CLEARWATER FIRE STATION #48

Issue: Accessible toilet in firefighters’ living quarters.

Analysis: The applicant is requesting a waiver from providing an accessible toilet in the firefighters’ living quarters. The project is an existing 7,952 gross square foot building, and during the renovation, the 4,172 square foot living quarters will be upgraded and the engine bays reduced by 290 gross square feet. Existing toilet rooms are not accessible, and during the alteration two toilet rooms and showers will be made accessible. The project will cost $600,000.

Project Progress:

The project is under design.

Items to be Waived:

One accessible toilet room, as required by Section 11-4.1.6(3)(e)(iii):

11-4.1.6(3)(e)(iii): When existing toilet or bathing facilities are being altered and are not made accessible, signage complying with Sections 11-4.30.1, 11-4.30.2, 11-4.30.3, 11-4.30.5 and 11-4.30.7 shall be provided indicating the location of the nearest accessible toilet or bathing facility within the facility.

Waiver Criteria: There is no specific guidance for a waiver of this requirement in the code. The Commission’s current rule, authorized in Section 553.512, Florida Statutes, provides criteria for granting waivers and allows consideration of unnecessary or extreme hardship to the applicant if the specific requirements were imposed.
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: Interior Renovation to Fire Station #48

Address: Clearwater, Florida

____________________________________________________________________

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: Alex Plisko, Jr., Plisko Architecture, P.A.

Applicant's Address: 800 Drew Street, Clearwater, FL 33755

Applicant's Telephone: 727-442-7200 FAX: 727-447-6914

Applicant’s E-mail Address: alexplisko@verizon.net

Relationship to Owner: Architect

Owner's Name: Chief Robert Weiss, City of Clearwater Fire Department

Owner's Address: 610 Franklin Street, Clearwater, FL 33756

Owner's Telephone: 727-562-4327 FAX: 727-562-4328

Owner’s E-mail Address: Robert.Weiss@myclearwater.com

Signature of Owner: __________________________

Contact Person: Chief Robert Weiss

Contact Person's Telephone: 727-562-4327 E-mail Address: Robert.Weiss@myclearwater.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.

[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.)

Existing fire station with three engine bays and living quarters, total building area 7,952 gross square feet, with proposed interior renovation to living quarters of 4,172 gross square feet, plus reducing engine bays by 290 gross square feet.

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

Estimated renovation cost: $600,000.00

6. Project Status: Please check the phase of construction that best describes your project at the time of this application. Describe status.

[X] Under Design [ ] Under Construction*

[ ] In Plan Review [ ] Completed*

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

The existing fire station does not have accessible restrooms. The renovation proposes to provide two accessible restrooms, including handicapped showers. The code calls for all new restrooms to be accessible. Because of limited space, the unisex restroom with lavatory in the water closet located in the dormitory is for convenience only, and not required by code; therefore, it is proposed not to be handicap accessible. Presently, none of the ten firefighters who crew this fire station are handicapped.
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 Accessible Buildings: New Construction, Paragraph (11) Toilet facilities must comply with Section 11-4.22

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 fire station was constructed in 1978 and has not been upgraded to meet the current requirements of the Fire Department. The City of Clearwater does not have the funding to replace this fire station. The floor area cannot be increased, and in addition, the existing structural members limit the renovations.

[ ] 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. 

b. 

c. 

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.

   [Signature]
   
   Alex Plisko, Jr.
   
   Printed Name

   **Phone number:** 727-442-7200

   (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 25th day of March, 2008

Signature

Alex Plisko, Jr.
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. Section 11.4.1.3 Accessible Buildings: New Construction, Paragraph (11) Toilet facilities must comply with Section 11-4.22.

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 [X] No Cost of Construction 

Comments/Recommendation  No objection  

Jurisdiction  CITY OF CLEARWATER  

Building Official or Designee  Kevin Harrington  

Signature  KEVIN GARRIOTT  

Printed Name  KEVIN GARRIOTT  

Certification Number  BU 857  

Telephone/FAX  813-542-4565  

Address: 100 S. MYRTLE AVE., CLEARWATER, FLORIDA 33754