTORIC SIGN MARQUEE

EXISTING CONCRETE EYEBROW; PATCH & REPAIR AS REQUIRED; TYP.

EXISTING HISTORIC PARAPET

EXISTING ROOF TO REMAIN

SEE ROOFING DETAILS FOR TYPICAL PENETRATION DETAILS

EXISTING DOWNSPOUTS AND OVERFLOW SCUPPERS TO REMAIN

NEW MECHANICAL UNITS, TYP.; SEE MEP

ROOF PLAN

12018

08.20.12

1676 JAMES AVE - HOSTEL

ELEVATOR WAVER

SHULMAN + ASSOCIATES

100 NE 38th Street, Space 2
Miami, FL 33137
T 305 438 0609 F 305 438 0170
www.shulman-design.com

AA 26001090

1676 JAMES AVENUE
MIAMI BEACH, FL 33139

ELEVATOR WAVER

1676 JAMES AVE - HOSTEL
RECESSED STUCCO PANELS @ PREVIOUS DOOR LOCATIONS; REFER TO STRUC. DWGS; TYP. NEW FIXED GLASS/ALUM. IMPACT WINDOWS; REFER TO SCHEDULE FOR SPECS.

EXISTING ROOF/ATTIC VENTS TO REMAIN; TYP.

RESTORE EXISTING HISTORIC NEON MARQUEE SIGN

EXISTING WINDOWS TO REMAIN

RESTORE EXISTING CONCRETE GUARDRAILS @ ENTRY PATIO AS REQUIRED; TYP.

NEW THRU-WALL HVAC EQUIPMENT; REFER TO MECHANICAL DWGS; TYP.

EXISTING CRAWL SPACE/FLOOD VENTS TO REMAIN; TYP.

NEW ADA ACCESSIBLE RAMP

NEW SIGNAGE

EXTERIOR WALL MOUNTED LIGHTING FIXTURE; REFER TO ELEC. DWGS
NEW FIXED GLASS/ALUM. IMPACT WINDOWS; REFER TO SCHEDULE FOR SPECS.

EXISTING ROOF/ATTIC VENTS TO REMAIN; TYP.

RESTORE EXISTING HISTORIC SIGN MARQUEE

EXISTING WINDOWS TO REMAIN

RESTORE EXISTING CONCRETE GUARDRAILS @ ENTRY PATIO AS REQUIRED; TYP.

EXISTING CRAWL SPACE/FLOOD VENTS TO REMAIN; TYP.

NEW STOREFRONT SYSTEM AT LOBBY ENTRANCE; REFER TO SCHEDULE FOR SPECS.

NEW ALUM. CHANNEL LETTERING SIGNAGE TO MATCH EXISTING BY SEPERATE PERMIT.

G.C. TO SUBMIT SHOP DWG'S

NEW THRU-WALL HVAC EQUIPMENT; REFER TO MECHANICAL DWGS; TYP.

RECESSED STUCCO PANELS @ PREVIOUS DOOR LOCATIONS; REFER TO STRUC. DWGS

EXISTING WINDOW TO REMAIN; TYP.

EXISTING ROOF/ATTIC VENTS TO REMAIN; TYP.

GENERAL NOTE:
THIS NOTE ONLY PERTAINS TO FACADE OF EXISTING BUILDING:
STUCCO TO BE PATCHED AND REPAIRED PER ASTM C1063 STANDARDS.
PROVIDE TWO-COAT STUCCO APPLICATION OF SCRATCH AND FINISH COAT.
IF CRACKS ARE VISIBLE FROM 10 FT. AWAY OR ARE A SOURCE OF LEAKING IT SHOULD BE PATCHED.
APPLY ACRYLBOND BONDING AGENT OVER EXISTING WALLS TO BE PATCHED BEFORE STUCCO IS APPLIED.
EXISTING CRAWL SPACE & VENTS TO REMAIN.
NEW FIRE SUPPRESSION SYSTEM TO BE INSTALLED, REFER TO FIRE PROTECTION DWG'S.
EXISTING TERRAZZO PATCH & REPAIR AS REQUIRED. COORDINATE W/ ARCHITECT FOR COLOR & AREAS OF REPAIR; TYP.
RESTORE EXISTING HISTORIC MARQUEE SIGN
EXISTING ROOF TO REMAIN
EXISTING VENTED ATTIC W/ NEW FIRE SUPPRESSION SYSTEM TO BE INSTALLED, REFER TO FIRE PROTECTION DWG'S.

NEW FIXED GLASS/ALUM. IMPACT WINDOWS; REFER TO SCHEDULE FOR SPECS.
SEE INTERIOR ELEVATIONS
NEW ALUM. CHANNEL LETTERING SIGNAGE TO MATCH EXISTING BY SEPERATE PERMIT.

G.C. TO SUBMIT SHOP DWG'S
SEE FINISH PLAN FOR FLOOR FINISH
EXISTING ROOF ACCESS STAIR
ROOF MANIFOLD, SEE FIRE PROTECTION DWG'S

NEW MECH. DUCTS, SEE MECH.
NEW FIRE SUPPRESSION SYSTEM, REFER TO FIRE PROT. DWG'S. & STRUCT. FOR PENETRATION DTLS

EXISTING 2"x10" WOOD JOIST TO REMAIN
Date:      October 23, 2012

Project:   1676 JAMES AVENUE HOSTEL - Budget for ADA Costs
           MIAMI BEACH, FL  33139

Architect: SHULMAN + ASSOCIATES

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Date: October 23, 2012

Project: 1676 JAMES AVENUE HOSTEL - Budget for ADA Costs
MIAMI BEACH, FL 33139

Architect: SHULMAN + ASSOCIATES

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