

**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. X 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. X 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. X 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: Nancy Dance Studio, Inc.

Address: 1521 Penman Road, Jacksonville Beach, FL 32250

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: Nancy Tuttle

Applicant's Address: 520 Oleander Street, Neptune Beach, FL 32266

Applicant's Telephone: (904) 446-0041 FAX: (904) 249-6937

Applicant's E-mail Address: ntuttle2@bellsouth.net

Relationship to Owner: Same

Owner's/Tenant's Name: Same

Owner's Address: Same

Owner's Telephone: Same FAX Same

Owner's E-mail Address: Same

Signature of Owner: Nancy D Tuttle

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

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.)

66' x 75' (4950 SF) metal building with CMU fascade on front only. Mezzanine level is 36' x 75' (2700 SF). Current use is retail/storage on the first floor, with storage on mezzanine level. Proposed use is a dance studio with two large studios on first floor, common area and storage on first, and a dance studio and common area and storage on mezzanine.

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

Estimated construction cost of all alterations is \$219,000

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 request has been referred to the Commission by the local Building Official, Jon Hayes of the City of Jacksonville Beach, after a waiver of the requirement for vertical ADA access was requested by the Owner/Applicant.

7. Requirements requested to be waived. Please reference the applicable section of Florida law. Only Florida-specific accessibility requirements may be waived.

Issue

1. 553.509 Vertical accessibility.—

(1) This part and the Americans with Disabilities Act Standards for Accessible Design do not relieve the owner of any building, structure, or facility governed by this part from the duty to provide vertical accessibility to all levels above and below the occupiable grade level, regardless of whether the standards require an elevator to be installed in such building, structure, or facility, except for:

- (a) Elevator pits, elevator penthouses, mechanical rooms, piping or equipment catwalks, and automobile lubrication and maintenance pits and platforms.
 - (b) Unoccupiable spaces, such as rooms, enclosed spaces, and storage spaces that are not designed for human occupancy, for public accommodations, or for work areas.
 - (c) Occupiable spaces and rooms that are not open to the public and that house no more than five persons, including, but not limited to, equipment control rooms and projection booths.
 - (d) Theaters, concert halls, and stadiums, or other large assembly areas that have stadium-style seating or tiered seating if ss. 221 and 802 of the standards are met.
 - (e) All play and recreation areas if the requirements of chapter 10 of the standards are met.
 - (f) All employee areas as exempted in s. 203.9 of the standards.
 - (g) Facilities, sites, and spaces exempted by s. 203 of the standards.
- (2) However, buildings, structures, and facilities must, as a minimum, comply with the Americans with Disabilities Act Standards for Accessible Design.

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.

Waiver is being sought as the current law presents an unnecessary hardship to the Applicant /Owner is the alteration of this facility. All uses of the business are available to every user on the first floor, without restriction. Proposed uses on the mezzanine are duplicates of those on the first floor, and will not require access by those physically unable to use the existing stairs for vertical access.

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

The cost of installing the lift exceeds 20% of the cost of the improvements to the intended service area. From the 2010 FBC Accessibility Code:

202.4.1 Disproportionate Cost. Alterations made to provide an accessible path of travel to the altered area will be deemed disproportionate to the overall alteration when the cost exceeds 20% of the cost of the alteration to the primary function area. Costs that may be counted as expenditures required to provide an accessible path of travel may include: (i) costs associated with providing an accessible entrance and an accessible route to the altered area; (ii) costs associated with making restrooms accessible, such as installing grab bars, enlarging toilet stalls, insulating pipes, or installing accessible faucet controls; (iii) costs associated with providing accessible telephones, such as relocating the telephone to an accessible height, installing amplification devices, or installing a text telephone (TTY); (iv) costs associated with relocating an inaccessible drinking fountains.

The proposed alterations include accessibility improvements to the existing stairwell (which will have to be moved if this waiver is not granted, and which cost has been included in the attached estimates), including handrails, accessible doors, and route improvements. This stairwell provides vertical access to the proposed uses upstairs as would the lift. The lowest estimate for the cost of the proposed improvements, including the proposed lift is \$83,000 (Tuttle Home Improvements), while the lowest installed cost for the proposed lift is \$22,500 (Tuttle Home Improvements). As a percentage of overall cost, the proposed platform lift is 27.1%, which is in excess of the 20% disproportionate Cost section above.

[] 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. See attached estimate from Tuttle Home Improvements for second floor costs, including proposed lift purchase and installation._____

b. See attached estimate from S.E. Jonsson Construction, Inc. for second floor costs, including proposed lift purchase and installation._____

c. See attached estimates from two lift providers for the purchase of platform lifts complying with the requirements of the various noted Sections_____

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.

See attached letter from the Project Architect in lieu of the Certification of Licensed Design Professional below. _____

Signature

Printed Name

Phone number _____

(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 25 day of April, 2013

Nancy H. Tuttle

Signature

Nancy H. Tuttle

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. FBC-Accessibility 201.1.1
- b. Commission has jurisdiction on DISPROPORTIONATE COST
- c. MEETS ADA STANDARDS OF LESS THAN 3000 sq. FT

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 THE ASSOCIATED COST IS CLEARLY DISPROPORTIONATE AND ACCESSIBILITY IMPROVEMENTS ARE BEING CONDUCTED ON THE FIRST LEVEL AS WELL AS FIRE PROTECTION SYSTEMS.

Jurisdiction CITY OF JACKSONVILLE BEACH

Building Official or Designee [Signature]
Signature

JONATHAN C. HAYS
Printed Name

BU-964
Certification Number

904.247.6235 / 904.247.6109
Telephone/FAX

building@jaxbcfl.net
Email Address

Address: 11 N. 3RD ST JACKSONVILLE BEACH FL 32230

Certification of Licensed Design Professional for Replicated Designs to be Placed on Consent Agenda

Note: Fill out pages _____ only for cases in which design documents are duplicates of previously approved waivers and the project can be placed on a Consent Agenda.

I, _____, a licensed architect/engineer in the state of Florida, whose Florida license number is _____, hereby state as follows:

1. I am the architect/engineer of record for the project known as (name of project) _____, for which the Owner seeks a waiver of one or more accessibility requirements in an application to which this Certification is attached.

2. I hereby certify that to the best of my knowledge and belief to the Florida Building Commission that the design documents for the (insert project described in paragraph 1 above) _____ are the same as the design documents previously submitted to the Commission and referenced in paragraph 3 below, except that the two projects are built or to be built on different parcels of land at different locations.

3. The licensed design professional of record (identify the licensed design professional of record), _____, prepared the design documents for the project known as _____, for which the majority of the Accessibility Advisory Council recommended approval and the Commission granted a waiver of one or more accessibility requirements in Final Order No. _____.

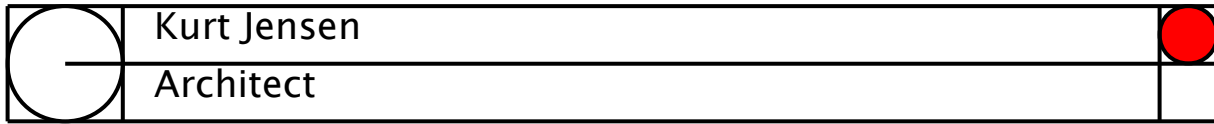
Printed Name: _____ Affix certification seal below:

Address: _____

Telephone: _____

Fax: _____

E-Mail Address: _____



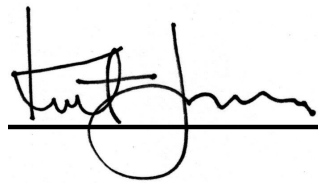
April 25, 2013

Comments Concerning Alteration of Existing Building for Nancy Dance Studio

The owners of Nancy Dance Studio have acquired an existing commercial building at 1521 Penman Road in Jacksonville Beach, Florida. They wish to alter the building to make it suitable for their business as a dance instruction studio and I have prepared design documents for permitting and performing the alterations.

The owners informed me that the cost of installing the wheelchair lift shown on the drawings was a problem for them financially. I asked them for the overall cost of the improvements to the second floor and the costs associated with installing the lift. In response to the information they gave me I advised them that the installation of the lift was a disproportionate cost and they could apply for a waiver per 202.4.1 of the Florida Accessibility Code.

Sincerely



Kurt Jensen, Architect

S. E. Jonsson Construction Inc.

8 Starfish place
 Ponte Vedra bch.,
 FL 32082
 CGC-1506390

Estimate

Date	Estimate #
4/23/2013	347

Name / Address
Nancy dance Studios 1951 Penman road Jacksonville Beach, Fla 32233

Project
New Studio @nd floor

Description	Total
New 2nd floor build out For the NDS Studios AT 1951 Penman road , Jax Bch	86,400.00
Second fl;oor buildout to include all of the following: Moving of the existing stairwell to accomodate the elevator Installation of the elevato (vertical lift) \$ 14,000 Sprinkler system for the new buil out area Electric for the elevator and affected area to code Framing of the area A/C Plumbing for the area for required code drywall Flooring Paint Amount of the project to include the alteration to accomodate the elevator (\$25,150) Out-of-state sale, exempt from sales tax	0.00
Subtotal \$86,400.00	
Total \$86,400.00	

Tuttle Home Improvements, Inc
Doug Tuttle, Owner
520 Oleander Street
Neptune Beach, FL 32266
904-446-0051

PROPOSAL:

We propose to furnish material and labor necessary for the 2nd story of new NancyDance Studio, located at 1951 Penman Road. All material is guaranteed to be as specified and all work will be completed in a workmanlike manner according to current codes. Any alteration or deviation from the work as listed below involving additional costs will be executed only upon receipt of a written change order.

- Installation of vertical lift and shaft
- Relocating the existing stairs to accommodate the vertical lift specifications.
- Electrical for all of 2nd story including vertical lift.
- Plumbing for upstairs bathroom
- Sprinkler system upstairs
- HVAC
- All walls, flooring, acoustical ceilings and all trim finishes, caulk and painting.

Total Cost: \$83,000.00

Breakdown Cost of Vertical Lift and Installation:

Cost of vertical lift and Installation by licensed contractor	\$14,000.00
Build shaft for lift	\$4,000.00
Approximate Electrical Cost	\$1500.00
Relocating existing Stairs	\$3000.00
Total Cost:	\$22,500.00

Acceptance of Proposal: By signing below, you are authorizing us to proceed with the above work and agreeing to the payment terms and conditions.

Signature

Date

Jacksonville Elevator Company

Jacksonville Elevator Company

7167 Jones Rd
Jax, FL 32219

(904)713-9944
jaelco@bellsouth.net

Estimate

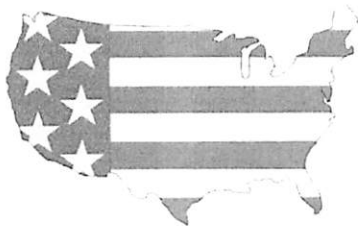
Date	Estimate #
04/25/2013	1317
	Exp. Date

Address
Nancydance Studio

Date	Activity	Quantity	Rate	Amount
04/25/2013	Install 1 vertical ball screw wheelchair lift inside the building with an approx rise of 11 ft including state permits and a QEI final inspection	1	17,500.00	17,500.00
			Total	\$17,500.00

Accepted By _____

Accepted Date _____



KIM-N-JAY MEDICAL MOBILITY, DBA

AMERICAN MEDICAL MOBILITY

3716 NW 97th Boulevard, Gainesville, FL 32606
 Telephone: (352) 331-6565 Facsimile: (352) 331-6595
 www.americanmedicalmobility.com

Billing Name / Address:
Doug Tuttle
 Jacksonville, FL
 ntuttle2@bellsouth.net

Delivery Name / Address:

Date: April 29, 2013
Home Phone: (904) 446-0051
Cell Phone:
Alt. Phone:

Rep:	Location:	Item:	Unit Serial Number:
Val	Gainesville	Harmar CPL1000	N/A

Qty		Description:	Unit Price	Total
Non Tax	Tax			
	1	Harmar CPL1000 commercial vertical platform lift, includes installation* *Since we have not evaluated the home we are unable to provide an exact quote. Quote is for the lift unit only and installing the lift unit. Does not include parts or labor for accessories such as call/send button or other necessities such as concrete, additional wiring etc.	13,000.00	13,000.00

Retail Sale:
 Warranties on above delivered medical equipment are for the period extended by the manufacturer, and are for parts only, labor excluded. Bath item sales are final and cannot be returned. Qualifying returns must be made within 2 days of purchase and are subject to a 15% restocking fee.

All equipment carries a parts only warranty. Labor is not covered by the Mfg., insurance carrier(s), or AMM during the warranty period. Insurance carrier(s) typically cover labor on replacement parts after the warranty period is over. Signing below acknowledges receipt of warranty coverage guidelines.

Tax Rate	Subtotal	13,000.00
6.00%	Tax	780.00
	Total Invoice	13,780.00
	Deposit	
	Balance Due	13,780.00

Central Abuse Registry 800-962-2873

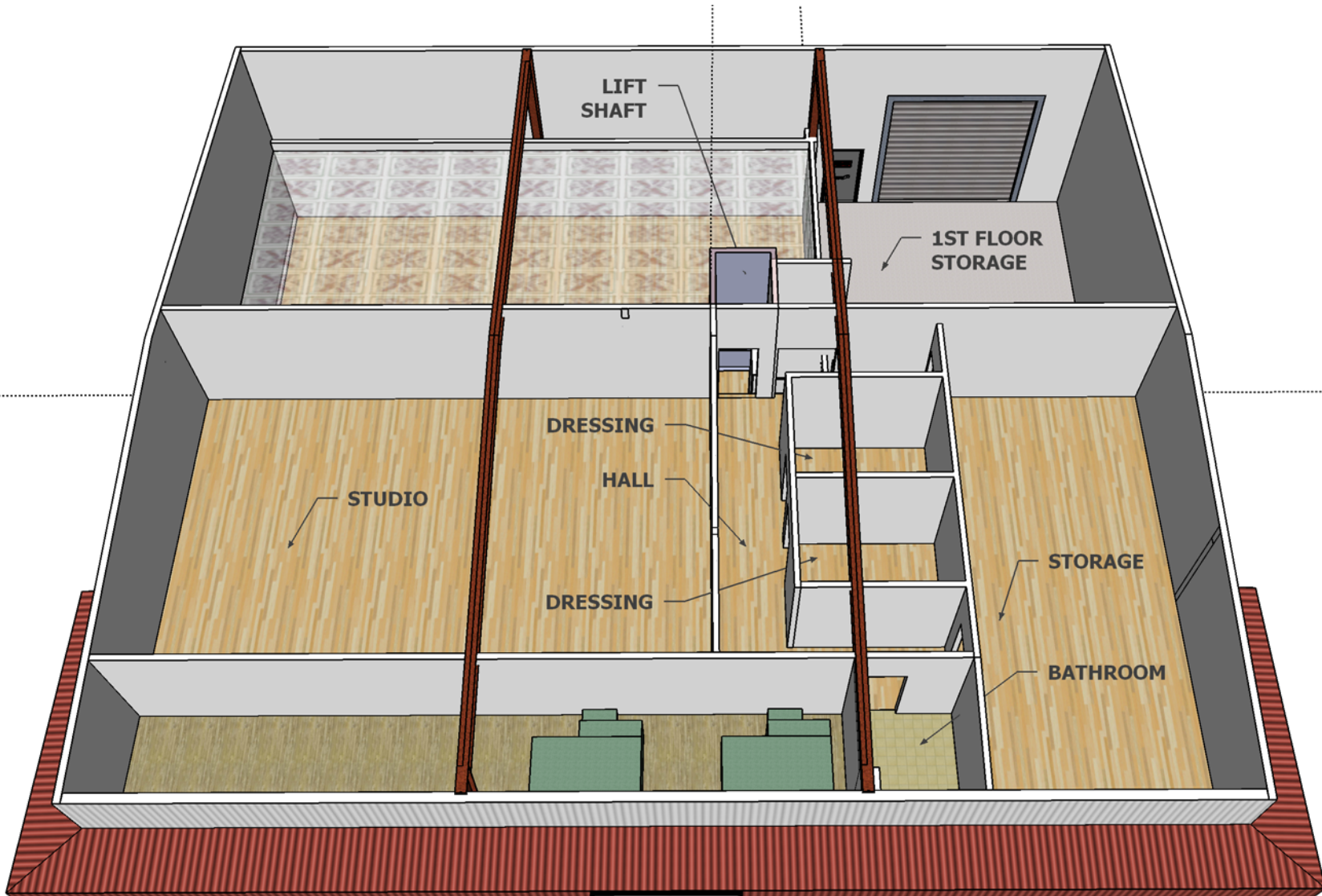
Consumer Comp 800-419-3456

In the event the balance of this invoice is submitted to collection, the Plaintiff shall be entitled to a reasonable attorney's fee and costs. Venue in any legal proceeding concerning this matter shall be Alachua County, FL, and the laws of the state of Florida shall govern. Signing below acknowledges receipt and delivery of product by customer or their agent or assigns.

Signature: _____

Date: _____

NANCY DANCE STUDIOS, INC.
PROPOSED IMPROVEMENTS



Proposed Lift to mezzanine level shown in pink

**NANCY DANCE STUDIOS, INC.
PROPOSED IMPROVEMENTS**



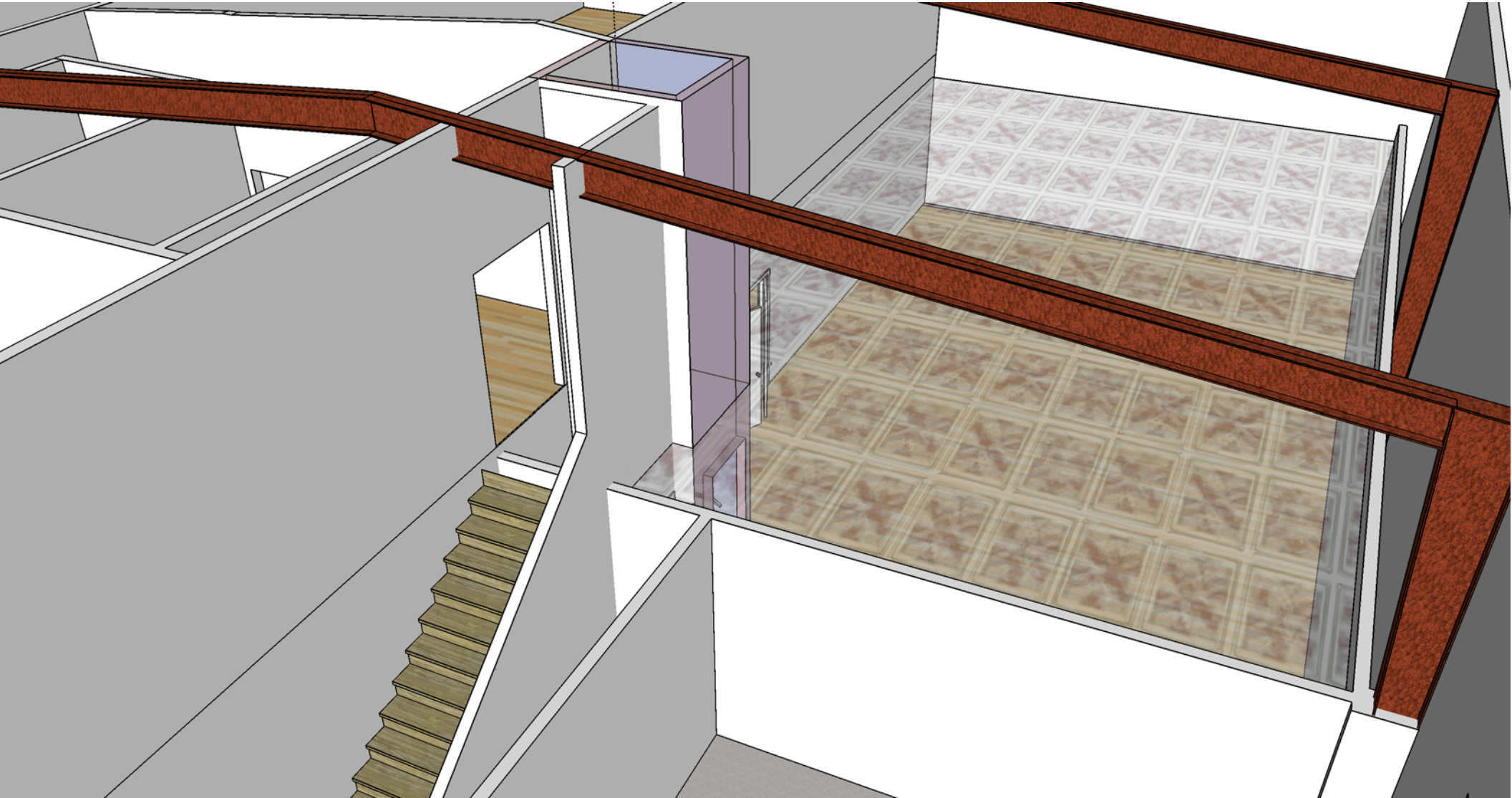
Proposed Lift to mezzanine level shown in pink

**NANCY DANCE STUDIOS, INC.
PROPOSED IMPROVEMENTS**

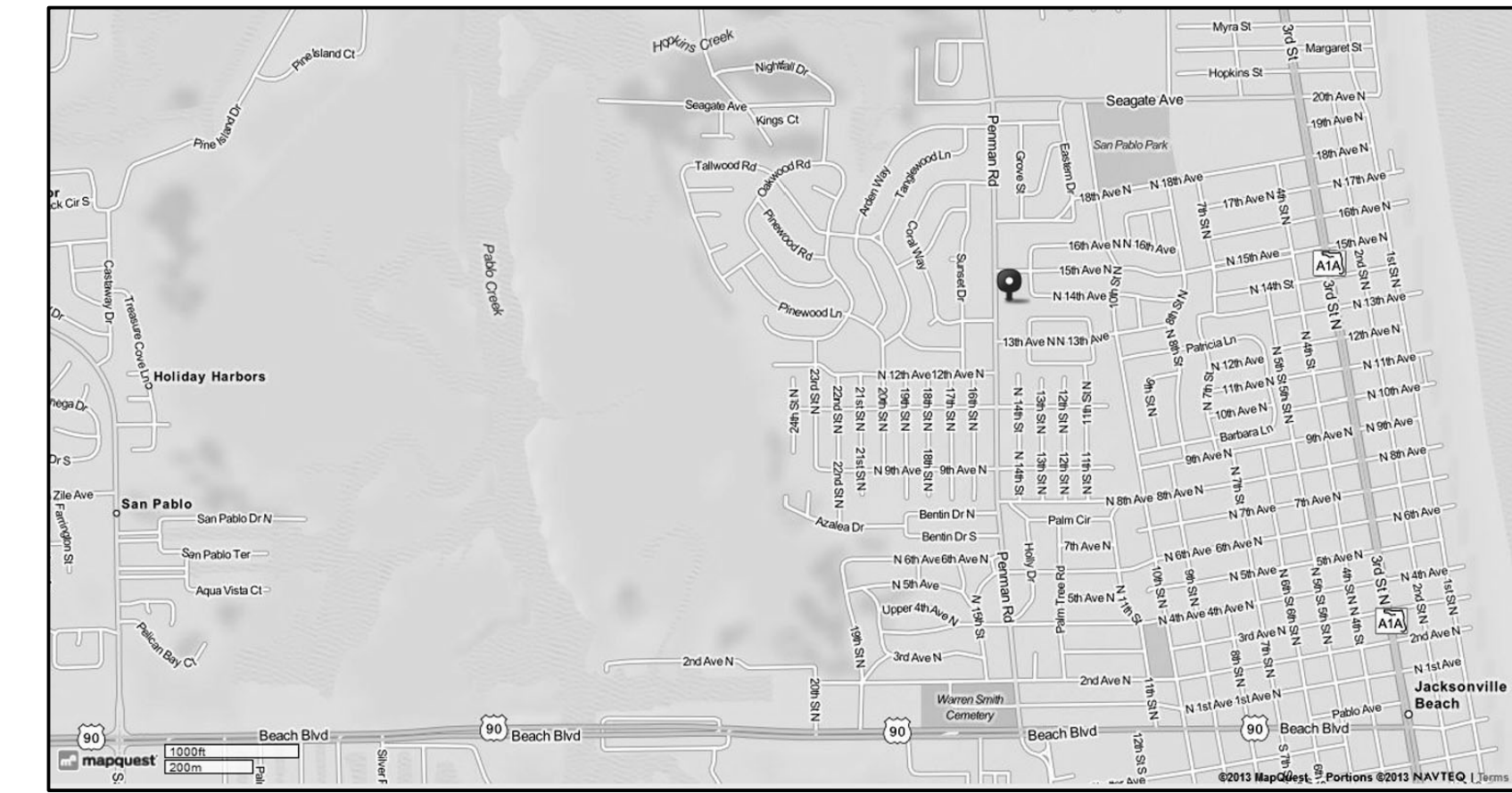
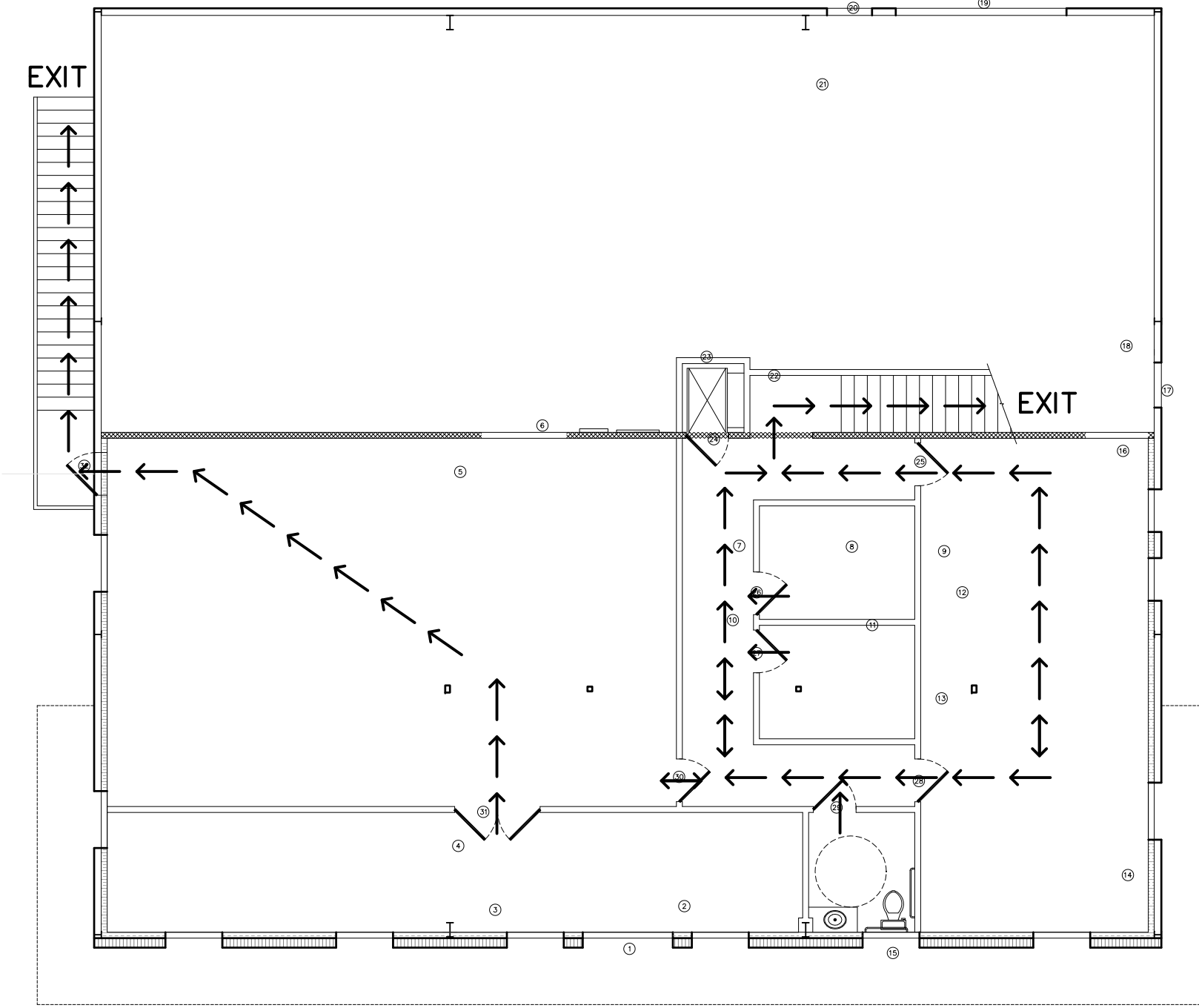
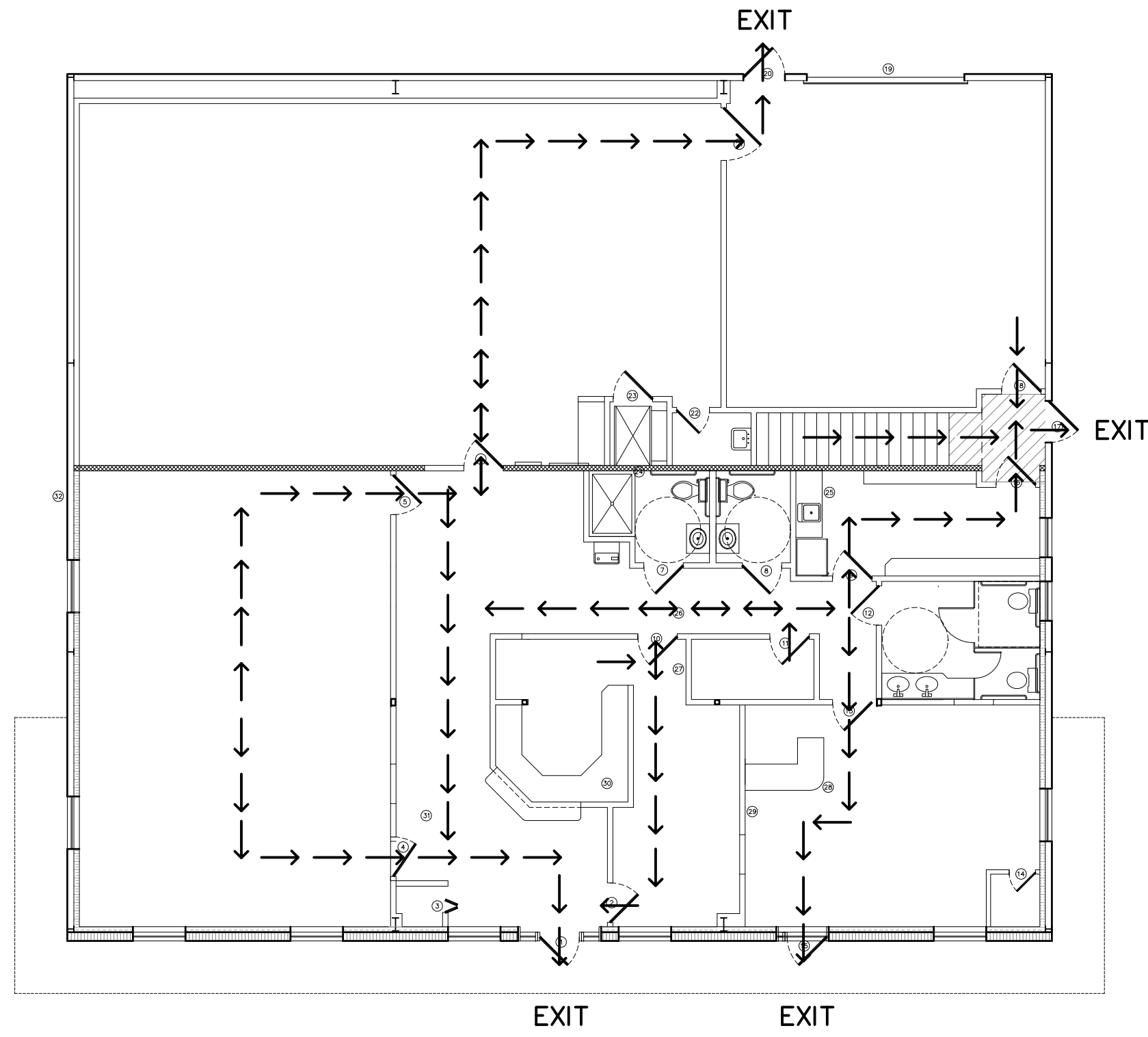


Proposed Lift to mezzanine level shown in pink

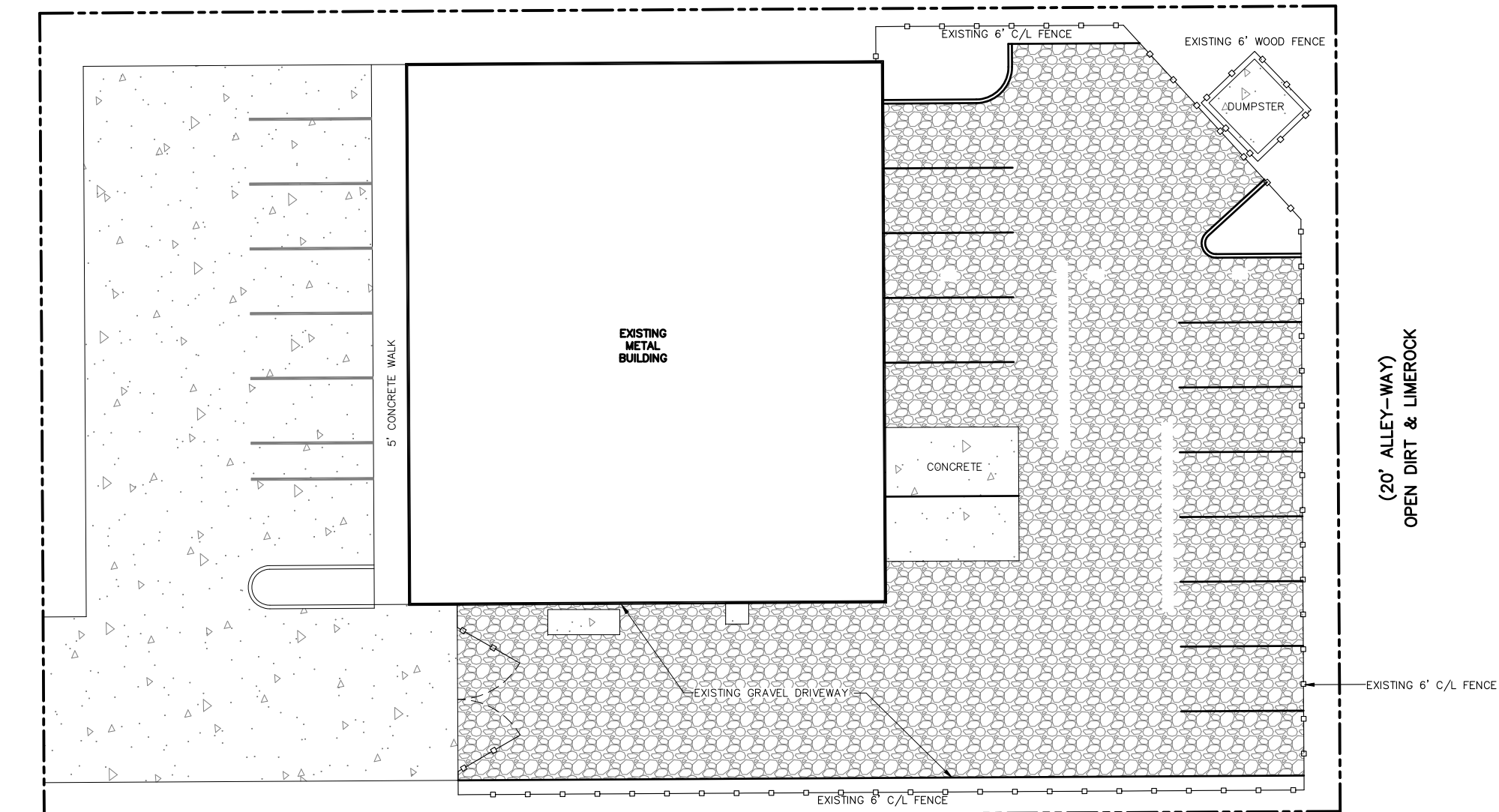
**NANCY DANCE STUDIOS, INC.
PROPOSED IMPROVEMENTS**



Proposed Lift to mezzanine level shown in pink



VICINITY MAP



3 ARCHITECTURAL SITE PLAN

SCALE: 1" = 20'

1 FIRST FLOOR LIFE SAFETY PLAN

SCALE: 1/16" = 1'-0"

2 SECOND FLOOR LIFE SAFETY PLAN

SCALE: 1/16" = 1'-0"

Scope of Work

- Alterations to existing 2 story commercial building

Applicable Codes

- 2010 Florida Building Code
- 2010 Florida Building Code Existing Building
- 2008 National Electric Code
- 2010 Florida Fire Code

Building Type / Occupancy Content

Building Type is VB

Occupancy is Mixed Non Separated

Building will have a fully automatic fire sprinkler system per NFPA 13

The building will be used as a business engaged in dance instruction during normal business hours.

Building Area:

- First Floor 4950 SF (4354 conditioned, 596 unconditioned)
- Second Floor 2659 SF (2176 conditioned, 483 unconditioned)
- Total Area 7609 SF (6530 conditioned, 1079 unconditioned)

Building Height: 22'-0"

Occupant Load

First Floor

- A-3, dance studios- 2121 SF @ 1/15SF = 142 occupants
- B, business and teacher office area - 1854 SF @ 1/100 SF = 18 occupants
- M, boutique - 379 SF @ 1/30 SF = 13 occupants
- S-1, prop storage - 596 SF @ 1/300 SF = 2 occupants
- Total first floor occupants - 175

Second Floor

- A-3, dance studio - 1035 SF @ 1/15 SF = 69 occupants
- B, business area - 1141 @ 1/100 SF = 12 occupants
- Mechanical Space - 483 @ 1/300 SF = 2 occupants
- Total Second Floor Occupants = 83

Egress Requirements

First Floor

- Horizontal Egress Width Required - 175 Occupants x .2 inches = 35 inches
- Corridor widths equal to or greater than 44"
- Egress Width Provided at Exterior Exits -72"
- 2 exits required 4 provided

Two of the exits are 66' apart which is more than one third the greatest diagonal distance of 100' Greatest Distance to an exit is 30'

Second Floor

- Horizontal Egress Width Required - 83 Occupants x .2 inches = 16.6 inches
- Corridor widths equal to or greater than 44"
- Egress Width Provided at Exterior Exits -72"
- Egress Width at stairs - 175 x .03 = 52.5" required, 96" provided
- 2 exits required 2 provided

Two of the exits are 46' apart which is more than one third the greatest diagonal distance of 100' Greatest Distance to an exit is 30'

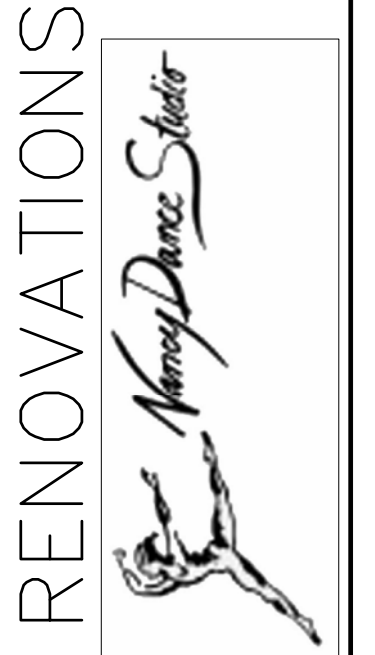
KURT JENSEN ARCHITECT
1650 MARGARET ST - 302
P.M.B. #317
JACKSONVILLE, FL 32204
(904) 388-9647

CONSULTANTS



LANDSCAPE ARCHITECTURE / LAND PLANNING

541 Cleander Street, Neptune Beach, FL
Phone: (904) 247-7729 Fax: (904) 373-9177
www.godar.design.com LC 0000397



NANCY DANCE STUDIO RENOVATIONS
NANCY DANCE STUDIO, INC.
1521 PENMAN ROAD
JACKSONVILLE BEACH, FLORIDA

DATE

4/3/13

REVISIONS

DRAWING TITLE

INDEX OF DRAWINGS
ARCH. SITE PLAN
LIFE SAFETY PLAN

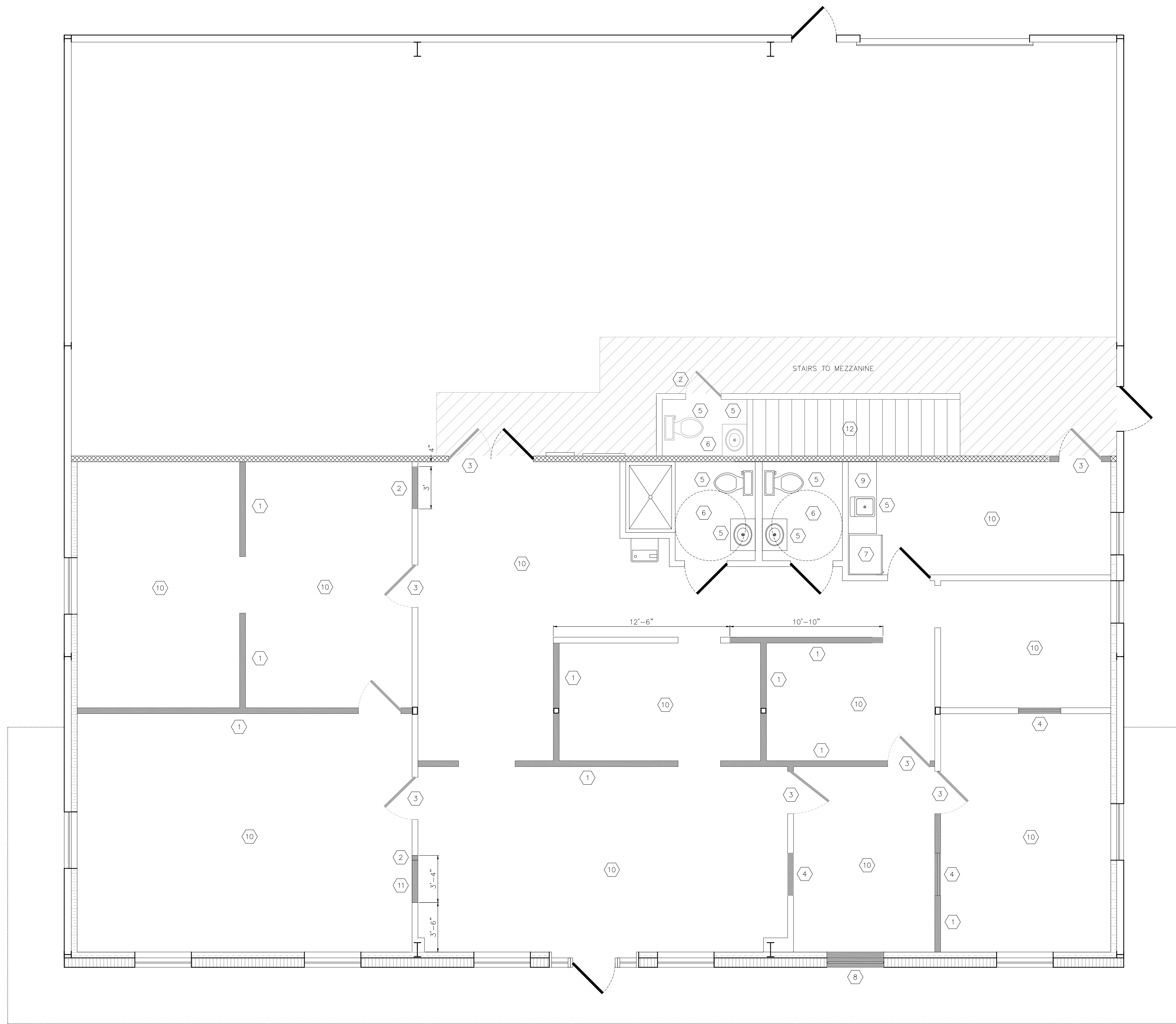
PROJECT NO.

13101

SHEET NO.

A1

PRELIMINARY



DEMOLITION LEGEND

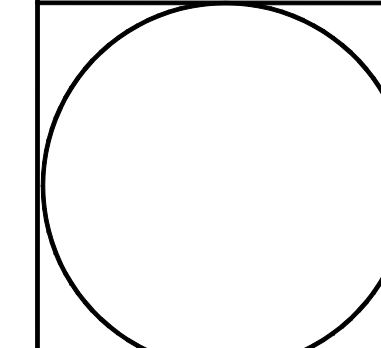
- ① REMOVE EXISTING WALL, BASE & TRIM FROM FLOOR TO CEILING
 - ② REMOVE EXISTING WALL, BASE & TRIM FROM FLOOR TO 6'-10" AFF. DIMENSIONS DO NOT INCLUDE ROUGH OPENING DIMENSIONS FOR NEW DOOR
 - ③ REMOVE EXISTING DOOR, JAMB & CASINGS.
 - ④ REMOVE EXISTING WINDOW & TRIM. LEAVE WALL ABOVE & BELOW.
 - ⑤ REMOVE EXISTING PLUMBING FIXTURE. CUT BACK & CAP PIPING TO WITHIN WALLS TO REMAIN OR BELOW EXISTING FLOOR.
 - ⑥ REMOVE EXISTING FLOOR TILE, BASE, & MORTAR BED
 - ⑦ REMOVE EXISTING APPLIANCE FOR FUTURE USE.
 - ⑧ REMOVE EXISTING EXTERIOR WINDOW, FRAMING & CMU BELOW WINDOW. DO NOT DISTURB HEADER. SAWCUT EXISTING CMU FOR NEW DOOR.
 - ⑨ REMOVE EXISTING COUNTER/CABINETS
 - ⑩ REMOVE EXISTING COUNTERS, CABINETS, AND FLOORING TO CONCRETE
- █ EXISTING WALL TO BE REMOVED

KURT JENSEN ARCHITECT
 1650 MARGARET ST - 302
 P.M.B. #317
 JACKSONVILLE, FL 32204
 (904) 388-9647

CONSULTANTS



LANDSCAPE ARCHITECTURE / LAND PLANNING
 541 Oleander Street, Neptune Beach, FL
 Phone: (904) 247-7729 Fax: (904) 373-9177
 www.godardesign.com LC 0000397



NANCY DANCE STUDIO RENOVATIONS



NANCY DANCE STUDIO, INC.
 1521 PENMAN ROAD
 JACKSONVILLE BEACH, FLORIDA

DATE

4/3/13

REVISIONS

DRAWING TITLE

FIRST FLOOR
 DEMOLITION PLAN

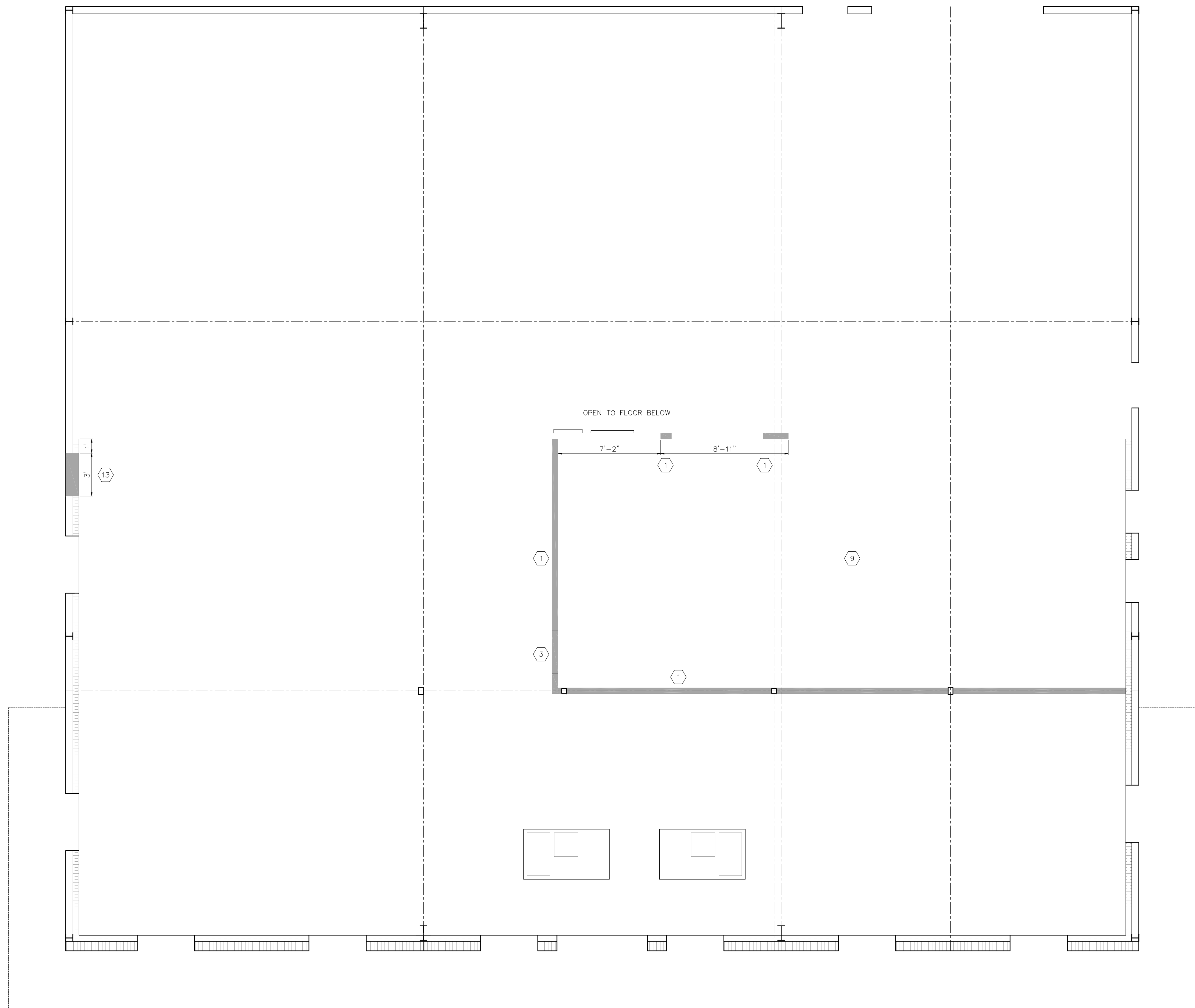
PROJECT NO.

13101

SHEET NO.

A2

PRELIMINARY



DEMOLITION LEGEND

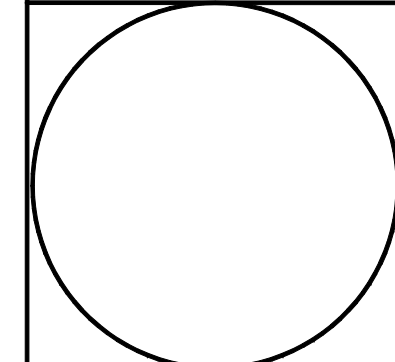
- ① REMOVE EXISTING WALL, BASE & TRIM FROM FLOOR TO CEILING
 - ② REMOVE EXISTING WALL, BASE & TRIM FROM FLOOR TO 6'-10" AFF. DIMENSIONS DO NOT INCLUDE ROUGH OPENING DIMENSIONS FOR NEW DOOR
 - ③ REMOVE EXISTING DOOR, JAMB & CASINGS.
 - ④ REMOVE EXISTING WINDOW & TRIM. LEAVE WALL ABOVE & BELOW.
 - ⑤ REMOVE EXISTING PLUMBING FIXTURE. CUT BACK & CAP PIPING TO WITHIN WALLS TO REMAIN OR BELOW EXISTING FLOOR.
 - ⑥ REMOVE EXISTING FLOOR TILE, BASE, & MORTAR BED
 - ⑦ REMOVE EXISTING APPLIANCE FOR FUTURE USE.
 - ⑧ REMOVE EXISTING EXTERIOR WINDOW, FRAMING & CMU BELOW WINDOW. DO NOT DISTURB HEADER. SAWCUT EXISTING CMU FOR NEW DOOR.
 - ⑨ REMOVE EXISTING COUNTER/CABINETS
 - ⑩ REMOVE EXISTING COUNTERS, CABINETS, AND FLOORING TO CONCRETE
- █ EXISTING WALL TO BE REMOVED

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NANCY DANCE STUDIO RENOVATIONS
NANCY DANCE STUDIO, INC.
 1521 PENMAN ROAD
 JACKSONVILLE BEACH, FLORIDA

DATE

4/3/13

REVISIONS

DRAWING TITLE

SECOND FLOOR DEMOLITION PLAN

PROJECT NO.

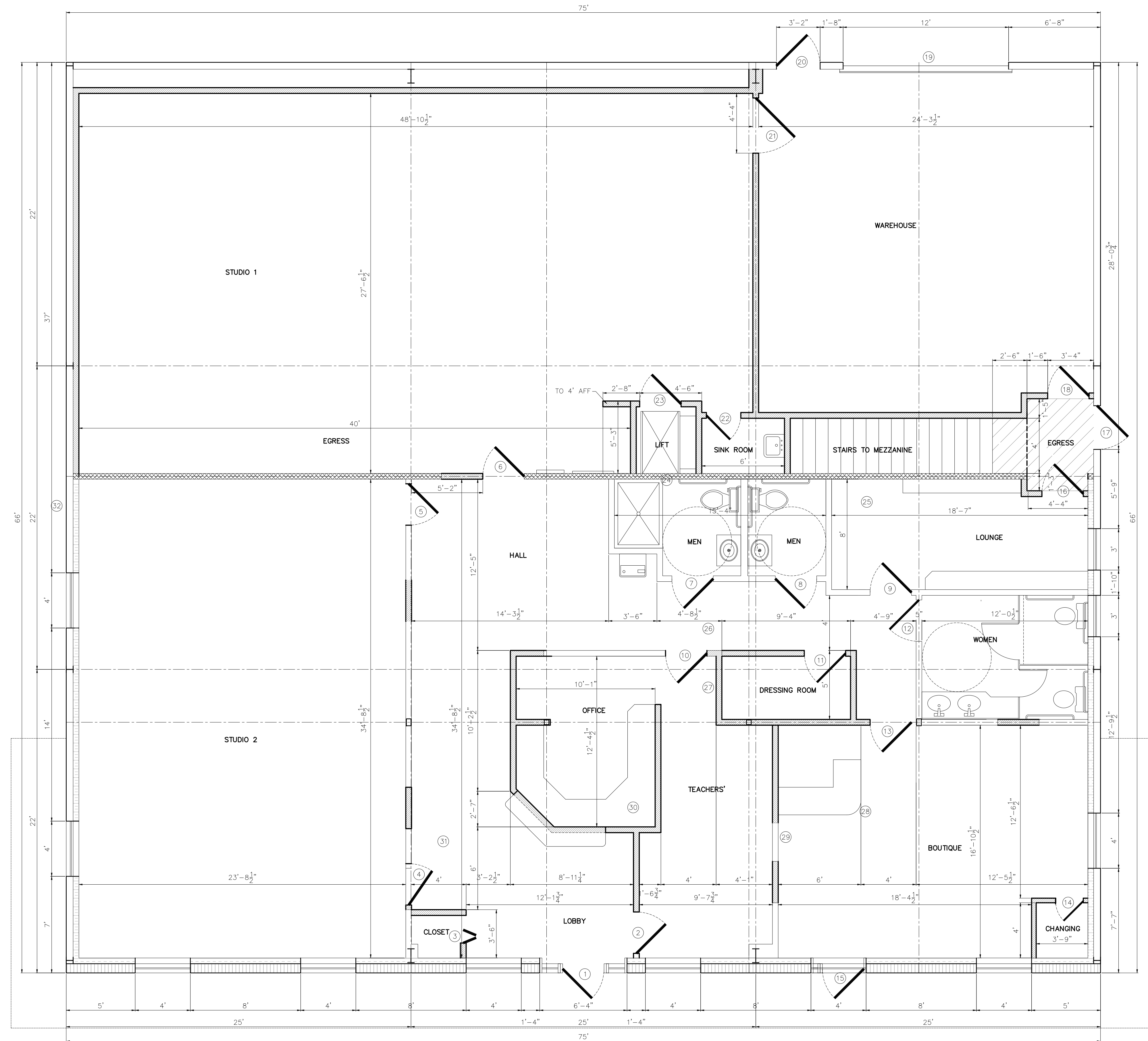
13101

SHEET NO.

A3

PRELIMINARY

FIRST FLOOR DOOR SCHEDULE						
NO.	SIZE	TYPE	FINISH	FRAME	FINISH	REMARKS
1	3-0 X 7-0	METAL/GLASS	PAINT	METAL	PAINT	EXISTING DOOR TO REMAIN
2	3-0 X 6-8	WOOD	PAINT	WOOD	PAINT	EXISTING, RELOCATED
3	2-0 X 6-8	WOOD, BIFOLD	PAINT	WOOD	PAINT	NEW, HOLLOW PANELLED
4	3-0 X 6-8	WOOD	PAINT	WOOD	PAINT	EXISTING, RELOCATED
5	3-0 X 6-8	WOOD	PAINT	WOOD	PAINT	EXISTING, RELOCATED
6	FR 3-0 X 6-8	WOOD	PAINT	WOOD	PAINT	EXISTING DOOR TO REMAIN
7	3-0 X 6-8	WOOD	PAINT	WOOD	PAINT	EXISTING DOOR TO REMAIN
8	3-0 X 6-8	WOOD	PAINT	WOOD	PAINT	EXISTING DOOR TO REMAIN
9	3-0 X 6-8	WOOD	PAINT	WOOD	PAINT	EXISTING DOOR TO REMAIN
10	3-0 X 6-8	WOOD	PAINT	WOOD	PAINT	EXISTING, RELOCATED
11	3-0 X 6-8	WOOD	PAINT	WOOD	PAINT	EXISTING, RELOCATED
12	3-0 X 6-8	WOOD	PAINT	WOOD	PAINT	NEW, ADA HARDWARE
13	3-0 X 6-8	WOOD	PAINT	WOOD	PAINT	EXISTING, RELOCATED
14	2-0 X 6-8	WOOD	PAINT	WOOD	PAINT	NEW, HOLLOW PANELLED
15	3-0 X 7-0	METAL/GLASS	PAINT	METAL	PAINT	NEW, PANIC HARDWARE
16	3-0 X 6-8	WOOD	PAINT	WOOD	PAINT	EXISTING, RELOCATED
17	3-0 X 7-0	METAL	PAINT	METAL	PAINT	EXISTING DOOR TO REMAIN
18	3'- X 6'8	WOOD	PAINT	METAL	PAINT	EXISTING, RELOCATED
19	12-0x14-0	METAL	GALV.	METAL	PAINT	EXISTING ROLL-UP TO REMAIN
20	3-0 X 7-0	METAL	PAINT	METAL	PAINT	EXISTING DOOR TO REMAIN
21	4-0 X 7-0	WOOD	PAINT	WOOD	PAINT	NEW, SOLID
22	2'-6 X 6'-8	WOOD	PAINT	WOOD	PAINT	EXISTING, RELOCATED
23	3-0 X 6-8	WOOD	PAINT	WOOD	PAINT	EXISTING, RELOCATED

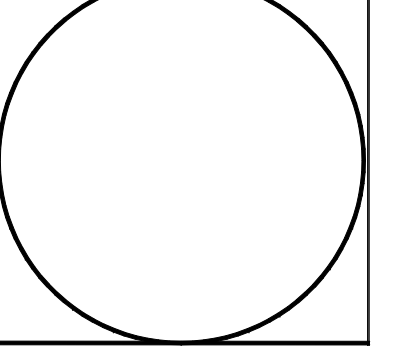


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DRAWING TITLE

FIRST FLOOR PLAN

PROJECT NO.

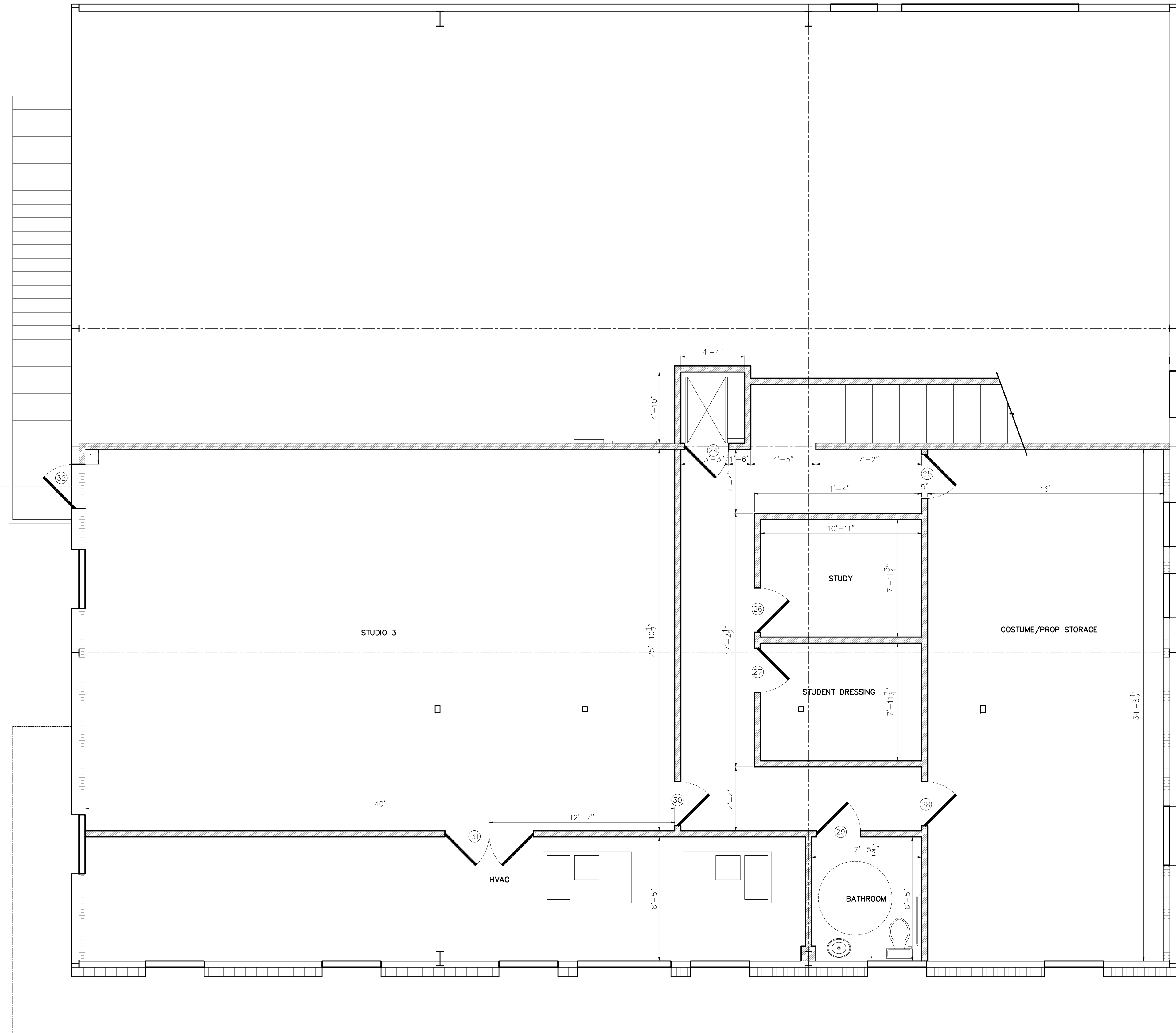
13101

SHEET NO.

A4

PRELIMINARY

SECOND FLOOR DOOR SCHEDULE						
NO.	SIZE	TYPE	FINISH	FRAME	FINISH	REMARKS
24	3-0 X 6-8	WOOD	PAINT	WOOD	PAINT	NEW, HOLLOW
25	3-0 X 6-8	WOOD	PAINT	WOOD	PAINT	NEW, HOLLOW
26	3-0 X 6-8	WOOD	PAINT	WOOD	PAINT	NEW, HOLLOW
27	3-0 X 6-8	WOOD	PAINT	WOOD	PAINT	NEW, HOLLOW
28	3-0 X 6-8	WOOD	PAINT	WOOD	PAINT	NEW, HOLLOW
29	3-0 X 6-8	WOOD	PAINT	WOOD	PAINT	NEW, ADA HARDWARE
30	3-0 X 6-8	WOOD	PAINT	WOOD	PAINT	NEW, HOLLOW
31	(2)3-0X6-8	WOOD	PAINT	WOOD	PAINT	NEW, HOLLOW
32	3-0 X 7'-0	METAL	PAINT	METAL	PAINT	PANIC HARDWARE



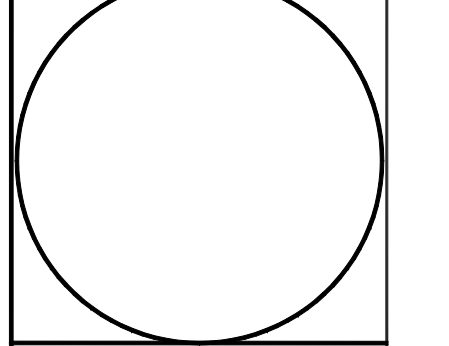
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NANCY DANCE STUDIO RENOVATIONS
Nancy Dance Studio

NANCY DANCE STUDIO, INC.
 1521 PENMAN ROAD
 JACKSONVILLE BEACH, FLORIDA

DATE

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REVISIONS

DRAWING TITLE

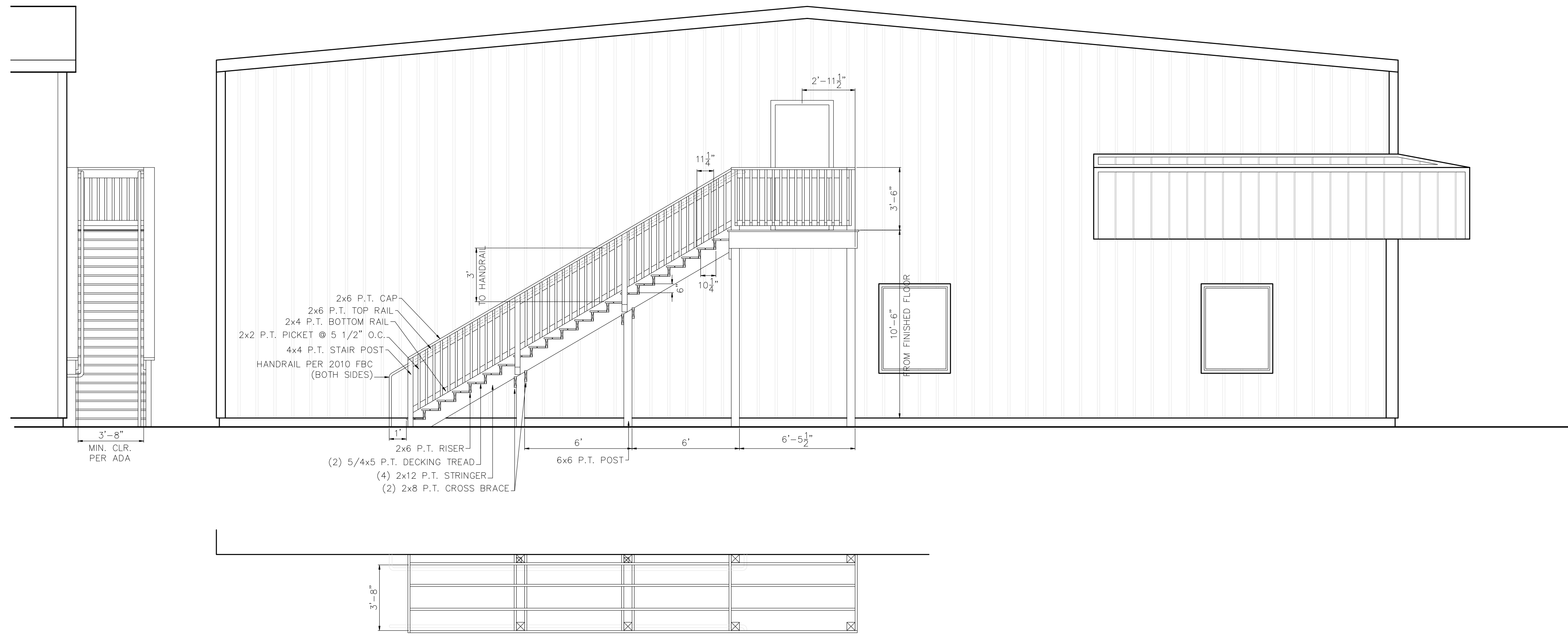
SECOND FLOOR PLAN

PROJECT NO.

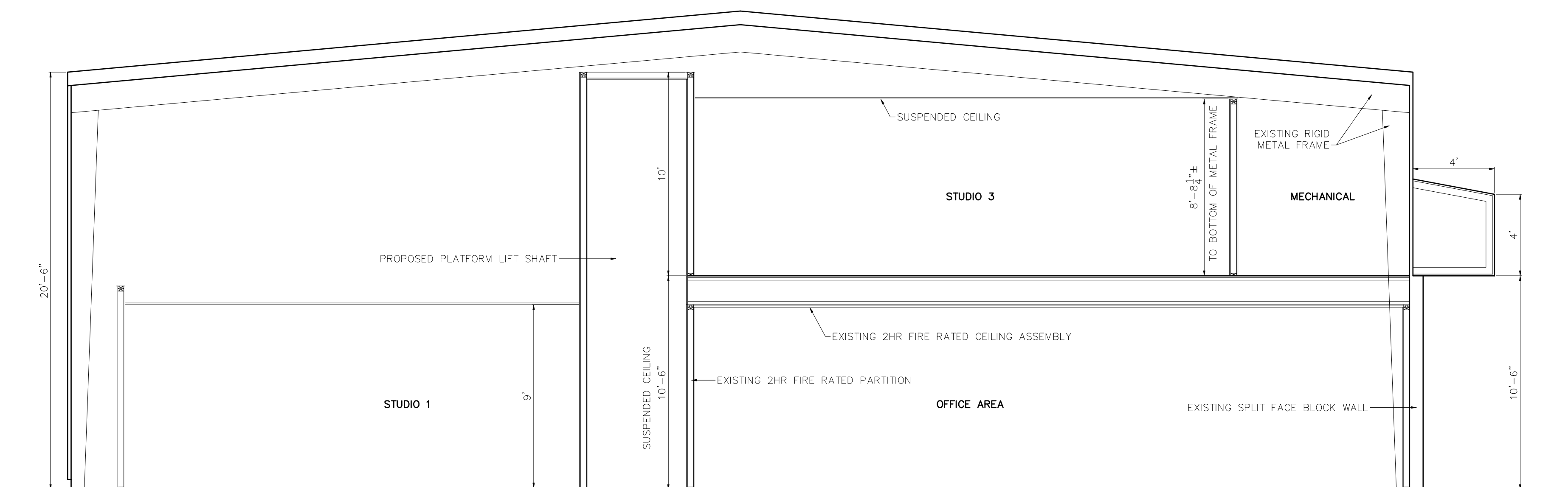
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SHEET NO.

A5



FIRE ESCAPE DETAILS
SCALE: 1/4" = 1'-0"



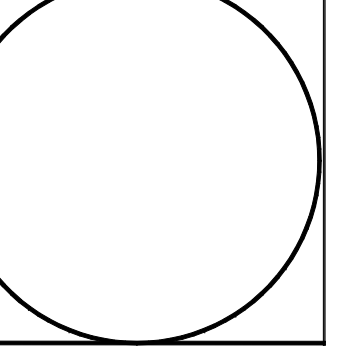
BUILDING SECTION
SCALE: 1/4" = 1'-0"

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DATE

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REVISIONS

DRAWING TITLE

MISCELLANEOUS

PROJECT NO.

13101

SHEET NO.

A5

PRELIMINARY