Department of Business and Professional Regulation FLORIDA BUILDING COMMISSION

1940 North Monroe Street Tallahassee, Florida 32399-0772 Form FBC 2012-01 Request for Waiver

NOTICE TO WAIVER APPLICANTS

Please make certain you comply with the following:

- 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.
- 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.
- 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. Two estimates substantiating a claim for disproportionate cost must be included.
- Petitioners are strongly advised to participate in the Council's conference call, webinar or onsite meeting for application review. Sometimes pertinent facts are inadvertently omitted, or information provided/presented in the Request for Waiver application is not clear. Your participation in 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 Business and Professional Regulation at the address above. Include a copy of the application, photos where appropriate and drawings or plans on a CD in PDF format. NOTE: Please do not send files in CAD format but rather provide the files in pdf format.

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 if pertinent to the application

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. _____ When substantial financial cost of compliance is alleged, supporting cost estimates

2. _____ When substantial financial cost of compliance is alleged, supporting cost estimates with quotes from at least two vendors or contractors and catalog information.

3. _____ If you feel photographs and/or renderings are necessary for your presentation, provide legible color copies of the photographs and/or renderings on the CD with the application and plans in jpeg, tif or pdf format.

4. _____ Please submit one hard copy of this application and attachments to the Florida Building Commission, Department of Business and Professional Regulation.

General Information:

a. 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- where 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 II, 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: <u>N/A</u>
Address: 107 SW 7 th Street Gainesville, FL 32601
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:Delta Investment Group
Applicant's Address: 321 SW 13 th Street Gainesville, FL 32601
Applicant's Telephone: (352) 376-6223 FAX: (352) 376-6269
Applicant's E-mail Address: jfleming@trimarkproperties.com
Relationship to Owner: Self
Owner's/Tenant's Name:Delta Investment Group
Owner's Address: 321 SW 13 th Street Gainesville, FL 32601
Owner's Telephone: (352) 376-6223 FAX (352) 376-6269
Owner's E-mail Address:jfleming@trimarkproperties.com_
Signature of Owner:
3. Please check one of the following:
[] New construction.
[] Addition to a building or facility.
FBC 2012-01 Request for Waiver Rule 61G20-4.001 effective 4/25/2013

[X] 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.)
An existing 1,646 square foot, 2-story business occupancy building. Following renovations, the
proposed use will continue to be office/business
5. Project Construction Cost (Provide cost for new construction, the addition, or the alteration):\$264,000.00 (\$216,000 base bid + \$48,000.00 for vertical accessibility)
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.
<u>N/A</u>
7. Requirements requested to be waived. Please reference the applicable section of Florida law. Only Florida-specific accessibility requirements may be waived.
Issue 1:
The 2010 Florida Building Code (FBC), Existing Building Section 806 references the 2010
FBC, Accessibility. The requirement requested to be waived is 201.1.1, Vertical accessibility
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.

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

The cost of the alterations necessary to provide vertical accessibility to the altered area would be

disproportionate to the cost of the overall alteration to the primary function area. In this case, the

primary function area is the second floor tenant space, which is 747.s.f. Given an overall project

cost of \$216,000, alteration costs for this area were quoted at \$48,000. This estimated cost to

provide vertical accessibility exceeds 20% of the total project cost and far surpasses the cost of

the primary function area itself, which would only be 747 s.f. of office space.

It is our belief the costs the Owner would incur for the structural, architectural and electrical

design fees, in addition to the actual construction costs for the equipment and building

modifications required to create an accessible lobby and hoistway enclosure for an elevator, a

platform lift or even a stair lift would far exceed this amount. As shown on the attached bids, the

proposed lift is expected to be an additional \$48,000 to \$48,700. This does not include the

architectural structural, civil, soils and electrical design fees that are estimated to total at least an

additional \$2,500.

[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.

Multiple methods of vertical accessibility were explored, such as an elevator, platform lift, and

stair lift, but we believe that costs for all of these options exceed 20% of the overall project cost.

Please see attached quotes for the interior and exterior renovation of the building. Alternate #1

breaks out the additional cost to provide the lift shown on sheet A11.0 of the attached plans. Two

quotes are provided in order to show multiple costs that would be considered disproportionate

based on the terms for waiver to the Florida building code.

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.

See attached contractor bids for the construction cost. Please note that the bids include a price for

the interior and exterior renovation of the building. Additionally the contractors were required to

provide an alternate with a lift for vertical accessibility. This was done in order to break out the

specific cost of the accommodation.

10. Licensed Design Professional: Where a licensed design 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 waiver is necessary since the cost of the alterations necessary to provide vertical accessibility

to the altered area would be disproportionate to the cost of the overall alteration to the primary

function area. It is understood that if this waiver is granted, someone with limited mobility may

not be able to access the second floor space. However, improvements are proposed to increase

the number of accessible features as described in 202.4.2 to the second floor by adding lever

action door hardware, signage, grab bars and accessible drinking fountains. In addition, the first

floor will be fully accessible upon completion of the proposed renovations. Because of these

specific conditions, and the cost factors noted above we respectfully request granting our request

to waive the requirement for vertical accessibility.

Signature

LOWERD MCLEAN, JR.

Phone number 352, 378, 4:400 x14

(SEAL)

CERTIFICATION OF APPLICANT:

I hereby declare 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 _	23 rd day of _	becember	, 2013
Il.	50		
Signature			
John Flei	ning		

Printed Name

I understand that if I falsify, misrepresent, or omit any material information on this document, the Commission may revoke any order and will notify the building official of the permitting jurisdiction.

KNOWINGLY MAKING A FALSE STATEMENT IN WRITING WITH THE INTENT TO MISLEAD A PUBLIC SERVANT IN THE PERFORMANCE OF HIS OFFICIAL DUTY IS A MISDEAMEANOR OF THE SECOND DEGREE PURSUANT TO SECTION 837.06 F.S. AND SECTION 775.083, F.S.

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. FLORIDA BUILDING CODE (ACCESIBILITY) ZOI. 1.1 VERTICAL
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 REFER TO FBC FOR WAIVER HEARING
Jurisdiction CITY OF GAINESVILLE FLORIDA
Building Official or Designee Signature
Printed Name
BU 1391 Certification Number
(352) 334-5050 Telephone/FAX
Freelandjc OCITY OF GAINESVILLE. ORG Email Address Address: 306 NE GAINESVILLE, FL 32627
Address: 306 NE GXL AVE GAINESVILLE, \$1 32627



SECTION B - PROPOSAL FORM

PROJECT:	Building Renovation	is to 107 SW 7"	Street in Gainesville, FL 32601				
DATE:	December 20, 2013						
BIDDER:	Parrish-McCall Constructors, Inc.						
perform all la	nereby proposes to	furnish all mate I to the entire wo	d subject to all conditions thereof, the rial and equipment and storage and to rk for the project in accordance with the for the sum of:				
Two Hund (\$216	red Sixteen Thousan						
(φ2 10	,000) dollars	5.				
The undersi	gned further propos r the stated additions	ses to perform to or deductions	the work called for in the following s from the above amount				
ALTERNATE	AD	D	DEDUCT				
#1: Elevato	\$48,000 r and Associated Sha	aft					
#2; ¾" Plyw	\$2,140 rood Sheathing at 2 nd	Floor					
#3: New H\	\$7,747 AC Split Systems						
#4:							
In addition to the Bid Propo	the above costs, the osal for the following	undersigned shitems:	nall include the following allowances in				
N/A							
The undersig Proceed has	ned agrees to compl been issued.	lete all work with	in 60 days after the Notice to				
The undersig	ned acknowledges r	eceiving Addend	dum Numbers <u>1, 2, 3, 4</u>				
	SECTION-B	PAGE-1	08-14-13				



REFERENCES

List at least three (3) references of similar projects. so, notify by initialing here:)	(A separate document may be included. If
REFERENCE #1: Client Contact Name: Pam Purvis Location: Alachua, Florida Construction Cost (optional): Project: Interior Renovation Brief Description: Interior renovation of administration	tion area of Sandvik Mining Company in
Alachua. New flooring, wall covering, ceiling, lights,	and air devices.
REFERENCE #2: Client Contact Name: Lynn Hammond Location: Gainesville, Florida Construction Cost (optional): Project: Interior Renovation Brief Description: Interior renovation (tenant improve office building. New partitions, interior finishes, and	 ment) of 3 rd floor of the Navlor Publications
office building. New partitions, interior finishes, and	new entry feature at exterior.
REFERENCE #3: Client Contact Name: Hill Bentley	Phone: (352) 331-1540
Location: Gainesville, Florida Construction Cost (optional): Project: Interior Renovation	
Brief Description: Interior renovation and build-out of	warehouse space for Tower Hill Insurance.
Conversion of 6,000 SF of warehouse to conditioned	offices, plus renovations to other areas.

***Qualifications

1. Base bid includes using existing HVAC equipment with exception of new AHU shown.

SECTION-B PAGE-2

08-14-13



PROPOSED SUBCONTRACTORS
Demolition: Ace Contracting
Concrete: Parrish-McCall Constructors
Masonry: Parrish-McCall Constructors
Railings: N/A
Roofing: Big D Dunnrite Roofing
Windows: Lake City Industries
Stucco: Parsons Plastering
Tile: RimRock Commercial Flooring
Painting: Professional Painting
Electrical: Preston-Link Electric
Landscape & Irrigation: Gainesville Landscaping
If notified by the Owner within 30 days after receipt of proposal, the undersigned agrees to execute and deliver a Contract with the Owner and to provide insurance and bonds as required by the Contract Documents within 10 days after notification.

Submitted by:

CONTRACTOR:

Parrish-McCall Constructors, Inc.

AUTHORIZED SIGNATURE:

SEAL (if a Corporation)

SECTION-B PAGE-3

08-14-13

SECTION B - PROPOSAL FORM

DATE:	Decem	per 20, 2013			
BIDDER:	D.E. Sco	orpio Corporation			
perform all la drawings, sp	nereby bor for a ecification	proposes to turn and incidental to t ons and Contract	ish all material an he entire work for t Documents for the	d equipm	conditions thereof, the ent and storage and to t in accordance with the
		e Thousand Seven			
(\$235,	700.00) dollars.		
BID I	S BASED	ON CONTRACT D	OCUMENTS AND AT	TACHED Q	UALIFICATIONS
The undersignal ternates for	gned fur the sta	rther proposes ted additions to o	to perform the wordeductions from	vork calle the above	d for in the following e amount
ALTERNATE		ADD		D	EDUCT
#1: Lift		\$48,700			
#2: 3/4" ply 2nd flo	ywood oor	\$1,725			
#3: hunter	douglas max blinds	\$1,100			
	units ilo	\$1,700			
#5: trench	drain to be 883			Deduct:	\$525
In addition to the Bid Propo	the abo	ove costs, the uno the following item	dersigned shall inc	lude the f	ollowing allowances in
N/A					
The undersig to Proceed ha	ned agr as been	ees to complete a issued.	all work within	90 days	_ days after the Notice
The undersig	ned ack	nowledges recei	ving Addendum Nı	umbers _	1, 2, 3, 4

SECTION-B PAGE-1

08-14-13

PROJECT: Building Renovations to 107 SW 7th Street in Gainesville, FL 32601

REFERENCES

List at least three (3) references of similar projects. so, notify by initialing here: NA	(A separate document may be included. I
REFERENCE #1: Client Contact Name: Location: Construction Cost (optional): Project: Brief Description:	
REFERENCE #2: Client Contact Name: Location:_ Construction Cost (optional): Project:_ Brief Description:_	Phone:
REFERENCE #3: Client Contact Name: Location:_ Construction Cost (optional): Project: Brief Description:_	

PROPOSED SUBCONTRACTORS

Demolition: Ace Contracting	
Concrete:	
Masonry:Mike Flynn	
Railings: Division 5 Steel	
Roofing: Mac Johnson	
Windows: Shea's and Evans Construction	
Stucco: Malphur's Plastering	
Tile:	
Painting:Alachua Painting and Waterproofing	
Electrical:	
Landscape & Irrigation: AGM Commercial Landscaping	

If notified by the Owner within 30 days after receipt of proposal, the undersigned agrees to execute and deliver a Contract with the Owner and to provide insurance and bonds as required by the Contract Documents within 10 days after notification.

Submitted by:

CONTRACTOR:

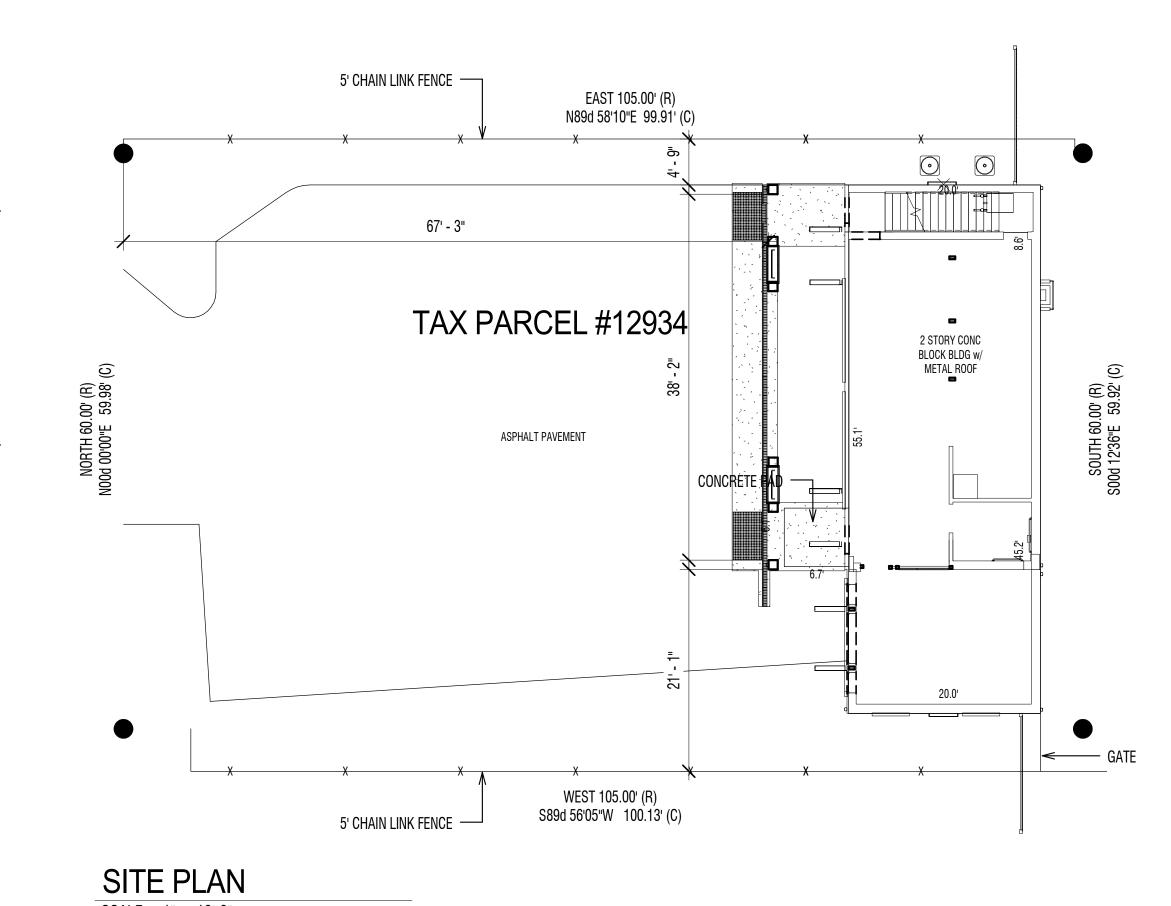
D.E. Scorpio Corporation

AUTHORIZED SIGNATURE:

SEAL (if a Corporation)

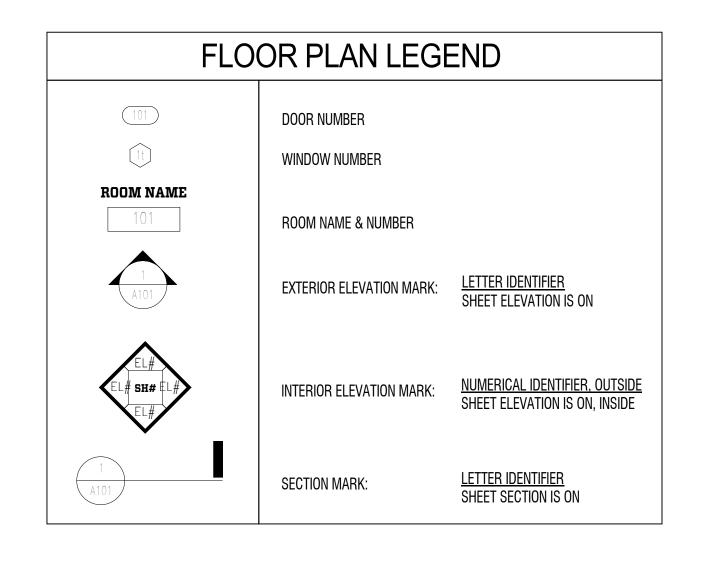
107 BUILDING RENOVATIONS

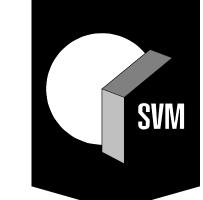
107 SW 7th Street Gainesville, FL 32607

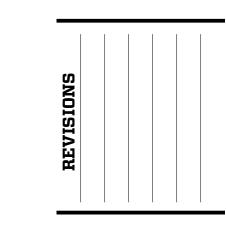




	SHEET INDEX							
SHEET # SHEET NAME								
A0.0	COVER SHEET							
A0.0	CODE SUMMARY							
A0.1.3	COMPONENT SCHEDULE							
A0.2.0	AS-BUILT/DEMO FIRST FLOOR							
A0.4.0	AS-BUILT/DEMO ELVATIONS							
A1.0	PROPOSED FLOOR AND CLG PLANS							
A2.0	EXTERIOR ELEVATIONS							
A3.0	INTERIOR ELEVATIONS							
A6.0	WALL SECTIONS/ DETAILS							
A6.1	DETAILS							
A7.0	UL & SCHEDULES							
A7.1	SCHEDULES							
A8.0	AREAS							







PERMIT

COVER SHEET SVM# 1405-55

some windows electrical equipment dead-end corridors and ceiling ht 703.2.1 Enclosure of vertical openings: Stairs shall comply with the Florida Fire Prevention Code - OK Stairs are 1-hour fire rated 703.2.2&3 The stairs... shall at minimum, be enclosed with smoke-tight construction. OK - Provided 03.3 Smoke barriers & Fire Resistance is required per FBC 703.4 Finishes must comply with FBC 703.5 Guards must comply with FBC

Fire Protection - Per FBC, but limited to work areas only. 705.1&2 Means of Egress – N/A – each tenant has a separate means of egress. EXCEPTION: See 801.3. 705.3 Number of Exits – per FFPC. One required. See Chapter 10 FBC 705.4.1 One required.(<50 occupants and <75' travel distance)

705.4.4 Panic Hardware not required. 05.7 Means of egress lighting required. **OK – Provided throughout** 705.9 Handrails – required on at least one side. OK Provided. 706.1 Accessibility - must meet FBC, Chapter 11 - First floor shall meet this 707 Structural - New interior work, porch roof and window shades are

structurally engineered.

Electrical - New electrical systems must compy with Chapter 27 of the FBC Mechanical – Reconfigured spaces must have ventilation systems – HVAC Systems to be replaced with new. Plumbing – New plumbing shall comply with **FBC, Plumbing**Energy Conservation - Alteration work shall conform to FBC

Chapter 8. ALTERATIONS-LEVEL 3 803.1 Enclosure of vertical openings: Stairs shall comply with the Florida Fire

Prevention Code – **OK Stairs are 1-hour fire rated** 803.2.1 Separation required. **OK – 1-hour separation is provided between tenant** 803.3 Finishes must comply with 703.4 (FBC) **OK** 804 Fire Protection – Sprinklers required per FBC. Not required per 903. 804.2 Fire Alarm system required per FBC - Not required in existing building 804.4.4 Automatic Fire Detection is required per FBC. **Not required per 907.2.2** 805.1&2 Means of Egress – Egress & Exit signage shall be provided per FBC. **OK** 806.1 Accessibility - must meet FBC, Chapter 11 - First floor shall meet this 807 Structural - New interior work, porch roof and window shades are structurally engineered.

Chapter 4, Special Detailed Requirements Based on Use and Occupancy

808 Energy Conservation - Alteration work shall conform to FBC, Chapter 13.

Chapter 5: General Building Heights and Areas 1) Given: Construction Type (per CH 6): TYPE V-B (wood frame, unprotected)

(A) AREA OF EACH FLOOR (AREA DEFINITION 502.1): 2) Physical Properties of Building

(a) Area of each floor (Area definition Ch. 2):

01405-55

1st Floor: 949 sf **O.K**. < 9,000 s.f.

2nd Floor:= 747 sf **O.K.** < 9.000 s.f. Total GSF = 1.696 sf MAXIMUM HEIGHT : 40', Two (2) STORIES 504.2

See Chapter 30 - Elevators. N/A - See Chapter 11

Automatic Sprinkler System Increase -N/A Roof Structures: If built of combustible material, height shall not be more than 20' above the allowable height = 40' + 20' = 60' OK - No roof structures proposed Mezzanines - Egress N/A Area Modifications

506.3 Automatic sprinkler system increase: Allows the area limitation in 1015 Unlimited Area Buildings: N/A Mixed Use and Occupancy: N/A

Chapter 9, Fire Protection Systems

11

MA

AUTOMATIC SPRINKLER SYSTEMS - N/A

903.2.8 Automatic sprinkler system is not required for Group B Professional FIRE ALARM AND DETECTION SYSTEMS Not required. Not more than 2 stories; Less than 50 occupants on 2nd

floor & <300 total occupants **EXTERIOR EXIT RAMPS & STAIRWAYS:** Shall be not less than 50% open on one side. **OK** Chapter 10, Means of Egress EXIT DISCHARGE 1003.5 GENERAL MEANS OF EGRESS Exits shall discharge to the exterior at grade **OK** Changes in elevation of 12" or less shall be ramped if in Exit Access

EXIT ENCLOSURES: N/A

HORIZONTAL EXITS: N/A

pursuant to 202.4.1

Priority shall be given to:

1) Minimum Plumbing Fixtures - (Table 403.1):

(a) Building or Occupancy: Group B

Florida Plumbing Code, 2010

(g) Others:

= 1/100 SF AREA; 747 s.f./100

3) MEANS OF EGRESS

39.2.5.3.2.

39.2.8

d. Accessible telephones - N/A

a. An accessible entrance - Provided

f. Accessible parking, etc. - Provided

EXIT PASSAGEWAYS: 44" min. (see 1018.2) OK

LUMINUOS EGRESS PATH MARKINGS - N/A

EXISTING BUILDINGS AND FACILITIES

Alterations Affecting Primary Function Areas

Accessible Features in the Event of Disproportionality

c. An accessible restroom – Provided at first floor

(c) Water Closets: Required: 1/tenant space

(f) Drinking Fountains: Required: 1/tenant space

2) OCCUPANT LOAD PER 30.1.7, REFERENCE TABLE 7.3.1.2

ARRANGEMENT OF MEANS OF EGRESS

Travel Distance to an exit: 200' max

PROTECTION FROM HAZARDS

Dead End Corridors: 50' max. (sprinklered) OK none.

Illumination of Means of Egress: Per Section 7.7

Marking Means of Egress: Per Section 7.9

Per AHJ - 1 hour separation to be provided.

EXTINGUISHMENT REQUIREMENTS

Portable FE's per 9.7.4

FIXTURE/ACCESSORY

(2) WALL MOUNTED WATER CLOSET

WATER FLOW PER FBC 602.6 (5) GRAB BARS; SEE PLANS FOR SIZES 6 TOILET PAPER DISPENSER

WHEELCHAIR ACCESSIBLE DRINKING FOUNTAIN,

MIRROR, ABOVE LAVATORY OR COUNTER

CLOTHE/TOWEL HOOK, DIMENSION IS TO TOP OF HOOK

AUTOMATIC HAND DRYER, DIMENSION IS TO AIR OUTLET

(3) LAVATORY

(1) MIRROR

(13) TRASH RECEPTACLE

(14) SANITARY NAPKIN DISPOSAL (15) TOILET PARTITION

(16) PERMANENT TACTILE SIGN (17) BABY CHANGING STATION

NOTE: FBC = FLORIDA BUILDING CODE

Common Path of Travel: unlimited in single tenant occupancy.

DETECTION, ALARM, AND COMMUNICATION SYSTEMS Fire alarm is not required (<100 occupants on 2nd floor)

HVAC: Per Section 9.2 (includes cooking equipment)

NUMBER OF EXITS

Exit as follows:

1 exit criteria is met.

1 exit criteria is met

(e) Bathtubs/Showers: Required: none

1) Chapter 39 - Existing Business Occupancies

e. Accessible drinking fountains - Provided at first floor

...the path of travel to the altered area...are accessible...unless such

alterations are disproportionate to the overall alterations in terms of cost

travel to the altered area will be deemed disproportionate...when the cost

The Cost of an elevator (est. @ \$75K) exceeds 20% of the total project

cost (est.@ \$150K. 20% of \$150K = \$30K) **OK - No elevator required.**

Required: 1/tenant space

b. An accessible route to the altered area - Provided at first floor

exceeds 20% of the cost of the alteration to the primary function area"

OK exits are sloped @ 1:12 or less, or stepped when <12" change in Chapter 11, Accessibility - FBC 2010 Accessibility Table 1004.1.1: 100 s.f./occupant. Max condition above level of discharge Tenant Space 1st Floor 1 =949 s.f./100

= 10 occupants per floor worst case.

= 8 occupants per floor worst case. 801.3 Compliance - All work shall comply with Chapters 6 & 7. Sections 703, 704, & Table 1005.1: Egress Width: Group B, unsprinklered: Stairways -0.3"/occupant. Other components 0.2" /occupant. (1 occupant/100s.f.)(.3") = min. width required per exit. (1) 10 occupants X 0.3"/occupant = 3" required. (2) 8 occupants X 0.3"/occupant = 2.4" required. OK: 36" min. provided at each exit stair

> NOTE DOOR ENCROACHMENT 1005.2: N/A MEANS OF EGRESS ILLUMINATION - Provided ACCESSIBLE MEANS OF EGRESS -Provided DOORS, GATES AND TURNSTILES 32" clearance at doors provided throughout

Tenant Space 2nd Floor 1 =747 s.f./100

1009 STAIRWAYS - 44" wide, with 36" as exception when serving 50 people or less. Risers - 7" max. and Treads - 11" min. landing depth shall be the stair width, at minimum OK- 36" wide enclosed 1-hour fire rated exit stair is provided 1010 RAMPS - N/A **EXIT SIGNS**

1011 Illuminated exit signs shall be at each exit (stair) Directional exit signs shall mark the path of egress **OK- Provided** HANDRAILS - Provided at all stairs and ramps Uniform height at 34-36"

1012.3 Handrail Graspability: Type I provided with 1.5"diameter Continuity, Fittings, Extensions, Clearance, and Projections: **OK** Design requirements met. Intermediate Handrails -Required every 60". N/A.

- 42" High with <4" spacing between pickets **OK - Provided** 1013.5 Required for rooftop equipment & roof hatches <10' from roof edge EXIT ACCESS

Common Path of Egress Travel shall not exceed 75' **OK common path is 17**' EXIT AND EXIT ACCESS DOORWAYS One required. for each dwelling unit (sprinklered & <20 occupants) EXIT ACCESS TRAVEL DISTANCE T1016.1: 200' max. OK - Greatest distance is 69' the second floor. AISLES - N/A

1018-1019 CORRIDORS & EGRESS BALCONIES - N/A 1020-1021 EXITS & NUMBER OF EXITS AND CONTINUITY

TACTILE

SIGN LETTERS

1 exit required at each floor, OK - 1 exit is provided at 1st floor and 1 exit is provided at second floor (greatest travel distance is 69').

ELECTRICAL LOAD CALCULATIONS

Filename: Elect Calcs_01405-55_107-2.ccc

Type of Occupancy -> Office Building Square Footage Multiplier -> 3.5 Sub-Areas? -> No
Addition? -> No
Restaurant? -> Yes All Electric? -> 1 Other Lighting? -> No Unknown Recept? -> No No. of Receptacles = 0 Total Floor Area = 909 These are the 'Sub'-Area and 'Other' Lighting Data Area C? Line Neutral 909 No 3,977 3,977 Disproportionate Cost: ".. Alterations made to provide an accessible path of Connected Load: Actual Number = 0 Name C? Ph No Amps Volts VA Line Neutral Total Lighting by Connected Load 3,977 3,977 3,977 Maximum Total Lighting (Area vs Conn. Load) Total De-Rated Lighting and Receptacle Kitchen: Actual Number = 3 M? Ph No Amps Volts VA HP Line Neutral

Filename: Elect Calcs_01405-55_107-1.ccc

 Frig
 M
 1
 1
 7.7
 115
 886
 886

 Micro
 M
 1
 1
 115
 1400
 0
 0

 Disposal
 M
 1
 1
 8.1
 115
 0.5
 932
 932
 Total Kitchen (b) Occupancy Content: Per FBC, T 1004.1.1 = 100gross sf/person

Occupancy Content: Per FBC, T 1004.1.1 = 100gross sf/person

Name M? Ph No Amps Volts VA HP Line Neutral 747+/- sf/100 = 8 occupants at second floor M 1 0.90 230 0 0 M 1 2.30 240 41,276 0 0 1 1 240 5000 0 0 Motors and Other: Actual Number = 2 Name M? Ph No Amps Volts VA HP Line Neutral

M 1 1 4.00 115 370 370 370 1 1 230 4500 4,500 4,500 Maximum Phase Amps Volts Kitchen Phase Amps Volts
1 8.1 115 NFPA 101, Life Safety Code, 2009 edition (as published in the 2009 edition of the Heat/Cool Phase Amps Volts

Service Voltage = 240 Service Phase = 1 Maximum Amperage = =8 occupants per floor worst case for floor above level of exit discharge. All Signs should be included in Motors/Other section at 125%.

2 exits required per 39.2.4.1, but the work meets the criteria for 1 Filename: Elect Calcs_01405-55_107-1.ccc ELECTRICAL LOAD CALCULATION

Line Neutral | Lighting-Connected vs Sq.Ft. | 3,977 | 3,977 | De-rated Receptacles | 909 | 909 | Other Lighting | 0 | 0 | Sum (Lighting and Receptacles) | 4,886 | 4,886 | Kitchen with Demand Factors Applied 1,635 Heating and Cooling Motors and Others 4,870 4,870 Volt-Amp TOTALS = 12,351 12,351 Maximum Amperage = 51 51 Service Voltage = 240

Emergency Lighting: not required - <100 occupants on 2nd floor Service Phase = 1 All Signs should be included in Motors/Other section at 125%. This lighting CANNOT be de-rated Conductor and Conduit Sizes Service is : 240 Volts, 1-Phase

Type of Occupancy -> Office Building Square Footage Multiplier -> 3.5 Sub-Areas? -> No
Addition? -> No
Restaurant? -> Yes All Electric? -> 1 Other Lighting? -> No
Unknown Recept? -> No
No. of Receptacles = 0 Total Floor Area = 703 These are the 'Sub'-Area and 'Other' Lighting Data Area C? Line Neutral 703 No 3,076 3,076 Name C? Ph No Amps Volts VA Line Neutral 3,076 3,076 3,076 3,076 Total Lighting by Connected Load Total Lighting by Area Maximum Total Lighting (Area vs Conn. Load) Total 'Other' Lighting Total Receptacle Load Total De-Rated Lighting and Receptacle 3,779 3,779 Kitchen: Actual Number = 3
 Frig
 M
 1
 1
 7.7
 115
 886
 886

 Micro
 M
 1
 1
 115
 1400
 0
 0

 Disposal
 M
 1
 1
 8.1
 115
 0.5
 932
 932
 Kitchen Multiplier -> 0.9 Total Kitchen Heating and Cooling. Actual Number = 1
Name M? Ph No Amps Volts VA HP Line Neutral M 1 0.90 230 0 0 M 1 2.30 240 41,276 0 0 1 1 240 5000 0 0 Total Heat and Cool Name M? Ph No Amps Volts VA HP Line Neutral EWC M 1 1 4.00 115 370 370 370 230 4500 4,500 4,500 4,870 4,870 WH 1 1 Total Motors and Others Maximum Phase Amps Volts Kitchen Phase Amps Volts Heat/Cool Phase Amps Volts Motor/Other Phase Amps Volts Total Total = 11,244 11,244 Service Voltage = 240 Service Phase = 1 Maximum Amperage = All Signs should be included in Motors/Other section at 125%. This lighting CANNOT be de-rated! Filename: Elect Calcs_01405-55_107-2.ccc ELECTRICAL LOAD CALCULATION Filename: 107-2

Line Neutral Lighting-Connected vs Sq.Ft. 3,076 3,076
De-rated Receptacles 703 703 Other Lighting 0 0 Sum (Lighting and Receptacles) 3,779 3,779 Kitchen with Demand Factors Applied 1,635 1,635 Heating and Cooling Motors and Others 4,870 4,870 Volt-Amp TOTALS = 11,244 11,244 Maximum Amperage = 47 47

Service Voltage = 240 All Signs should be included in Motors/Other section at 125%.

Conductor and Conduit Sizes Service is : 240 Volts, 1-Phase

WOOD BUCK, HEADER, TYP 16" OC MAX +1 EACH WITHIN 6" OF TOP & BOTTOM PLATES

TYP FRAMING

WOOD STUD

(OPTION C)

DOOR WITHOUT

DOOR FRAMING SECTIONS

SCALE: 1/2" = 1'-0"

INC. CLEAN,

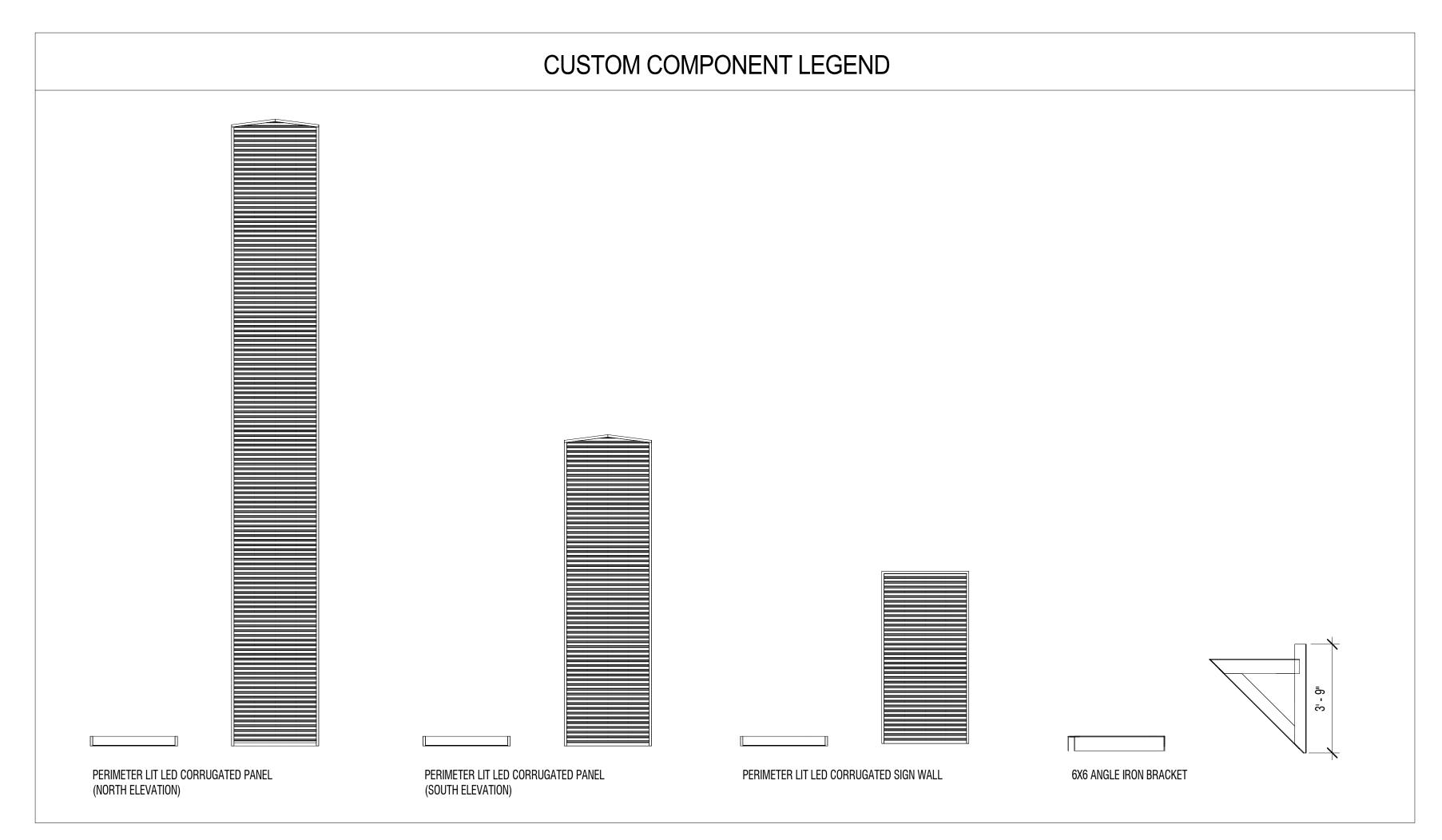
VIGNOL SKINNER

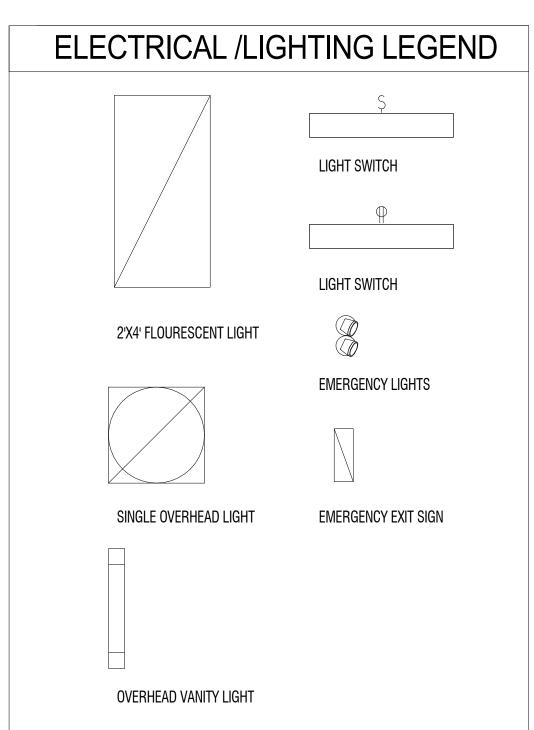
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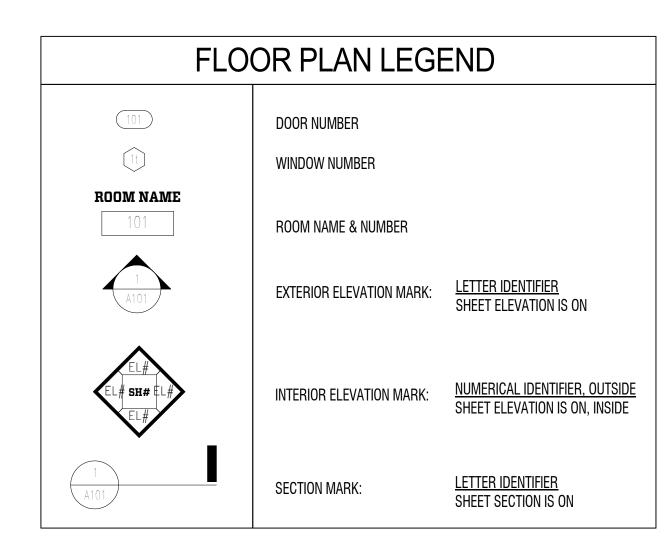
CHECKED BY: **HJM** PERMIT CODE SUMMARY

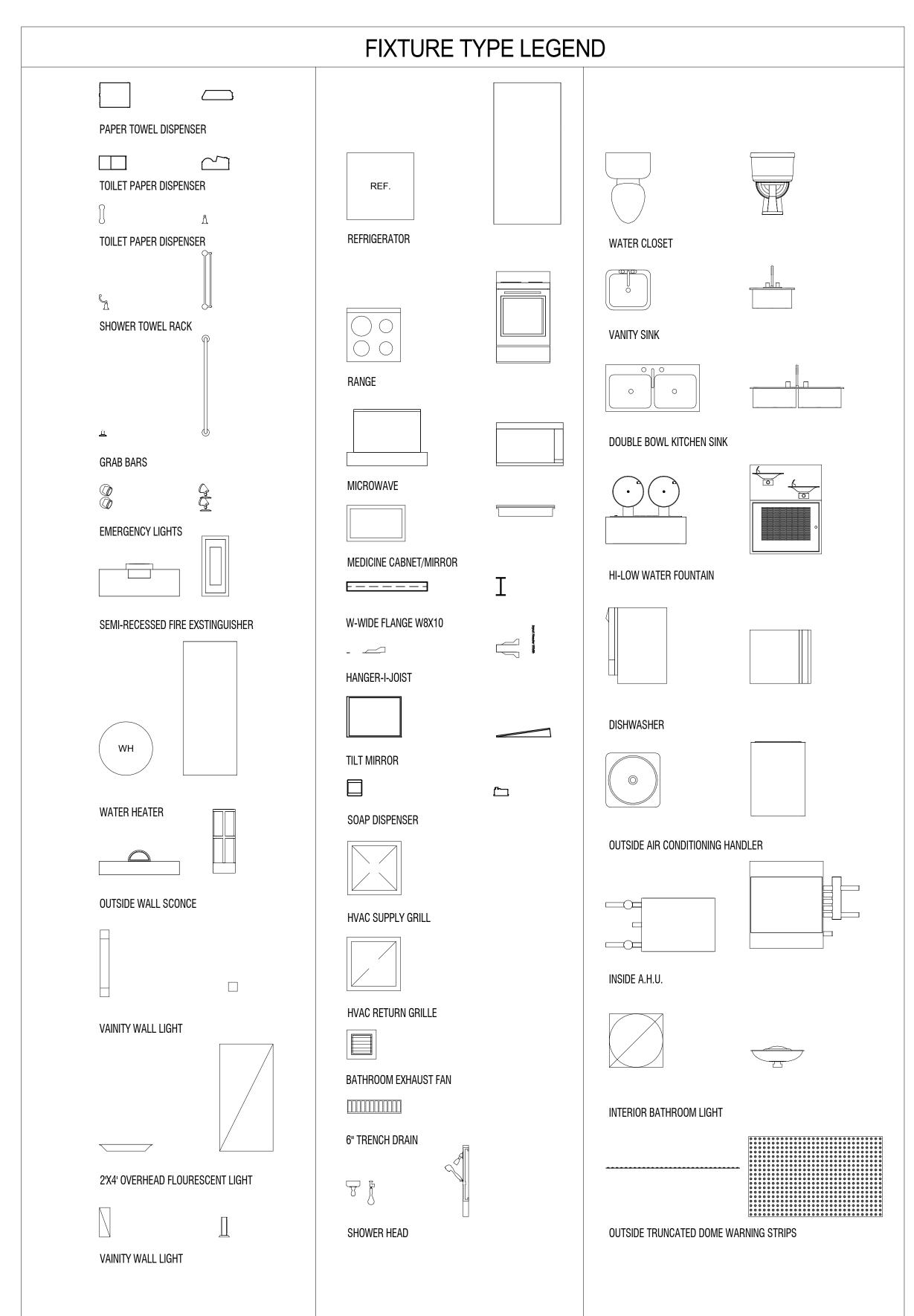
SVM# 1405-55

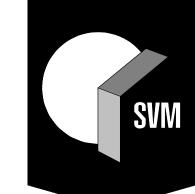
STANDARD MOUNTING HEIGHTS SCALE: 1/4" = 1'-0"



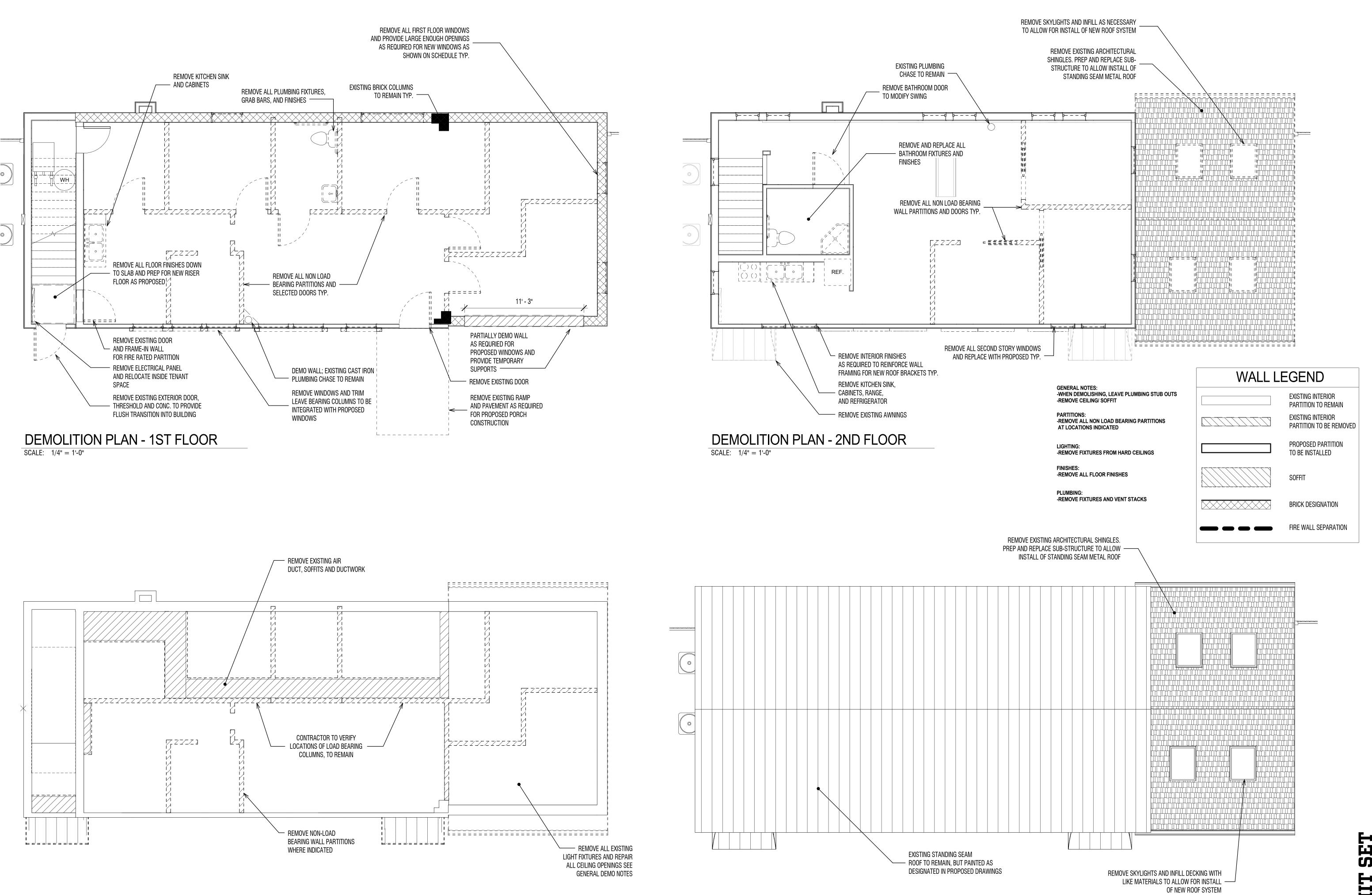








CHECKED BY: **HJM** SVM# 1405-55



DEMOLITION PLAN - ROOF

SCALE: 1/4" = 1'-0"

DEMOLITION CEILING PLAN - 1ST FLOOR

SCALE: 1/4" = 1'-0"

CHECKED BY: **HJM**

FIRST FLOOR

SVM# 1405-55

STANDING SEAM METAL ROOF TO REMAIN. CLEAN AND PREP AS REQUIRED FOR NEW FINISH FASCIA TO REMAIN - MODIFY AS NEEDED FOR NEW GUTTERS TYP. REMOVE EXISTING ARCHITECTURAL SHINGLES AND REPLACE WITH -STANDING SEAM METAL ROOFING - ALL EXISTING WINDOWS TO BE REMOVE EXISTING SKYLIGHTS REMOVED AND REPLACED AS TYPICAL PROPOSED. 2ND FLOOR EXISTING WOOD FENCE TO REMAIN TYP. REMOVE EAST FACING WINDOWS AND WALL AS NECESSARY TO PROVIDE

OPENING FOR PROPOSED WINDOWS

EXISTING EAST ELEVATIONS SCALE: 1/4" = 1'-0"

EXISTING NORTH ELEVATIONS SCALE: 1/4" = 1'-0"

EXISTING STANDING SEAM METAL ROOF TO REMAIN

2ND FLOOR

FASCIA TO REMAIN - MODIFY AS NEEDED FOR NEW GUTTERS TYP.

STUCCO FINISH TO REMAIN U.N.O.

ALL EXISTING WINDOWS TO - BE REMOVED AND REPLACED AS

---- REMOVE EXISTING AWNINGS

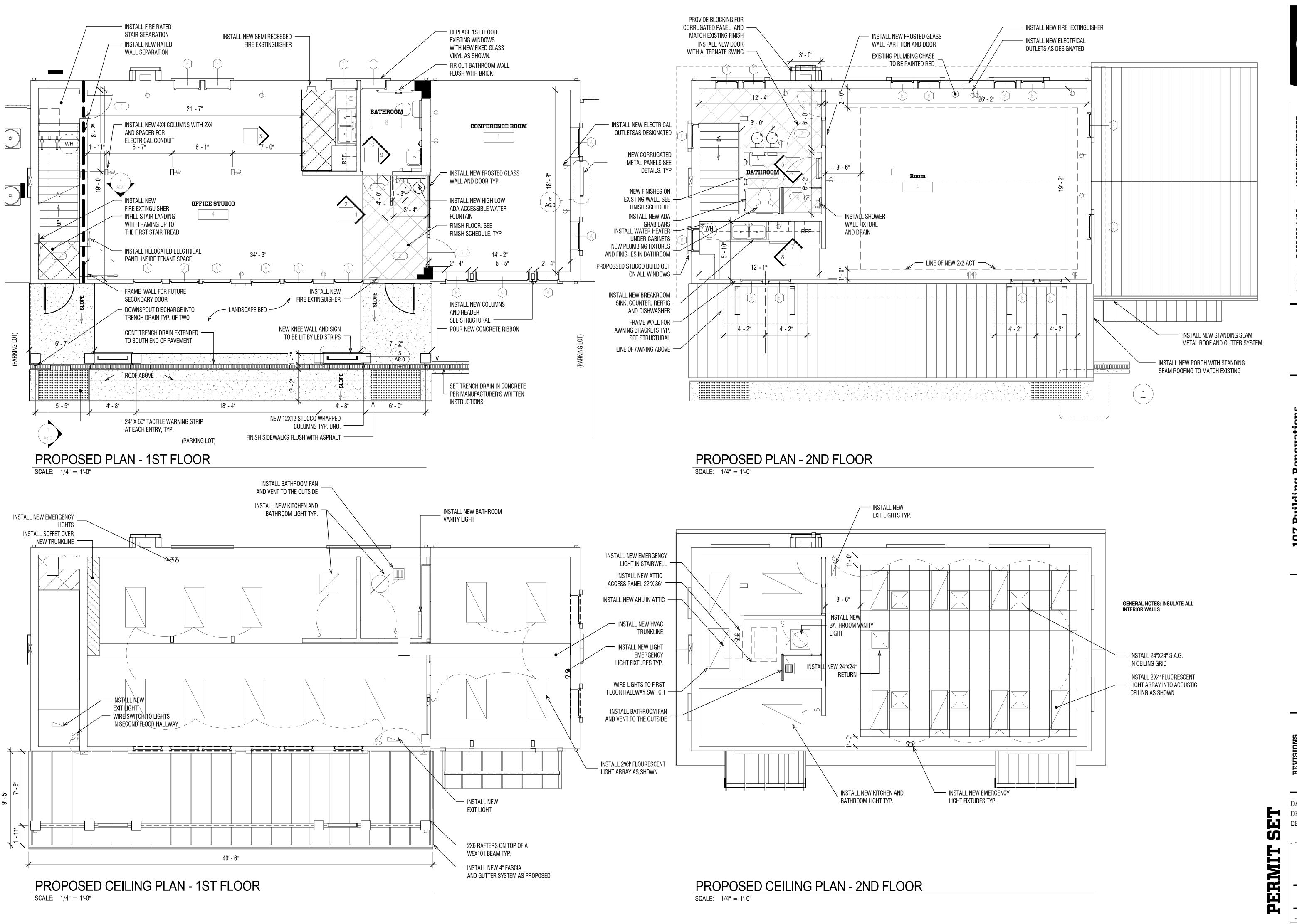
PROPOSED

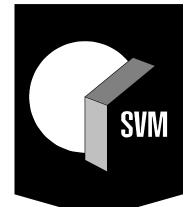
- EXISTING ELECTRICAL **EQUIPMENT TO REMAIN**

CHECKED BY: **HJM** ELVATIONS SVM# 1405-55

SKINNER VIGNOLA MCLEAN, INC.

SVM





MCLEAN, INC.

SVM

CHECKED BY: **HJM** PROPOSED FLOOR AND CLG PLANS SVM# 1405-55

GROUND FLOOR
0' - 0"

PORCH FOOTING SEE STRUCTURAL

PROPOSED WEST ELEVATIONS SCALE: 1/4" = 1'-0"

- INSTALL NEW 2" SYNTHETIC STUCCO

FINISH ON TOP OF DENSGLASS ON TOP

OF FLEXIBLE METAL FLASHING. TYP. ALL

- 2' HIGH 8"CMU KNEE WALL WITH

SIGN AND 2" CONCRETE CAP

INSTALL DOWNSPOUT AS PROPOSED —

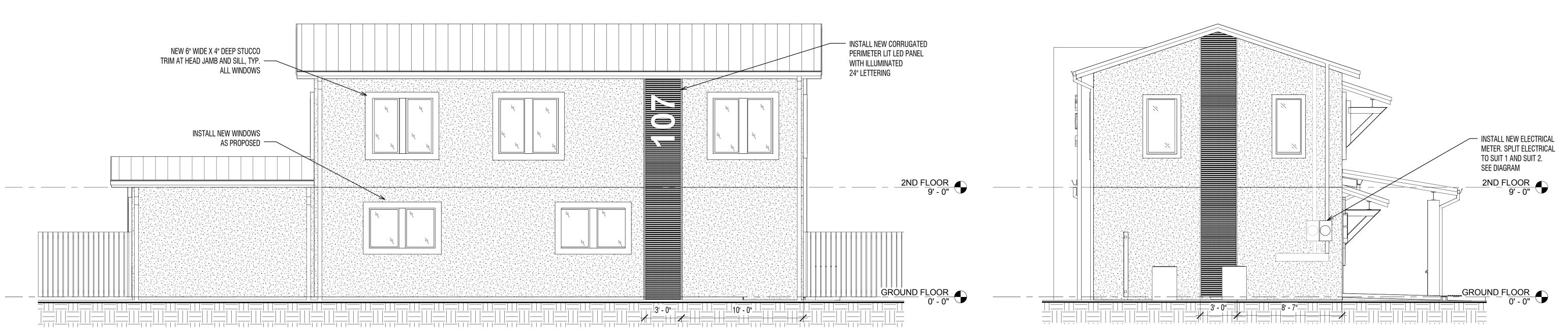
12"X12" CMU COLUMNS _ WITH STUCCO FINISH

PROPOSED SOUTH ELEVATIONS SCALE: 1/4" = 1'-0"

NEW VINYL WINDOWS.

SEE SCHEDULE AND

PLANS



PROPOSED EAST ELEVATIONS

SCALE: 1/4" = 1'-0"

PROPOSED NORTH ELEVATIONS

SCALE: 1/4" = 1'-0"

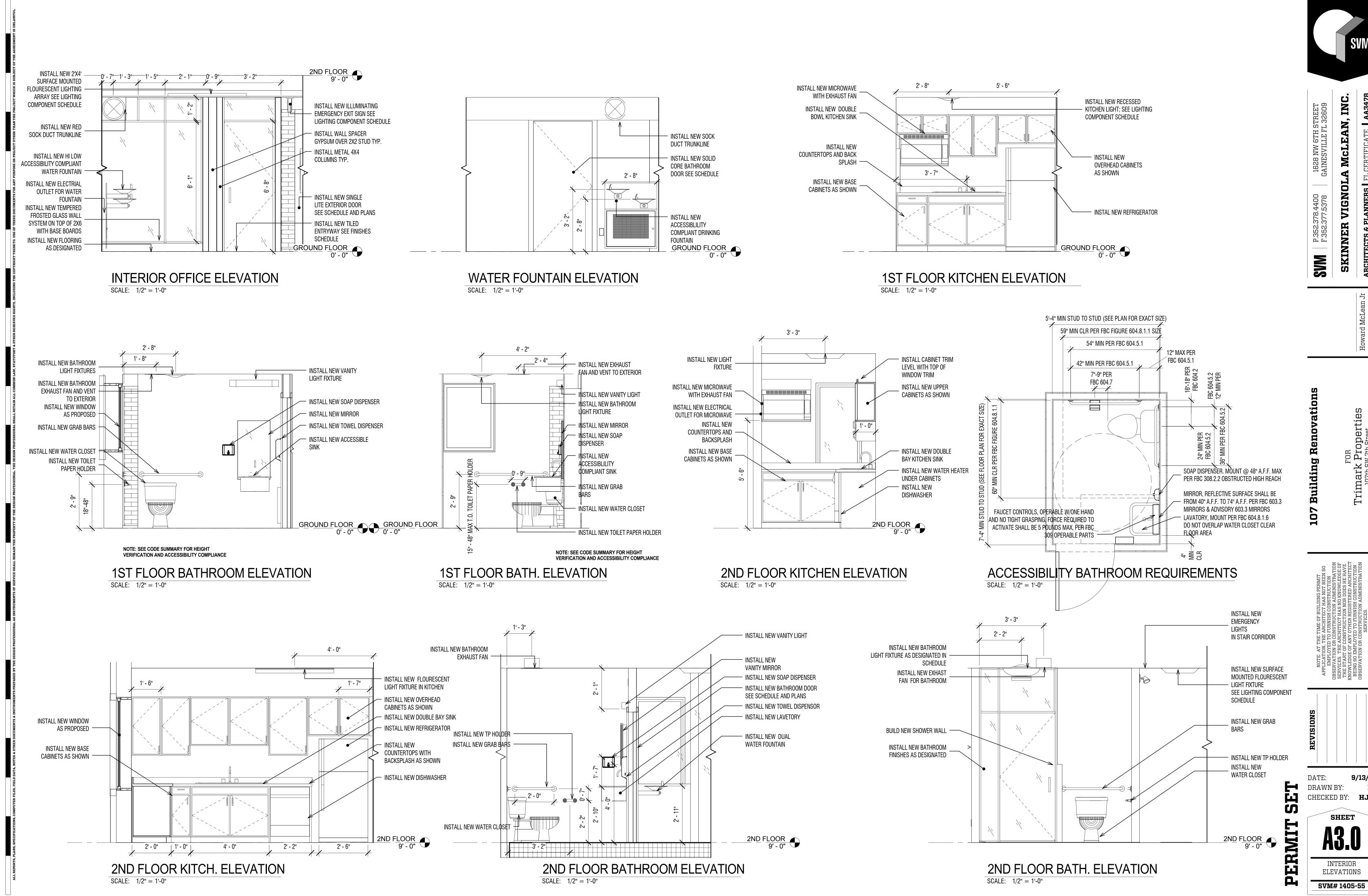
SKINNER VIGNOLA MCLEAN, INC.

SVM

GROUND FLOOR 0' - 0"

NEW BACKLIT CORRUGATED
METAIL PANELS. TYP



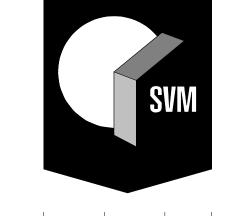


MCLEAN, INC.

SKINNER VIGNOLA

CHECKED BY: **HJM**

INTERIOR ELEVATIONS



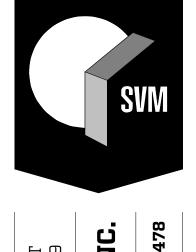
SVM

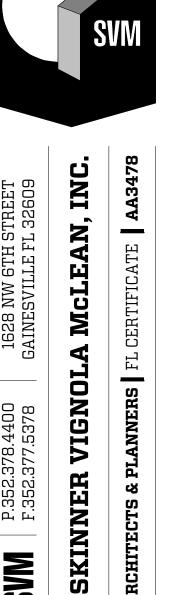
CHECKED BY: **HJM**

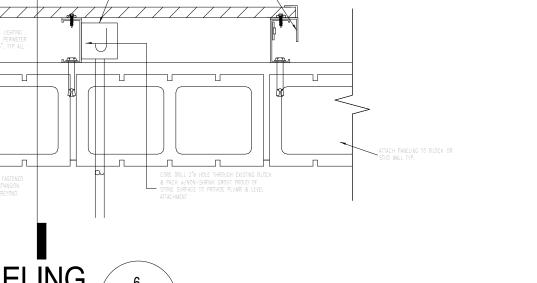
WALL SECTIONS/ DETAILS

SVM# 1405-55

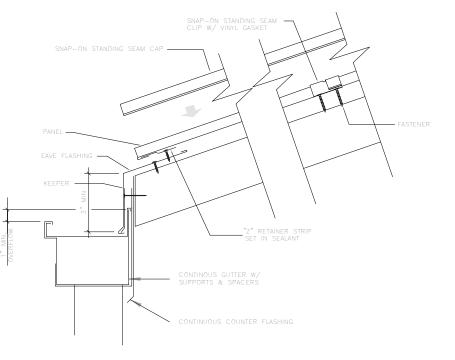
PERMIT



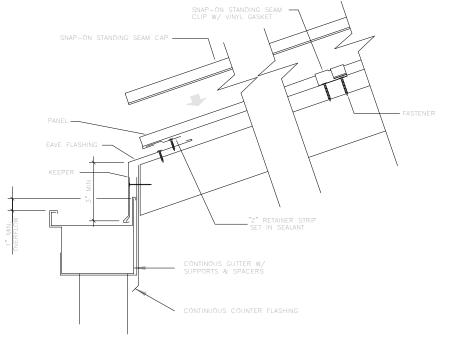




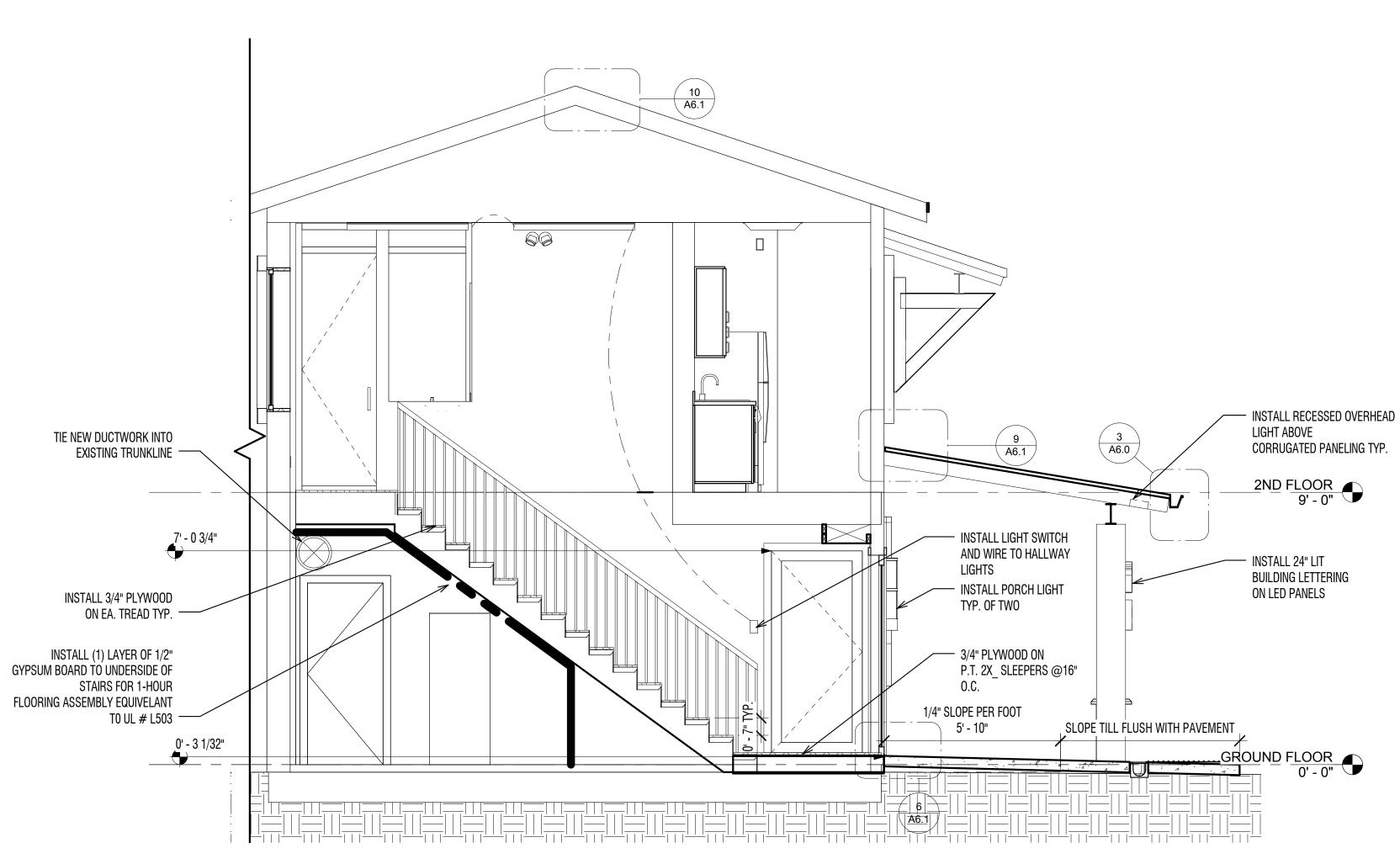


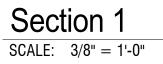












LED WALL ATTACHMENT

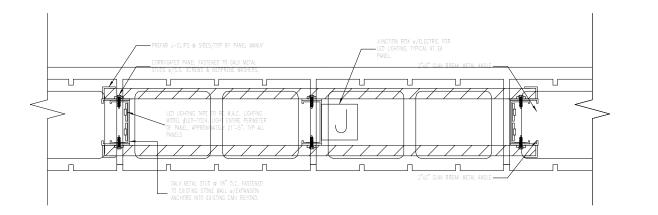
SCALE: 1 1/2" = 1'-0"

DETAIL @ RAKE

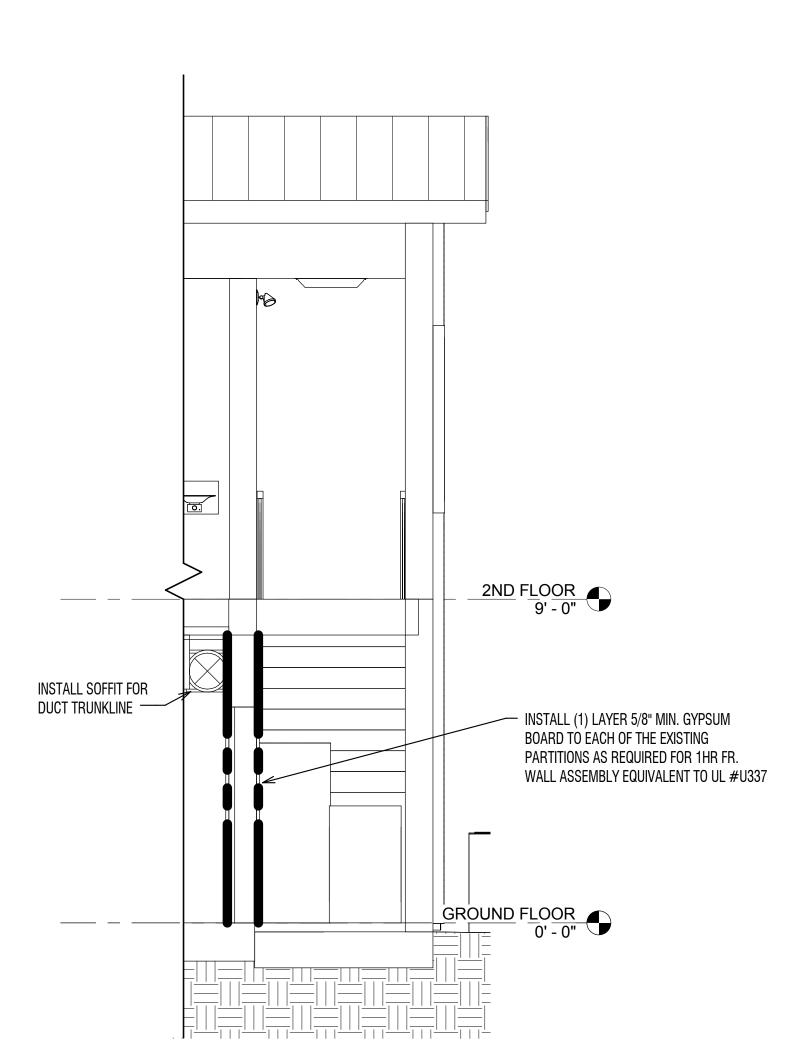
SCALE: 1 1/2" = 1'-0"

7 A6.1

4 A6.1



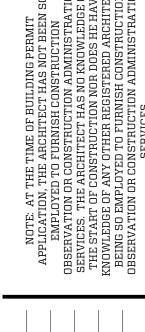


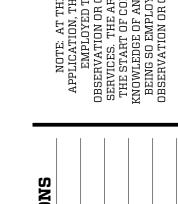


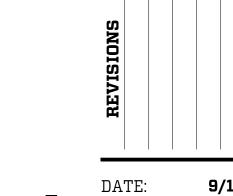
SECTION 2 SCALE: 3/8" = 1'-0"

PERMIT



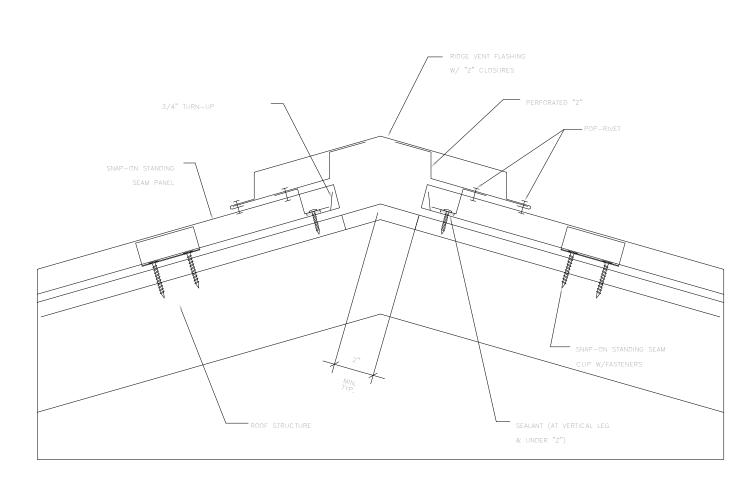




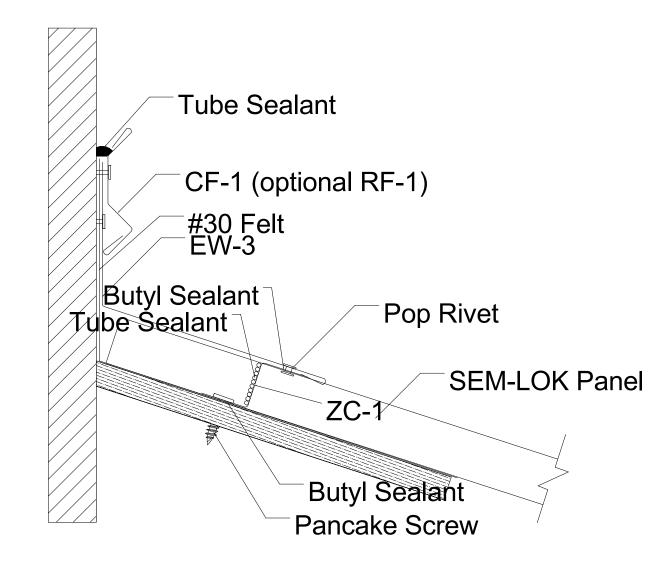


CHECKED BY: **HJM**

DETAILS SVM# 1405-55

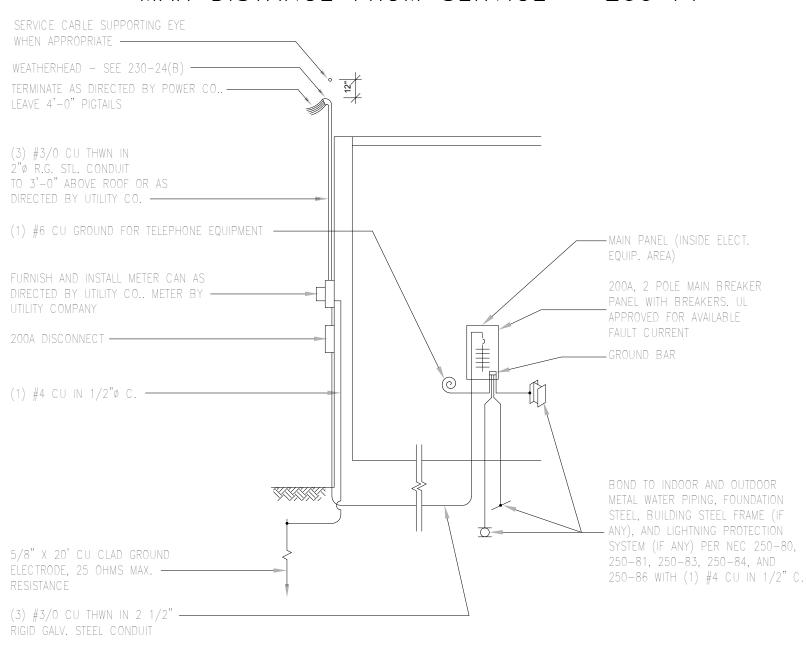




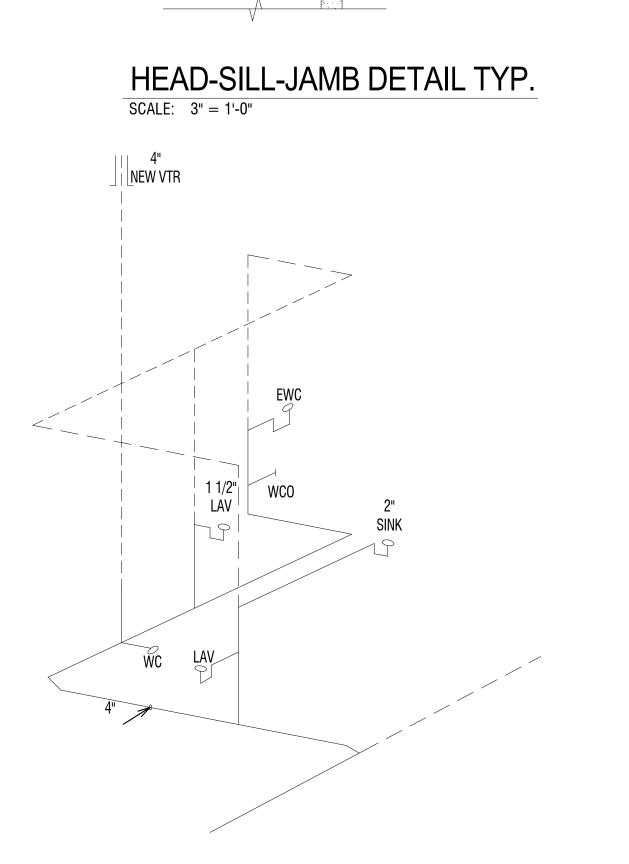




MAX DISTANCE FROM SERVICE - 200 FT



EXISTING TYPICAL METER AND PANEL DIAGRAM 200A, 3 WIRE, 120/240V, 10 SYSTEM, OVERHEAD



INSTALL STUCCO TRIM MAX. 7/8 THICK
FUR OUT TO PROVIDE REMAINING THICKNESS

E" DENSGLASS W/CEMENT STUCCO FINISH

1-" DEEP STUCCO CASING BEAD

EXISTING CEMENT STUCCO TYP.

SELF ADHESIVE FLEXIBLE FLASHING

WINDOW, SEE SCHEDULE
 SELF ADHESIVE FLEXIBLE FLASHING OVER SILL ALUM FLASHING OVER SILL TRIM, SET

DENSGLASS W/CEMENT STUCCO FINISH

/ IN BED OF SEALANT, SLOPE TOP 3:12

 $1\frac{1}{2}$ " DEEP STUCCO CASING BEAD

- SHEATHING, SEE STRUCTURAL

- STUCCO CASING BEAD

—— BACKER ROD & SEALANT WINDOW, SEE SCHEDULE

---- BÁCKER ROD & SEALANT ---- WINDOW, SEE SCHEDULE

INSTALL BLOCKING FOR

& APRON

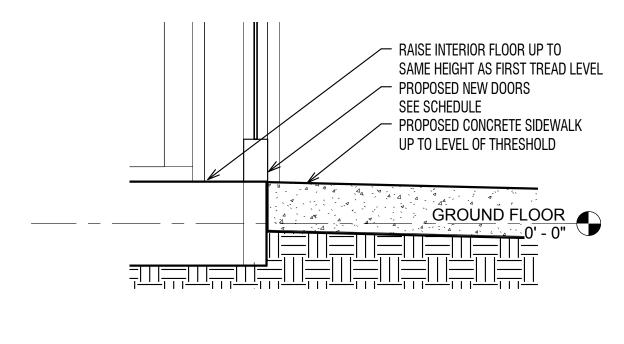
BRACKET ATTACHMENT WHERE INDICATED SEE

STRUCTURAL

SELF ADHESIVE FLEXIBLE FLASHING TUCK UNDER FELT OVER

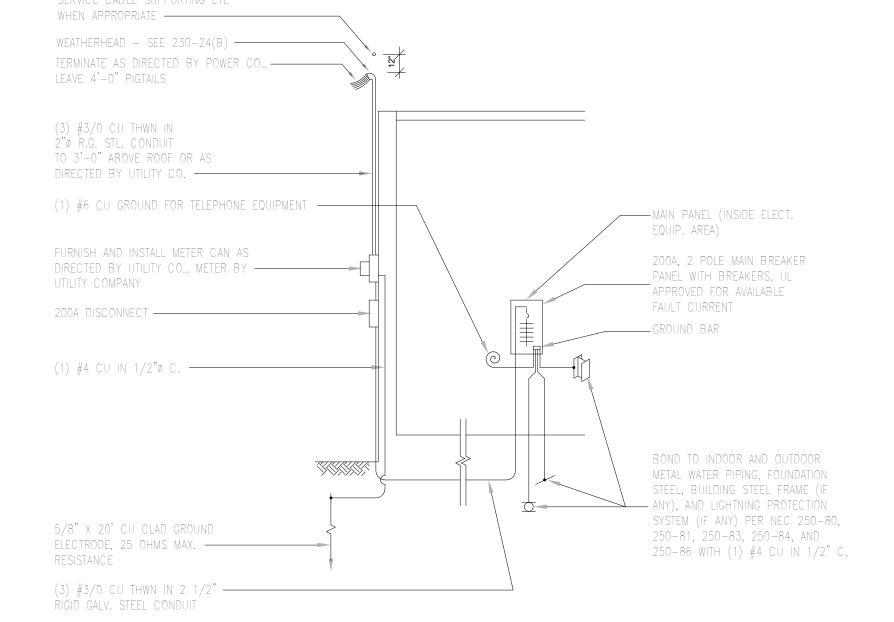
EXISTING CEMENT STUCCO TYP.

RISER DIAGRAM SCALE: 3" = 1'-0"



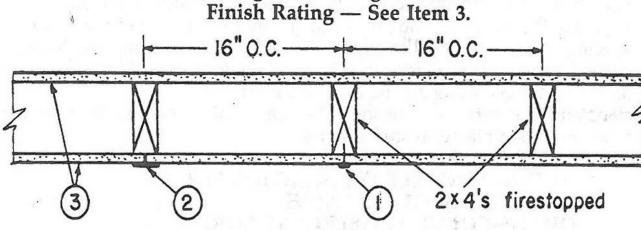


MAX DISTANCE FROM SERVICE - 200 FT



PROPOSED TYPICAL METER AND PANEL DIAGRAM

FIRE RESISTANCE DIRECTORY (BXRH)



where required for specific edge configuration. For tapered, rounded-edge wallboard, joints covered with fiber tape and joint compound. As an alternate, nom 3/32 in. thick gypsum veneer plaster may be applied to the entire surface of Classified veneer baseboard. Joints reinforced

with beveled, square, or tapered edges. Wallboard nailed 7 in. OC with 5d cement coated nails 1-5/8 in. long, 0.086 in. shank diam and 15/64 in. diam heads. When used in widths of other than 48 in., wallboard is to be installed horizontally.

or Type AG-C.

min), Type B (finish rating 20 min), Type C (finish rating 20 min), Type IP-X2 (finish rating 20 min), Type SCX (finish rating 20 min), Type SHX (finish rating 20 min), Type WRC (finish rating 20 min) or Type WRX (finish rating 20 min).

ish rating 17 min), Type B (finish rating 15 min), Type C (finish rating 15 min) or Type FRP.

CONTINENTAL GYPSUM COMPANY — Type CG1-1 (finish rating 15 min), Type CG3-3 (finish rating 15 min), Type C3-3 (finish rating 15 min), Type CG5-5 (finish rating 15 min), Type CG-C, Type CGT6-6 (finish rating 15 min), Type CGTC-C (finish

G-P GYPSUM CORP, SUB OF GEORGIA-PACIFIC CORP — Types 6, C (finish rating 15 min), Type 5 (finish rating 15 min), Type GPFS1 (finish rating 15 min). JAMES HARDIE GYPSUM INC -Type Max"C".

Fire Resistance Ratings - ANSI/UL 263 (BXUV)-Continued

LAFARGE CORP — Type LGFC3 (finish rating 15 min), Type LGFC-C (finish rating 15 min), LGFC-C/A. NATIONAL GYPSUM CO - Type FSK-1, FSK-G, FSW-1 or

FSW-G (finish rating 15 min), Type FSK or FSW (finish rating 15

PABCO GYPSUM, DIV OF PACIFIC COAST BUILDING PRODUCTS INC —Type PG-1 (finish rating 15 min), PG-3 (finish rating 15 min), PG-C. REPUBLIC GYPSUM CO — Type RG-1 (finish rating 15 min) or Type RG-3 (finish rating 15 min) or Type RG-C. STANDARD GYPSUM L L C — Type SGC-1, SG-C or SGC-G

(finish rating 15 min). TEMPLE-INLAND FÓREST PRODUCTS CORP — Type T (fin-

ish rating 15 min), VPB-Type T (finish rating 15 min) or Type

UNITED STATES GYPSUM CO —Type AR (finish rating 20 min), Type C (finish rating 20 min), Type SCX (finish rating 20 min), Type SHX (finish rating 20 min), Type WRX (finish rating 20 min), Type WRC (finish rating 20 min), Type IP-X2 (finish rating 20 min), Type FRX (finished rating 16 min) or Type B (finish rating 20 min)

YÈSO PANAMERICANO S A DE C V — Type AR (finish rating 20 min), Type C (finish rating 20 min), Type SCX (finish rating 20 min), Type SHX (finish rating 20 min), Type WRX (finish rating 20 min), Type WRC (finish rating 20 min), Type IP-X2 (finish rating 20 min) or Type B (finish rating 20 min.

3A. Wallboard, Gypsum* — (As an alternate to Item 3) — Nom 3/4 in. thick, installed as described in Item 3.

CANADIAN GYPSUM COMPANY —Type AR. UNITED STATES GYPSUM CO —Type AR. YESO PANAMERICANO S A DE C'V — Type AR.

4. Steel Corner Fasteners — (Optional) — For use at wall corners. Channel shaped, 2 in. long by 1 in. high on the back side with two 1/8 in. wide cleats protruding into the 1/2 in. wide channel, fabricated from 24 gauge galv steel. Fasteners applied only to the end or cut edge (not along tapered edges) of the wallboard, no greater than 2 in. from corner of wallboard, max spacing 16 in. OC. Nailed to adjacent stud through tab using one No. 6d cement coated nail per fastener. Corners of wallboard shall be nailed to top and bottom plate using No. 6d cement coated nails.

5. Batts and Blankets* — (Not shown) — Optional-Glass fiber or mineral wool insulation placed in stud cavities.

CERTAINTEED CORP JOHNS MANVILLE INTERNATIONAL INC KNAUF FIBER GLASS GMBH OWENS-CORNING FIBERGLAS CORP ROCK WOOL MANUFACTURING CO —Delta Board. ROXUL INC

THERMAFIBER L L C—Type SAFB. *Bearing the UL Classification Marking

FIRE RESISTANCE DIRECTORY (BXRH)

VIGNOLA SVM

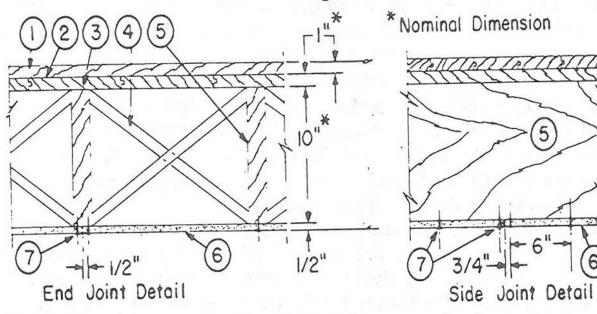
CHECKED BY: **HJM**

UL & SCHEDULES

SVM# 1405-55

Fire Resistance Ratings - ANSI/UL 263 (BXUV)-Continued

Design No. L503 Unrestrained Assembly Rating — 1 Hr. Finish Rating — 19 Min.



1. Finish Flooring - 1 by 4 in. T&G, laid perpendicular to joists; or 19/32 in. thick wood structural panels, min grade "Underlayment" or "Single Floor". Face grain of ply wood or strength axis of panel to be perpendicular to joists with joints staggered.

1A. Alternate Finish Flooring — The alternate finish flooring may consist of one of the following systems:

System No. 1 Finish Flooring — Floor Topping Mixture* — 10-13 gal of water to 170 lbs of floor topping mixture to 595 lbs of sand. Compressive strength 900 psi min. Thickness to be 1 in. min. Building paper (Item 2) optional.

ORTECRETE CORP — Type II. System No. 2

Finish Flooring — Floor Topping Mixture* — Foam concentrate mixed 40:1 by volume with water and expanded at 100 psi through nozzle. Mix at rate of 1.4 cu ft of preformed foam to 94 lbs Type I Portland cement and 300 lbs of sand with 5-1/2 gal of water. Cast density of floor topping mixture 100 plus or minus 5 pcf. Min compressive strength 1000 psi. Thickness 1-1/2 in.

ELASTIZELL CORP OF AMERICA —Type FF. Vapor Barrier — (Optional) — Commercial asphalt saturated felt, 0.030

System No. 3

Finish Flooring — Floor Topping Mixture* — 6.8 gal water to 80 lbs bag of floor topping mixture to 1.9 cu ft of sand. Compressive strength to be 1100 psi min. Thickness to be 1 in. min. Building paper (Item 2)

HACKER INDUSTRIES INC —Firm-Fill, Firm-Fill 2010, Firm-

Fill High Strength, Gyp-Span Radiant.

Floor Mat Materials* — (Optional) — Floor mat material nom 1/4 in. thick adhered to subfloor with Hacker Floor Primer. Primer to be applied to the surface of the mat prior to the placement of a min 1-1/2 in. of floor-topping mixture.

HACKER INDUSTRIES INC —Type Sound-Mat. System No. 4

Floor Topping Mixture* — Foam concentrate mixed 40:1 by volume with water and expanded at 100 psi through a foam nozzle. Mix at rate of 1.4 cu ft of preformed foam to 94 lbs Type I Portland Cement, 62.5 lb of Pea Gravel and 312.5 lbs of sand, with approximately 5.5 gal of water. Cast density of Floor Topping Mixture 100 (+ or -) 5 pcf. Min compressive strength 1000 psi. Thickness 1 in.

LITE-CRETE INC —Type I. Vapor Barrier — (Optional) — Commercial asphalt saturated felt, 0.030

System No. 5

Finish Flooring — Floor Topping Mixture* — Foam concentrate mixed 40:1 by volume with water and expanded at 100 psi through a nozzle. Mix 94 lbs cement, 300 lbs sand, approximately 5.4 gal water, 1.2 cu ft preformed foam, 5 oz Type N fiber and 4 oz Component Z. Cast density of floor topping mixture shall be 105 (+ or -) 5 pcf with a min compressive strength of 1200 psi. Min thickness shall be 3/4 in.

ELASTIZELL CORP OF AMERICA —Type ZC. Subflooring — 15/32 in. thick plywood min grade "C-D" Exposure 1 or "C-D" with exterior glue conforming to PS 1-83 specifications; or nonveneer APA rated sheathing panels per APA specifications PRP-108. Long dimension of panel (strength axis) or face grain of plywood to be perpendicular to the joists with joints staggered.

System No.6 Finish Flooring — Floor Topping Mixture* — 5 to 8 gal of water to 80 lbs of floor topping mixture to 2.1 cu ft of sand. Min compressive strength 1000 psi. Min thickness of 1 in.

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Fire Resistance Ratings - ANSI/UL 263 (BXUV)-Continued

MAGGNUM CORP — Types UQF-A, UQF-Super Blend, UQF-Plus 2000.

System No. 7

Finish Flooring — Floor Topping Mixture* — 4 to 7 gal of water mixed with 80 lbs of floor topping mixture and 1.4 to 1.9 cu ft of sand. Compressive strength to be 1200 psi min. Min thickness to be 1 in. Building paper (Item 2) optional

RAPID FLOOR SYSTEMS —Types RF, RFP or RFU Floor Mat Materials* — (Optional)Floor mat material nom 1/4 in. thick adhered to subfloor with Maxxon Floor Primer. Primer to be applied over the surface of the mat prior to lath placement.

MAXXON CORP — Type Acousti-Mat. Metal lath — For use with floor mat material, 3/8 in. expanded galvanized steel diamond mesh, 3.4 lbs/sq yd placed over the floor mat material. Floor topping thickness a nom 1 in. over the floor mat. Alternate Floor Mat Materials* (Optional) — Floor mat material nom 1/4 in. thick loose laid over the subfloor. Maxxon Floor Primer to be applied to the surface of the mat prior to the floor topping placement. Floor topping thickness a min 1 in. over the floor mat.

MAXXON CORP — Type Acousti-Mat II. System No. 8

Finish Flooring-Floor Topping Mixture* — 3 to 7 gal of water mixed with 80 lbs of floor topping mixture and 1.0 to 2.1 cu ft of sand. Compressive strength to be 1000 psi min. Min thickness to be 1 in.

MAXXON CORP — Type D-C, GC, GC 2000, L-R or T-F. Floor Mat Materials* — (Optional) — Floor mat material nom 1/4 in. thick adhered to subfloor with Maxxon Floor Primer. Primer to be applied to the surface of the mat prior to lath placement.

MAXXON CORP — Type Acousti-Mat. Metal Lath — For use with floor mat material, 3/8 in. expanded galvanized steel diamond mesh, 3.4 lbs/sq yd placed over the floor mat material. Floor topping thickness a nom 1 in. over the floor mat. Alternate Floor Mat Materials* (Optional) — Floor mat material nom 1/4 in. thick loose laid over the subfloor. Maxxon Floor Primer to be applied to the surface of the mat prior to the floor topping placement. Floor topping thickness a min 1 in. over the floor mat.

MAXXON CORP — Type Acousti-Mat II. System No. 9 Finish Floor — Mineral and Fiber board*, sizes ranging from 3 ft. by 4 ft. to 8 ft. by 12 ft., by min. 1/2 in. thick. All joints to be staggered a

min. of 12 in. OC with adjacent sub-floor joints. **HOMASOTE CO**—Type 440-32 Mineral and Fiber Board 2. Building Paper — (Optional) — Commercial rosin-sized, 0.010 in.

3. Subflooring — 1 by 6 in. T&G, fastened diagonally to joists; or 15/32 in. thick plywood; or 7/16 in. thick oriented strand board (OSB) wood structural panels, min grade "C-D" or "Sheathing". With alternate finish flooring system using floor topping mixture (Item 1A), min thickness of OSB or sheathing panels is 15/32 in. Face grain of plywood or strength axis of panel to be perpendicular to joists with joints stag-

4. Cross Bridging — 1 by 3 in.

5. Wood Joists — 2 by 10 in. spaced 16 in. OC, firestopped. 6. Wallboard, Gypsum* — 1/2 in. thick; installed with long dimension

perpendicular to joists and secured with 5d cement coated nails spaced 6 in. OC Nails spaced 3/4 and 1/2 in. from side and end joints, respec-

AMERICAN GYPSUM CO — Type AG-C or AGX-6. CELOTEX CORP — Type B, C, FRP or SF3. CONTINENTAL GYPSUM COMPANY — Types CG1-1, CG-3, CG3-3, CG5-5, CG-C, CGTC-C. G-P GYPSUM CORP, SUB OF GEORGIA-PACIFIC CORP — Types 5, C, GPFS1. JAMES HARDIE GYPSUM INC —Type Max"C". LAFARGE GYPSUM, DIV OF LAFARGE CORP — Types LGFC3, LGFC-C. NATIONAL GYPSUM CO — Types FSK-1, FSK-G, FSW-1, FSW-G. PABCO GYPSUM, DIV OF PACIFIC COAST BUILDING PRODUCTS INC —Types PG-1, PG-3, PG-C. REPUBLIC GYPSUM CO —Type RG-C, RG-1 or RG-3. STANDARD GYPSUM L L C —Type SGC-1, SG-C or SGC-G. TEMPLE-INLAND FOREST PRODUCTS CORP — Type T, TG-C or VPB-Type T.

7. Finishing System — Paper tape embedded in cementitious compound over joints and exposed nail heads covered with compound, with edges of compound feathered out. As an alternate, nom 3/32 in. thick gyp704

NATIONAL GYPSUM CO —Type FR or WR (finish rating 20

2. Joints — Exposed or covered with fiber tape and joint compound, except

AMERICAN GYPSUM CO — Type AGX-6 (finish rating 15 min)

CANADIAN GYPSUM COMPANY — Type AR (finish rating 20

rating 15 min).

Finish Rating — See Item 3.

1. Nailheads — Exposed or covered with joint compound.

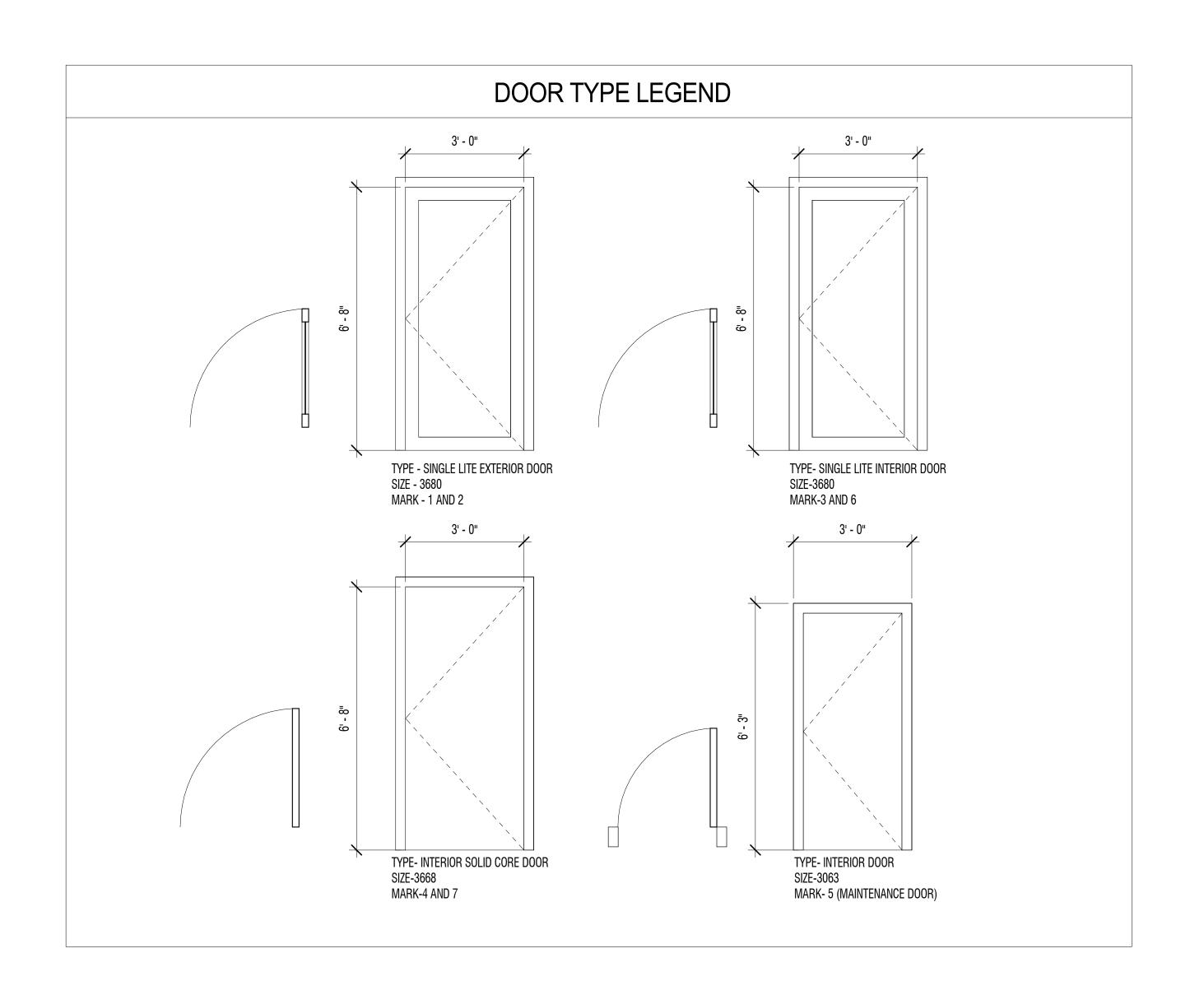
3. Wallboard, Gypsum* — 1/2 in. thick wallboard, paper or vinyl surfaced

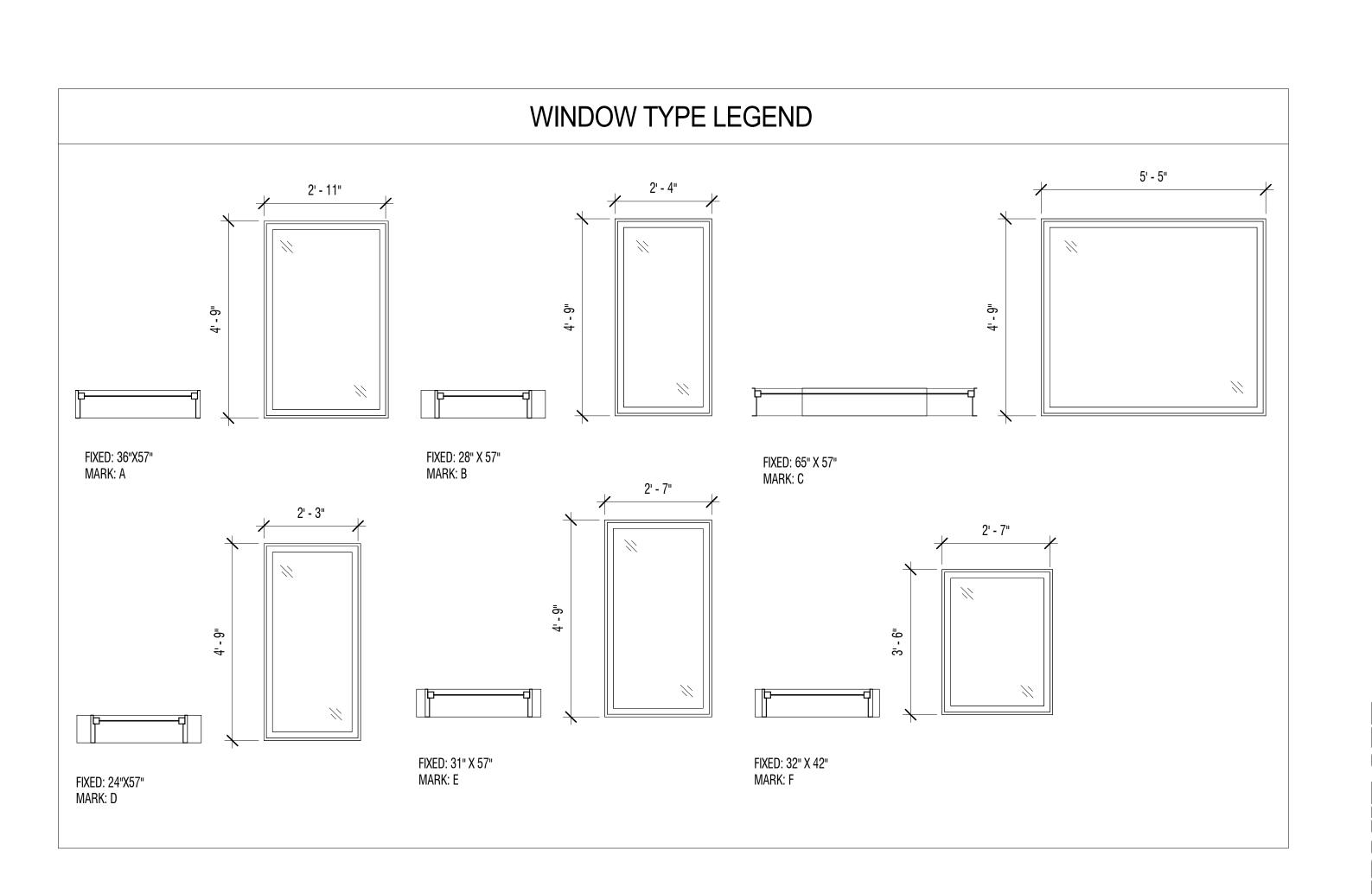
CELOTEX CORP — Type SF3 (finish rating 15 min), Type A (fin-

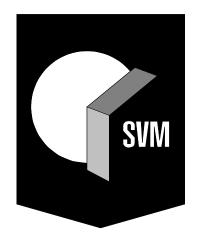
LAFARGE GYPSUM, DIV OF

	DOOR SCHEDULE											
DOOR PROP ERTIE S		DO(PROPE							FRAME PROPERTIES			
Mark	Location	Width	Height	Thickness	Туре	Material	Fire Rating	Threshold	Frame Type	HDWR	Sign	Comments
1	Entry/Exit	3' - 0"	6' - 8"	0' - 2"	A	FIBERGLASS	N/A	Aluminum	WOOD	A	NO	SINGLE LITE FULL GLASS
2	Entry/Exit	3' - 0"	6' - 8"	0' - 2"	A	FIBERGLASS	N/A	Aluminum	WOOD	A	NO	SINGLE LITE FULL GLASS
3	Office	2' - 9 7/8"	6' - 7 1/2"		В	FIBERGLASS	N/A	MARBLE	WOOD	В	NO	SINGLE LITE FULL GLASS
4	Bathroom	3' - 0"	6' - 8"	0' - 2"	С	MASONITE	N/A	MARBLE	WOOD	С	YES	
5		2' - 6"	6' - 0"	0' - 2"					WOOD			
6	Office	2' - 6 1/16"	7' - 8 1/4"		В	FIBERGLASS	N/A	MARBLE	WOOD	В	NO	SINGLE LITE FULL GLASS
7	Bathroom	3' - 0"	6' - 8"	0' - 2"	С	MASONITE	N/A	MARBLE		С	YES	

WINDOW SCHEDULE								
		PERTIES	Head			Sill		
Mark	Height	Width	Height	TRIM	Sill Interior	Exterior	Frame	Comments
A	4' - 9"	3' - 0"	7' - 9"	CMU	Wood	Stucco	vinyl	
A	4' - 9"	3' - 0"	7' - 9"	CMU	Wood	Stucco	vinyl	
D	3' - 6"	2' - 8"	7' - 4 3/4"	CMU	Wood	Stucco	vinyl	
D	3' - 6"	2' - 8"	7' - 4 27/32"	CMU	Wood	Stucco	vinyl	
Е	3' - 6"	2' - 8"	7' - 4 3/4"	CMU	Wood	Stucco	vinyl	
E	3' - 6"	2' - 8"	7' - 4 3/4"	CMU	Wood	Stucco	vinyl	
A	4' - 9"	3' - 0"	7' - 9"	WOOD	Wood	Stucco	vinyl	
A	4' - 9"	3' - 0"	7' - 9"	WOOD	Wood	Stucco	vinyl	
A	4' - 9"	3' - 0"	7' - 9"	WOOD	Wood	Stucco	vinyl	
A	4' - 9"	3' - 0"	7' - 9"	WOOD	Wood	Stucco	vinyl	
A	4' - 9"	3' - 0"	7' - 9"	WOOD	Wood	Stucco	vinyl	
A	4' - 9"	3' - 0"	7' - 9"	WOOD	Wood	Stucco	vinyl	
В	4' - 9"	2' - 4"	7' - 5"	CMU	Wood	Stucco	vinyl	
В	4' - 9"	2' - 4"	7' - 5"	CMU	Wood	Stucco	vinyl	
<u> </u>	4' - 9"	5' - 5"	7' - 5"	CMU	Wood	Stucco	vinyl	
В	4' - 9"	2' - 4"	7' - 5"	WOOD	Wood	Stucco	vinyl	
В	4' - 9"	2' - 4"	7' - 5"	WOOD	Wood	Stucco	vinyl	
3	4' - 9"	2' - 4"	7' - 5"	WOOD	Wood	Stucco	vinyl	
В	4' - 9"	2' - 4"	7' - 5"	WOOD	Wood	Stucco	vinyl	
E	4' - 9"	2' - 7"	7' - 5"	WOOD	Wood	Stucco	vinyl	
3	4' - 9"	2' - 7"	7' - 5"	WOOD	Wood	Stucco	vinyl	
3	4' - 9"	2' - 4"	7' - 5"	WOOD	Wood	Stucco	vinyl	
3	4' - 9"	2' - 4"	7' - 5"	CMU	Wood	Stucco	vinyl	
3	4' - 9"	2' - 4"	7' - 5"	CMU	Wood	Stucco	vinyl	
3	4' - 9"	2' - 4"	7' - 5"	CMU	Wood	Stucco	vinyl	
3	4' - 9"	2' - 4"	7' - 5"	CMU	Wood	Stucco	vinyl	
3	4' - 9"	2' - 4"	7' - 5"	CMU	Wood	Stucco	vinyl	
3	4' - 9"	2' - 7"	7' - 5"	CMU	Wood	Stucco	vinyl	
)	4' - 9"	2' - 4"	7' - 5"	CMU	Wood	Stucco	vinyl	







SKINNER VIGNOLA MCLEAN, INC.

CHECKED BY: **HJM** PERMIT SVM# 1405-55



SVM | P.352.378.4400 F.352.377.5378

PERMIT

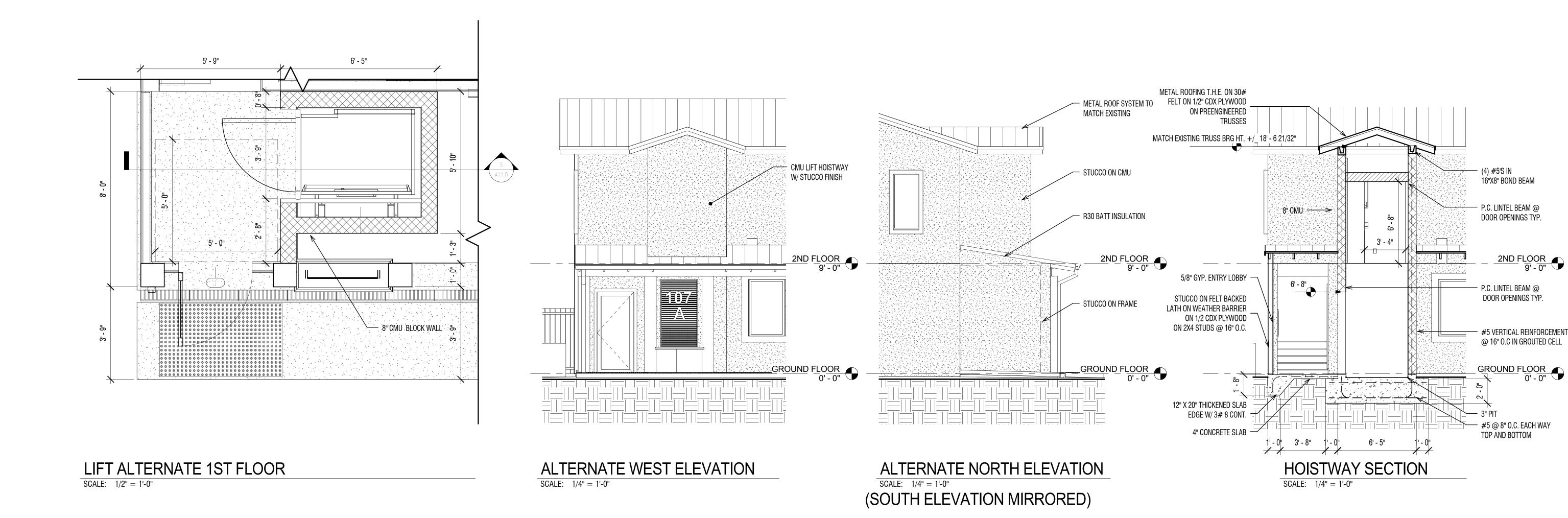
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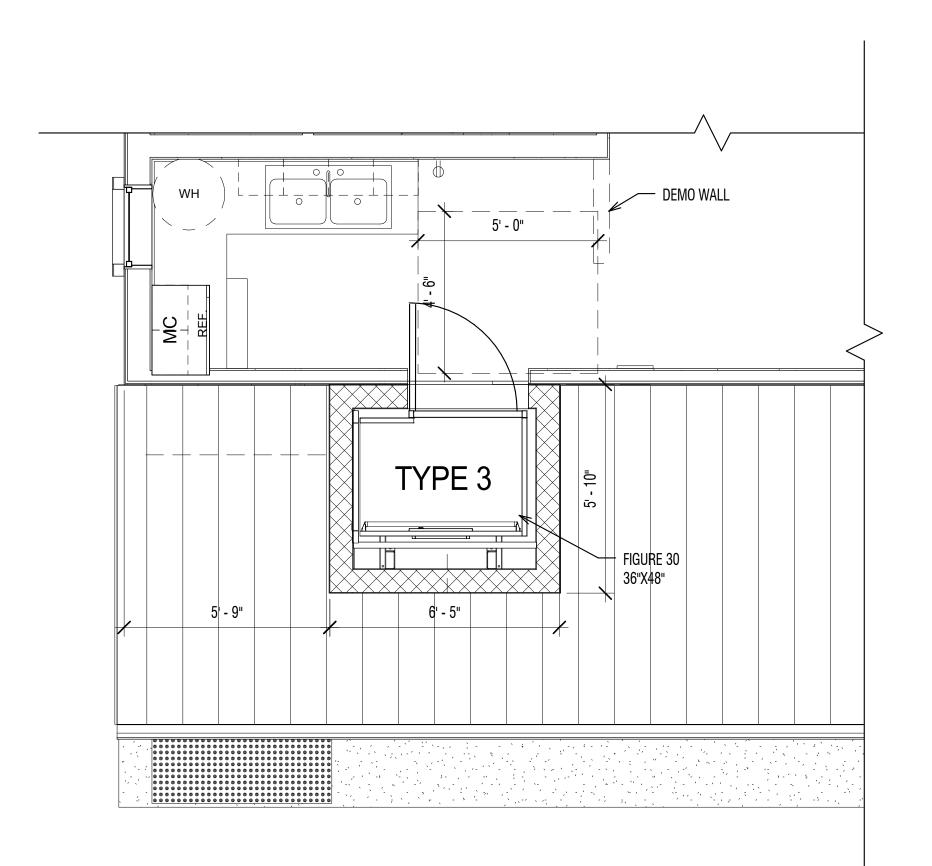


SKINNER VIGNOLA MCLEAN, INC.

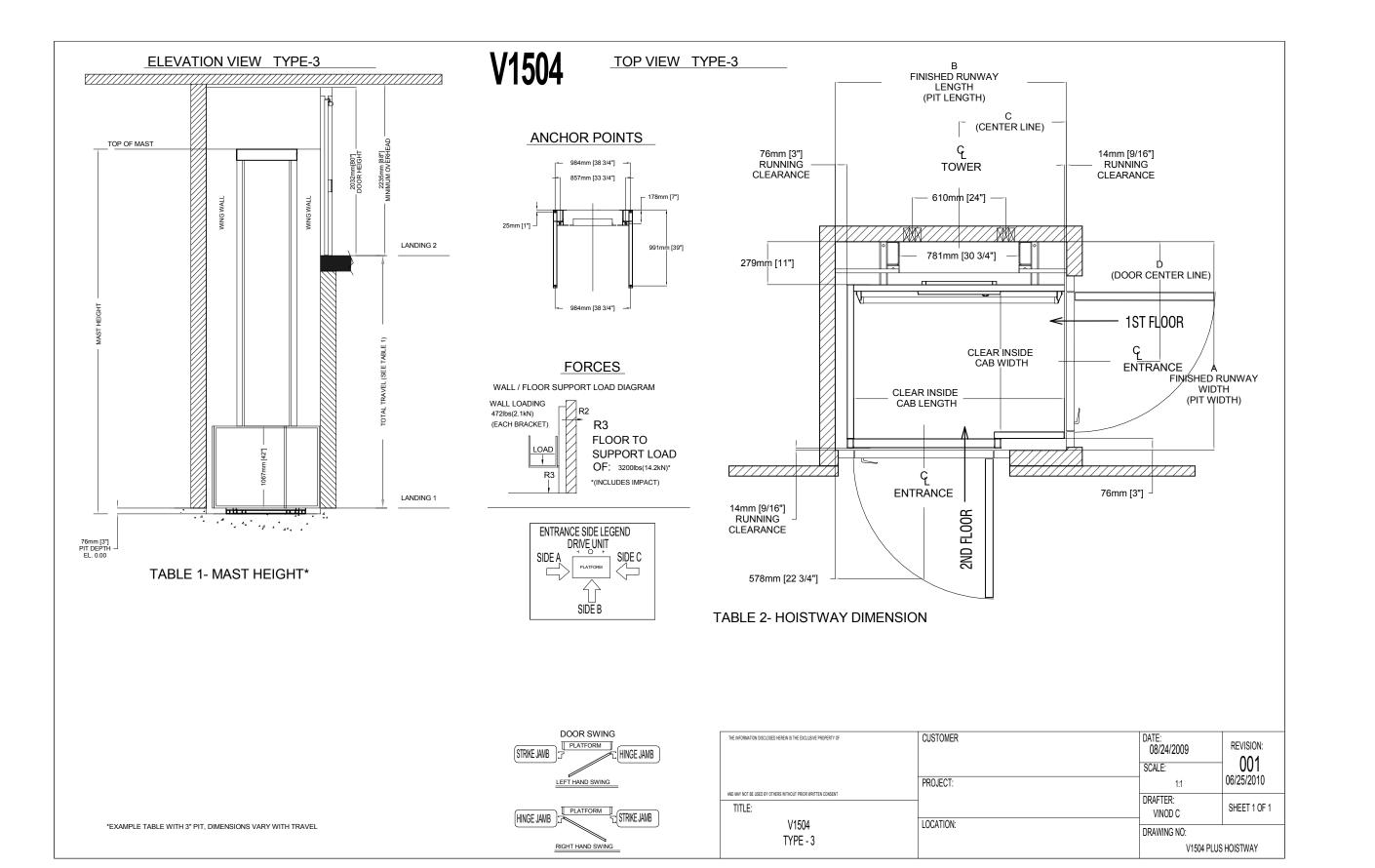
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CHECKED BY: **HJM** ALTERNATE 1 SVM# 1405-55





LIFT ALTERNATE 2ND FLOOR SCALE: 3/8" = 1'-0"



LIFT DETAILS SCALE: 1/4" = 1'-0"