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TAB

# 1

**Department of Community Affairs  
FLORIDA BUILDING COMMISSION  
2555 Shumard Oak Boulevard  
Tallahassee, Florida 32399-2100**

**NOTICE TO WAIVER APPLICANTS**

Please make certain you comply with the following:

- X The person submitting the waiver request application as the Applicant **MUST** sign the application. Should you fail to do so, your application will be returned.
- X If a licensed design professional (architect or engineer) has designed the project, his or her comments **MUST** be included as a part of this application.
- X Be as explicit as possible. The more information provided to the Florida Building Commission, the more informed its decisions can be. If you are claiming financial hardship, please specify why and to what degree.
- X If at all possible, **PLAN TO ATTEND the Accessibility Advisory Council and the Florida Building Commission meetings**. Sometimes pertinent facts are inadvertently omitted, or information provided/presented in the Request for Waiver application is not clear. Your attendance at the meetings to answer questions will enhance the possibility of the waiver being approved, since the Council and the Commission will receive the most complete information – from you. When we receive the completed application, we will send you a notice of the time, date, and place for both the Council and the Commission meetings.

Enclosed is a **List of Required Information** and the **Request for Waiver** application.

If you have any questions or would like additional information, please call the Codes and Standards Section at (850) 487-1824.

**Please mail** this application to the Department of Community Affairs at the address above. **As well as a hard copy, please include a copy of the application and drawings or plans on a CD in PDF format. NOTE: Please do not send CAD files, but rather scan the CAD files and save as a pdf. Must be in Microsoft Compatible format.**

**NOTE: Failure to submit electronically will not have any bearing on whether your petition is heard by the Commission, however, electronic filing will facilitate the Commission's movement toward utilizing CD technology to display the waiver application and attached floor plans to the Counsel and Commission.**



This application is available in alternate formats upon request.

**LIST OF REQUIRED INFORMATION:**

1. ☒ Drawings that will clearly present your project and that identify the issue(s) that relate to the waiver you are requesting. As a minimum, the following drawings must be submitted:
  - a. Project site plan
  - b. 24" x 36" minimum size drawings
  - c. Building/project sections (if necessary to assist in understanding the waiver request)
  - d. Enlarged floor plan(s) of the area in question
2. ☒ One set of reduced scale (11" x 17") versions of the drawings submitted in item one above.
3. ☒ One set of overhead transparencies (8 1/2" x 11") of the drawings submitted in item one above. When numerous features are shown on the drawings, please designate the location of the waiver items by highlighting or outlining in color the affected areas.
4. ☒ When substantial financial cost of compliance is alleged, supporting cost estimates with quotes from at least two vendors or contractors and catalog information.
5. ☒ If you feel photographs and/or renderings are necessary for your presentation, provide 40 legible color photocopies of the photographs and/or renderings. If color photocopies of photographs are provided, use a minimum size of 4" x 6" photographs with a maximum of two photographs per photocopied page.
6. ☒ Please submit a hard copy of this application to the Department of Community Affairs. PLEASE NOTE: Although not required by Rule 9B-7, F.A.C., in addition to the hard copy please include a copy of the application and drawings or plans on a CD in PDF format.

**General Information:**

- a. **Equipment:** A CD projector is provided at the Accessibility Advisory Council and Florida Building Commission meetings. Any other equipment necessary for your presentation, such as an overhead projector, TV/VCR, slide or LCD projectors, etc., is the responsibility of the applicant.
- b. **Verbal Descriptions:** Presentations may be to sight or hearing impaired persons; visual presentations should consider adequate verbal and text descriptions of charts and pictures.

Your application will be reviewed by the Accessibility Advisory Council. You will have the opportunity to answer questions and/or make a short presentation **not to exceed 15 minutes**. The Council will provide recommendations to the Florida Building Commission. The Commission will review the application. You will have another opportunity to answer questions and /or give a short presentation **not to exceed 15 minutes**. The Commission will consider all information and the Council's recommendation before voting on the waiver.

This application is available in alternate formats upon request.

**REQUEST FOR WAIVER FROM ACCESSIBILITY REQUIREMENTS  
OF CHAPTER 553, PART V, FLORIDA STATUTES**

Your application will be reviewed by the Accessibility Advisory Council and its recommendations will be presented to the Florida Building Commission. You will have the opportunity to answer questions and/or make a short presentation, not to exceed 15 minutes, at each meeting. The Commission will consider all information presented and the Council's recommendation before voting on the waiver request.

**1. Name and address of project for which the waiver is requested.**

Name: Kalex Construction & Development

Address: 6840 NW 77th Court  
Miami, Florida 33166

**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: \_\_\_\_\_

Applicant's Address: \_\_\_\_\_

Applicant's Telephone: \_\_\_\_\_ FAX: \_\_\_\_\_

Applicant's E-mail Address: \_\_\_\_\_

Relationship to Owner: \_\_\_\_\_

Owner's Name: Jorge Diaz

Owner's Address: 6840 NW 77th Court, Miami, FL 33166

Owner's Telephone: (305) 513-8484 FAX: (305) 513-8481

Owner's E-mail Address: jorge@Kalexconstruction.com

Signature of Owner: Jorge Diaz

Contact Person: Jorge Diaz

Contact Person's Telephone: (305) 796-2884 E-mail Address: jorge@Kalexconstruction.com



This application is available in alternate formats upon request.  
Form No. 2001-01

**3. Please check one of the following:**

- ☐ New construction.
- ☐ Addition to a building or facility.
- ☒ Alteration to an existing building or facility.
- ☐ Historical preservation (addition).
- ☐ Historical preservation (alteration).

**4. Type of facility.** Please describe the building (square footage, number of floors). Define the use of the building (i.e., restaurant, office, retail, recreation, hotel/motel, etc.)

Office and warehouse space measuring 4300 s.f.  
The interior is a 2 floor layout.

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

\$152,000.00

**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.

We have no public access to the  
second floor and all amenities  
are located on the first floor.

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

Issue

1: Elevator (Reference 11-4.10)

Issue

2: \_\_\_\_\_

Issue

3: \_\_\_\_\_

8. **Reason(s) for Waiver Request:** The Florida Building Commission may grant waivers of Florida-specific accessibility requirements upon a determination of unnecessary, unreasonable or extreme hardship. Please describe how this project meets the following hardship criteria. Explain all that would apply for consideration of granting the waiver.

☒ The hardship is caused by a condition or set of conditions affecting the owner which does not affect owners in general.

No public access to the second floor.  
All public areas are located on first floor.

☒ Substantial financial costs will be incurred by the owner if the waiver is denied.

Estimates attached (tabs #5, #6, #7)

☒ 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. \_\_\_\_ A quote from Florida Lifts LLC in the amount of \$32,900.00 is attached (see Tab #5) \_\_\_\_

b. \_\_\_\_ A quote from Access Lifts & Elevators, Inc. in the amount of \$33,503.00 is attached (see Tab #5) \_\_\_\_

c. \_\_\_\_ A quote from Kalex Construction and Development, Inc in the amount of \$52,822.00 is attached (see Tab #6) \_\_\_\_

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.

Elevators are not required in facilities that are less than tree stories or have less than 3,000 square feet.

There is no public access to the second floor. All public areas are located on the first floor.

The cost of the elevator causes a financial hardship to the owner.

  
Signature

Juan C. Salinas  
Printed Name

Phone number (305) 265-3737

(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 5th day of May, 2011

Signature

Jorge Diaz

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.

TAB

#2

(SEE DWG

FILE

ATTACHED)

TAB

#3



TAB

# 4

(SEE BINDER FOR  
TRANSPARENCIES)

TAB

#5



Florida Lifts LLC  
P.O. Box 740708  
Boynton Beach, FL. 33474-0708

Ph: 561-353-5438  
Fax: 561-244-7580  
info@floridalifts.com

## PURCHASE CONTRACT

FLA11-\_\_\_\_\_

This contract dated as of \_\_\_\_\_, is entered into between Florida lifts LLC, a Florida Limited Liability Company of 1718 Corporate Drive, Boynton Beach, FL 33426 (hereinafter known as "Seller"), and Kalex Construction and Development Inc., a Florida Corporation whose principal offices are located at 6840 NW 77<sup>th</sup> Ct., Miami FL 33166 (hereinafter known as "Customer"), and shall become effective when signed by both parties and upon receipt of the first payment by Seller.

Goods to be sold:

Seller agrees to provide and install **TWO** vertical platform lifts (the Goods") per the scope of work and specifications attached hereto as Exhibit A.

### 1. Purchase Price and Payment Terms:

The Customer shall pay to Seller for the Goods specified in paragraph one of this contract the sum of Thirty Two Thousand Nine Hundred Dollars (\$32,900.00), the "Purchase Price", in accordance with the following schedule:

- \$19,900.00 payment ("first payment") shall be due upon contract signing. The first payment shall be considered a non-refundable deposit which shall become the property of Seller should this contract be cancelled by the Customer at any time or should the Customer be in default of this Contract. If this order is canceled by the Customer for any reason, the Customer agrees to reimburse the Seller for all costs and expenses incurred in connection with this Contract, which may be in addition to the non-refundable deposit amount.
- \$10,000.00 payment ("second payment") of the Purchase Price shall be due upon delivery of the Goods to the Customers' job location
- \$3,000.00 payment ("final payment") of the Purchase Price shall be paid to Seller when the installation of the Goods are complete.

Customer agrees to permit Seller to commence installation within one week of Seller's receipt of Goods from the factory. If the installation is delayed, halted or interrupted for any other reason beyond the control of Seller, (including but not limited to having permanent power at the installation site) the balance due, less the sum of one thousand dollars, is to be paid to Seller at that time. The balance of one thousand dollars shall be paid by Customer to Seller within 10 days of completion of installation.

4/27/2011

Page 1 of 6

Customer Initial\_\_\_\_\_

Seller Initial\_\_\_\_\_



## PURCHASE CONTRACT

FLA11-\_\_\_\_

All payments are to be made payable to Florida Lifts LLC and sent to:

Florida Lifts LLC  
P.O. Box 740708  
Boynton Beach, FL. 33704-0708

Customer agrees to pay late fees at a rate of 1% per month on all amounts past due.

### 2. **Changes:**

All changes to the Goods, or to the Scope of Work shown in Exhibit A, must be agreed to in writing by the Seller and Customer in order to be binding and an agreed upon Purchase Price adjustment made as applicable. All changes to the Purchase Price shall be added to, or deducted from, the next payment milestone shown in Paragraph 1 above.

### 3. **Customer Default:**

Customer acknowledges that this equipment is custom made for this particular installation. If installation is delayed as described in paragraph 2 and either fails or refuses to make payment of the amount due at that time, Customer shall be deemed to be in default of this contract. Furthermore, if Customer fails to make any payment when due, Customer shall be deemed to be in default of this contract. Seller shall be entitled to all remedies provided under the laws of the state of Florida through its adaptation of the Uniform Commercial Code, or otherwise, including but not limited to specific performance.

In the event it becomes necessary for Seller to retain legal counsel, or undertake litigation, or to otherwise protect Seller's rights under this contract, or to defend Seller against claims which are Customer's responsibility, Customer shall pay reasonable attorney's fees and related costs whether or not such litigation proceeds to final judgment.

### 4. **Risk of Loss and Title to Goods:**

Seller shall bear all risk of loss to the goods due to fire, windstorm, accident, theft vandalism etc., prior to the commencement of installation of Goods at the Customer's job site. Customer shall bear all risk of loss to the Goods thereafter.

### 5. **Delay in Delivery:**

It is intended that delivery and installation take place within eight to ten weeks after the date approval of shop drawings and placement of order with the factory. Since the Goods are custom made, a backlog at the factory may cause a delay in delivery. Seller assumes no responsibility for such delays nor for failure to deliver goods to Customer on a particular date due to circumstances beyond its control.

## PURCHASE CONTRACT

FLA11-\_\_\_\_

### 6. Applicable Law:

This contract shall be governed in accordance with the laws of the State of Florida

### 7. Successors or Assigns:

This contract shall be binding upon the successors in interest or assigns of Seller or Customer. No Assignment of this purchase contract may be made without the written consent of the other party.

### 8. Manufacturer's Warranty

The Goods include the manufacturer's standard warranty to repair or replace any covered defective part during the term of the warranty exclusive of labor.

### 9. Permitting

Seller will use its customary and normal efforts to assist the Customer in obtaining required permits and approvals to complete the work including preparation and filing of all permit applications but in no way shall be liable for delays or denial of any such permits or approvals. Customer assumes all expenses of any additional requirements mandated by any permitting or other approval authority and not specifically included in the attached Scope of Work.

### SELLER

### CUSTOMER

Florida Lifts LLC

By \_\_\_\_\_

By \_\_\_\_\_

Date \_\_\_\_\_

Date \_\_\_\_\_

4/27/2011

Page 3 of 6

Customer Initial \_\_\_\_\_

Seller Initial \_\_\_\_\_

## PURCHASE CONTRACT

FLA11-\_\_\_\_

Exhibit A

### SCOPE OF WORK

The Seller hereby agrees to provide all labor and material as necessary to install **TWO (2)** Vertical Platform Lifts at the following job location:

Job Name: **V1504-STD-Kalex Construction**  
Project Location: **6840 NW 77<sup>th</sup> Ct.,  
Miami, FL 33116**

Contact: **Jorge Diaz**  
Phone: **305-513-8484**  
Fax: **305-513-8481**  
Cell: **305-796-2884**  
E-Mail: **Jorge@KalezConstruction.com**

The First vertical platform lift specification is as follows:

Savaria V1504-STD unenclosed vertical platform lift – 2 Stops

1. Up to 120" vertical travel
2. Wing Walls : N/A
3. Project Type: Commercial
4. Indoor Application to be installed in an Enclosed Hoistway
5. Power Supply: 110 VAC up 60 HZ Operation (110 VAC up /12 VDC down)
6. Number of Stops: 2-Stop
7. Pit Requirement: 3" pit required
8. Floor to Floor: 120"
9. Cab Type Selection and Handing: Type 1L (on/off same side)
10. Landing Door Handing Swing: Level 1: C/Left Hand, Level 2: A/Right Hand
11. Cab Size: 36"x54"
12. Keyed/Remove Off Only Car Station
13. Hall Call Stations: 2 ea. Keyed Call/Send
  - a. Bottom Landing: surface mounted
  - b. Top Landing: Flush mounted in frame
14. Lower Landing Entrance: Pro Manual Swing doors with Prolock (2hr ULC Fire Rated Door)
15. Intermediate Landing Entrance: N/A
16. Intermediate Landing Entrance Options: N/A
17. Upper Landing Entrance: Pro Manual Swing doors with Prolock (2hr ULC Fire Rated Door)
18. Locks: N/A
19. Telephone: No
20. Color: Standard beige
21. Extra Touch up paint: No

4/27/2011

Page 4 of 6

Customer Initial\_\_\_\_\_

Seller Initial\_\_\_\_\_



## PURCHASE CONTRACT

FLA11-\_\_\_\_

- 22. Miscellaneous Options: None
- 23. International Packaging: No

The Second vertical platform lift specification is as follows:

Savaria V1504-STD unenclosed vertical platform lift – 2 Stops

- 1. Up to 60" vertical travel
- 2. Wing Walls : N/A
- 3. Project Type: Commercial
- 4. Indoor Application to be installed in an Enclosed Hoistway
- 5. Power Supply: 110 VAC up 60 HZ Operation (110 VAC up /12 VDC down)
- 6. Number of Stops: 2-Stop
- 7. Pit Requirement: 3" pit required
- 8. Floor to Floor: 51.5"
- 9. Cab Type Selection and Handing: Type 4 (90 degree cab)
- 10. Landing Door Handing Swing: Level 1: C/Left Hand, Level 2: A/Right Hand
- 11. Cab Size: Custom for Hoistway size 42"W x 60 L"
- 12. Keyed/Remove Off Only Car Station
- 13. Hall Call Stations: 2 ea. Keyed Call/Send
  - a. Bottom Landing: surface mounted
  - b. Top Landing: Flush mounted in frame
- 14. Lower Landing Entrance: 80" High x 42" W gate low profile alum door with WR500 Locks and an Automatic Swing Door Operator (Commander)
- 15. Intermediate Landing Entrance: N/A
- 16. Intermediate Landing Entrance Options: N/A
- 17. Upper Landing Entrance: 42" x 42" Top Landing Aluminum Gate with metal inserts and WR500 Locks with an Automatic Gate Opener (1802C)
- 18. Locks: N/A
- 19. Telephone: No
- 20. Color: Standard beige
- 21. Extra Touch up paint: No
- 22. Miscellaneous Options: None
- 23. International Packaging: No

In the event of a conflict between these specifications and the shop drawings provided for Customer approval, the shop drawings shall prevail

### **Work to be performed by others:**

#### Hoistway:

- 1. Construction of hoistway in accordance with National US/ASME applicable code, all state and local codes.

4/27/2011

Page 5 of 6

Customer Initial\_\_\_\_\_

Seller Initial\_\_\_\_\_

## PURCHASE CONTRACT

FLA11-\_\_\_\_

2. Due to close running clearances, Customer must ensure hoistway is plumb, level and square and is in accordance with dimensions on specified in the shop drawings including pit depth and the minimum overhead clearance.
3. Installation of sleeves for any oil and electrical line from machine room to hoistway as required.

### Electrical:

1. A Dedicated 110V, single phase, (20AMP @ 1HP) service, with neutral, to a lockable safety disconnect switch fused with time delay fuses shall be furnished in accordance with N.E.C. Location to be specified by Seller prior to installation.
2. If required, a machine room is to be located as close as possible to hoistway and have a light and GFI receptacle.

### Structural:

1. Structural engineer to ensure that building and shaft will support all loads imposed by the lift equipment.

In the event of any conflict between these specifications and the shop drawings, the shop drawings shall prevail.



## V-1504 STD Vertical Platform Lift

Residential & Commercial Access

Savaria Concord offers the V-1504 STD, a Vertical Platform Lift designed to provide easy access for the physically challenged. This innovative product has been carefully studied to fit your home. Its versatility also provides the best architectural choice for commercial applications such as schools, churches and office buildings.



**36**  
MONTH  
LIMITED  
WARRANTY

SAVARIA CONCORD LIFTS INC. - MONTREAL

4150 Highway #13, Laval, Quebec, Canada H7R 6E9

(450) 681-5655 or 800 931-5655 (450) 681-4745

[www.savaria.com](http://www.savaria.com)

SAVARIA CONCORD LIFTS INC. - TORONTO

107 Alfred Kuehne Blvd., Brampton, Ontario, Canada L6T 4K3

(905) 791-5555 or 800 661-5112 (905) 791-2222

[www.concordellevator.com](http://www.concordellevator.com)



# ACCESS LIFTS & ELEVATORS, INC.

8362 Pines Blvd #380 Pembroke Pines, FL 33024

Email sales@accessliftsandelevators.com

Telephone 954- 826-5438

Fax 954-894-7707

STATE LICENCE REGISTRATION #ELC489/CC1820

April 28, 2011

Dear Jorge

**Project Re: Kalex Office**

Thank you for choosing Access Lifts & Elevators. Based on information received, we are submitting the following quotation for your review.

This quote is to cover the complete furnishing and Installation Including permit and inspection of **One HCDE-120 Enclosure model wheelchair lift manufactured by National Wheel-O-Vator** with the following specifications:

- Travel- Not to exceed 10'
- Two-stop on/off straight-thru/Capacity-750 lbs.
- Drive System- Roped Hydraulic
- Controls- Selective collective microprocessor
- Speed 20 fpm
- Platform- 36"x48" non-skid surface
- Gates- 6'8" lower landing gate and a 42" high upper landing gate
- Safety devices- Upper final limit switch, battery lowering, emergency lighting and alarm
- Finish- Ivory Powder coat.

Price **\$19,135.00** (This price includes, material, shipping, installation and inspection)

**Terms:** 50% deposit, 20% at delivery of Unit, 20% at start of installation, 10% due upon final inspection.  
Material will not be released for production without deposit.

**Warranty:** Four years parts and One year labor from final inspection.

**Work by others:** Provide a 120v 20 amp fusible lockable disconnect , a light over the lift and a 3" depression for the lift to sit in.

It is understood and agreed that the work is to be performed during the regular working day and hours of the elevator trade. The above work will be performed in a competent professional manner in strict accordance with all state and elevator codes.

Submitted by **Rocco J Bruno Jr.**

\$ 19,135.00  
+ 14,368.00  
\$ 33,503.00 Total

# ACCESS LIFTS & ELEVATORS, INC.

8362 Pines Blvd #380 Pembroke Pines, FL 33024

Email [sales@accessliftsandelevators.com](mailto:sales@accessliftsandelevators.com)

Telephone 954- 826-5438

Fax 954-894-7707

## Authorized Customer Representative:

Name \_\_\_\_\_ Title \_\_\_\_\_

Signature \_\_\_\_\_ Date \_\_\_\_\_

Lead time is 1-2 week drawings 4-6 weeks manufacture 2-3 days installation

Please fax signed proposal to 954-894-7707 to proceed with order.

Access Lifts & Elevators will not use sub-contractors.

Prices are subject to change, If acceptance not received within 90 days.

# ACCESS LIFTS & ELEVATORS, INC.

8362 Pines Blvd #380 Pembroke Pines, FL 33024

Email [sales@accessliftsandelevators.com](mailto:sales@accessliftsandelevators.com)

Telephone 954- 826-5438

Fax 954-894-7707

STATE LICENCE REGISTRATION #ELC489/CC1820

---

April 28, 2011

Dear Jorge

**Project Re: Kalex Office**

Thank you for choosing Access Lifts & Elevators. Based on information received, we are submitting the following quotation for your review.

This quote is to cover the complete furnishing and Installation Including permit and inspection of **One CDE-60 Enclosure model wheelchair lift manufactured by National Wheel-O-Vator** with the following specifications:

- Travel- Not to exceed 60"
- Two-stop on/off straight-thru/Capacity-750 lbs.
- Drive System- Acme screw drive
- Controls- Selective collective microprocessor
- Speed 9 fpm
- Platform- 36"x48" non-skid surface
- Gates- Three gate system
- Safety devices- Upper final limit switch, battery lowering, emergency lighting and alarm
- Finish- Ivory Powder coat.

Price **\$14,368.00** (This price includes, material, shipping, installation and inspection)

**Terms:** 50% deposit, 20% at delivery of Unit, 20% at start of installation, 10% due upon final inspection.  
**Material will not be released for production without deposit.**

**Warranty:** Four years parts and One year labor from final inspection.

**Work by others:** Provide a 120v 20 amp fusible lockable disconnect , a light over the lift and a 3" depression for the lift to sit in.

It is understood and agreed that the work is to be performed during the regular working day and hours of the elevator trade. The above work will be performed in a competent professional manner in strict accordance with all state and elevator codes.

Submitted by **Rocco J Bruno Jr.**

# ACCESS LIFTS & ELEVATORS, INC.

8362 Pines Blvd #380 Pembroke Pines, FL 33024

Email [sales@accessliftsandelevators.com](mailto:sales@accessliftsandelevators.com)

Telephone 954- 826-5438

Fax 954-894-7707

## Authorized Customer Representative:

Name \_\_\_\_\_ Title \_\_\_\_\_

Signature \_\_\_\_\_ Date \_\_\_\_\_

Lead time is 1-2 week drawings 4-6 weeks manufacture 2-3 days installation

Please fax signed proposal to 954-894-7707 to proceed with order.

Access Lifts & Elevators will not use sub-contractors.

Prices are subject to change, If acceptance not received within 90 days.



# ACCESS LIFTS & ELEVATORS, INC.

8362 Pines Blvd #380 Pembroke Pines, FL 33024

Email [sales@accessliftsandelevators.com](mailto:sales@accessliftsandelevators.com)

Telephone 954- 826-5438

Fax 954-894-7707

## **Transmittal Form**

**To: Jorge**

**From: Rocco Bruno**

**Date: April 28, 2011**

**Message: Please find the Lift proposal.**

# ACCESS LIFTS & ELEVATORS, INC.

8362 Pines Blvd #380 Pembroke Pines, FL 33024

Email [sales@accessliftsandelevators.com](mailto:sales@accessliftsandelevators.com)

Telephone 954- 826-5438

Fax 954-894-7707

## **Transmittal Form**

**To: Jorge**

**From: Rocco Bruno**

**Date: April 28, 2011**

**Message: Please find the Lift proposal.**

TAB

#6

**KALEX CONSTRUCTION and DEVELOPMENT, INC.**

Telephone: 305-513-8484 Fax: 305-513-8481

PROJECT NAME: Kalex Office

WORK ORDER NO.:

PROJECT NO.:

Cost Code	Description	Quantity	Unit	Unit Cost	Sub.	Totals
DIVISION 3 - Concrete						
Footings						
	Demolition (Cutting and removing Concrete)	1	EA	\$750.00	Superior	\$750.00
	Material	1	EA	\$250.00	Superior	\$250.00
	Labor (two men x two days)	32	HRS	\$28.50	Superior	\$912.00
						\$1,912.00

Cost Code	Description	Quantity	Unit	Unit Cost	Sub.	Totals
DIVISION 9 - Finishes						
	Shaft Walls for lift	1	LS	\$6,580.00	Superior	\$6,580.00
	Doors and Frames (Fire Rated)	3	EA	\$1,750.00	Superior	\$5,250.00
	Painting and Patching	1	LS	\$1,400.00	Superior	\$1,400.00
						\$13,230.00

Cost Code	Description	Quantity	Unit	Unit Cost	Sub.	Totals
DIVISION 10 - Equipment						
	60" Rise Lift	1	LS	\$32,900.00	Superior	\$32,900.00
	10 Feet Rise Lift	1	EA	INC Above	Superior	
						\$32,900.00

Cost Code	Description	Quantity	Unit	Unit Cost	Sub.	Totals
DIVISION 16 - Electrical						
	Power for equipment	1	LS	\$4,780.00	Superior	\$4,780.00
						\$4,780.00

TOTAL

**\$52,822.00**



TAB

#7



**KALEX**  
CONSTRUCTION

6840

05/12/2011 10:15 AM

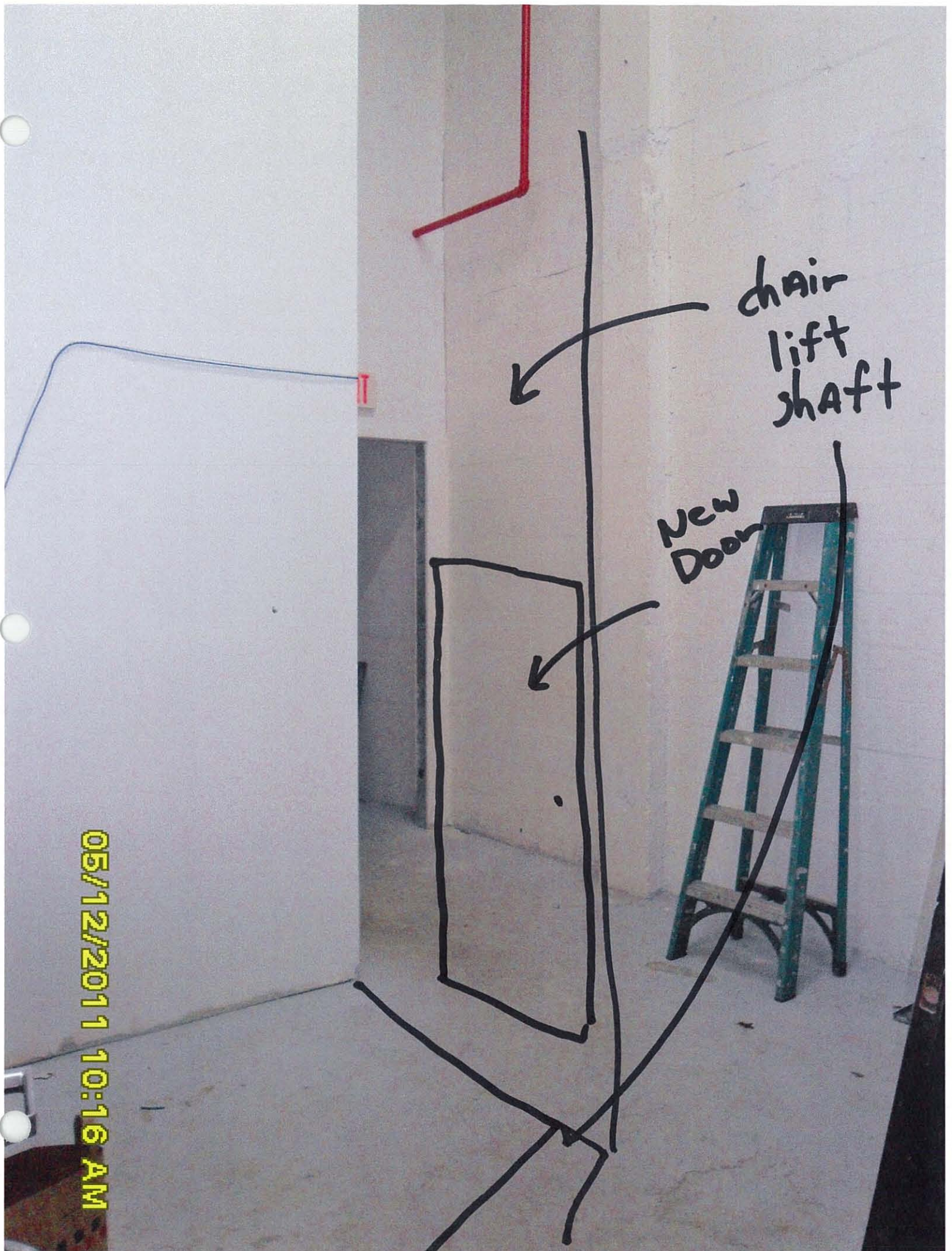




chair  
lift  
shaft

New  
Door

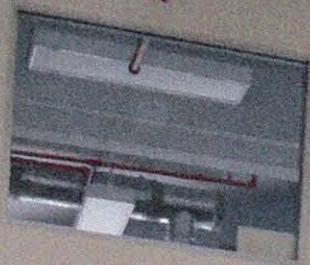
05/12/2011 10:16 AM





05/12/2011 10:17 AM

Chair Lift



EXIT





UP

Build shaft  
for  
Chair Lift

05/23/2011 12:08 PM

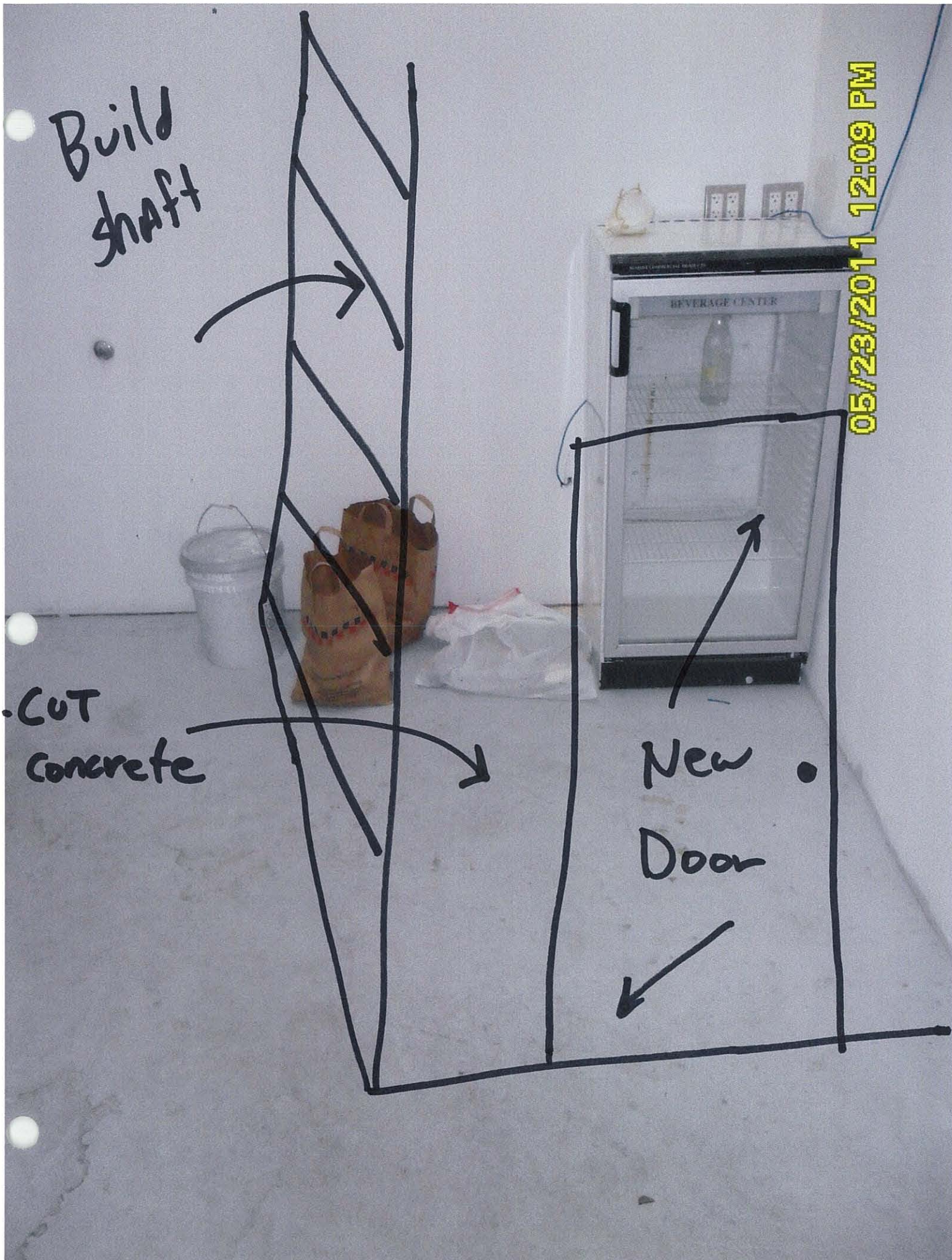


Build  
shaft

05/23/2011 12:09 PM

CUT  
concrete

New  
Door

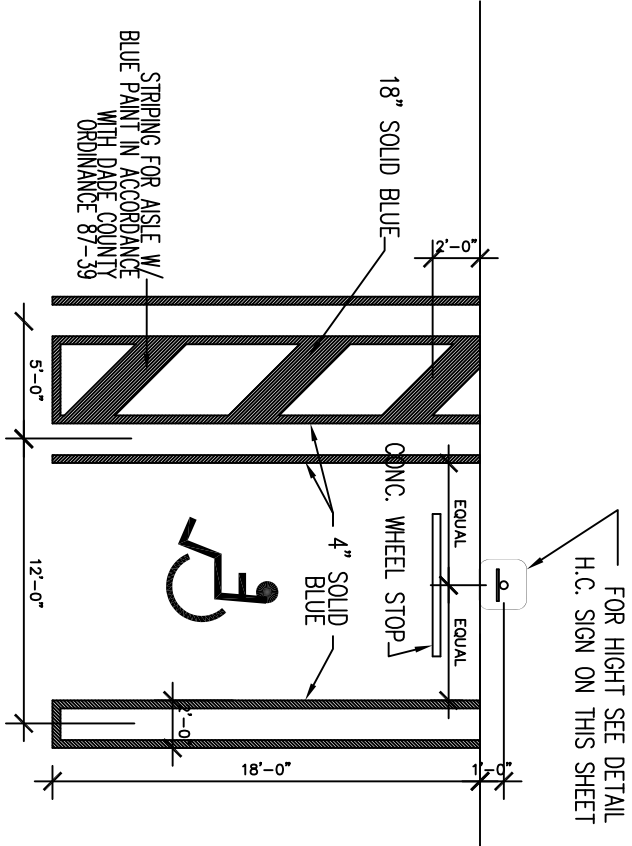




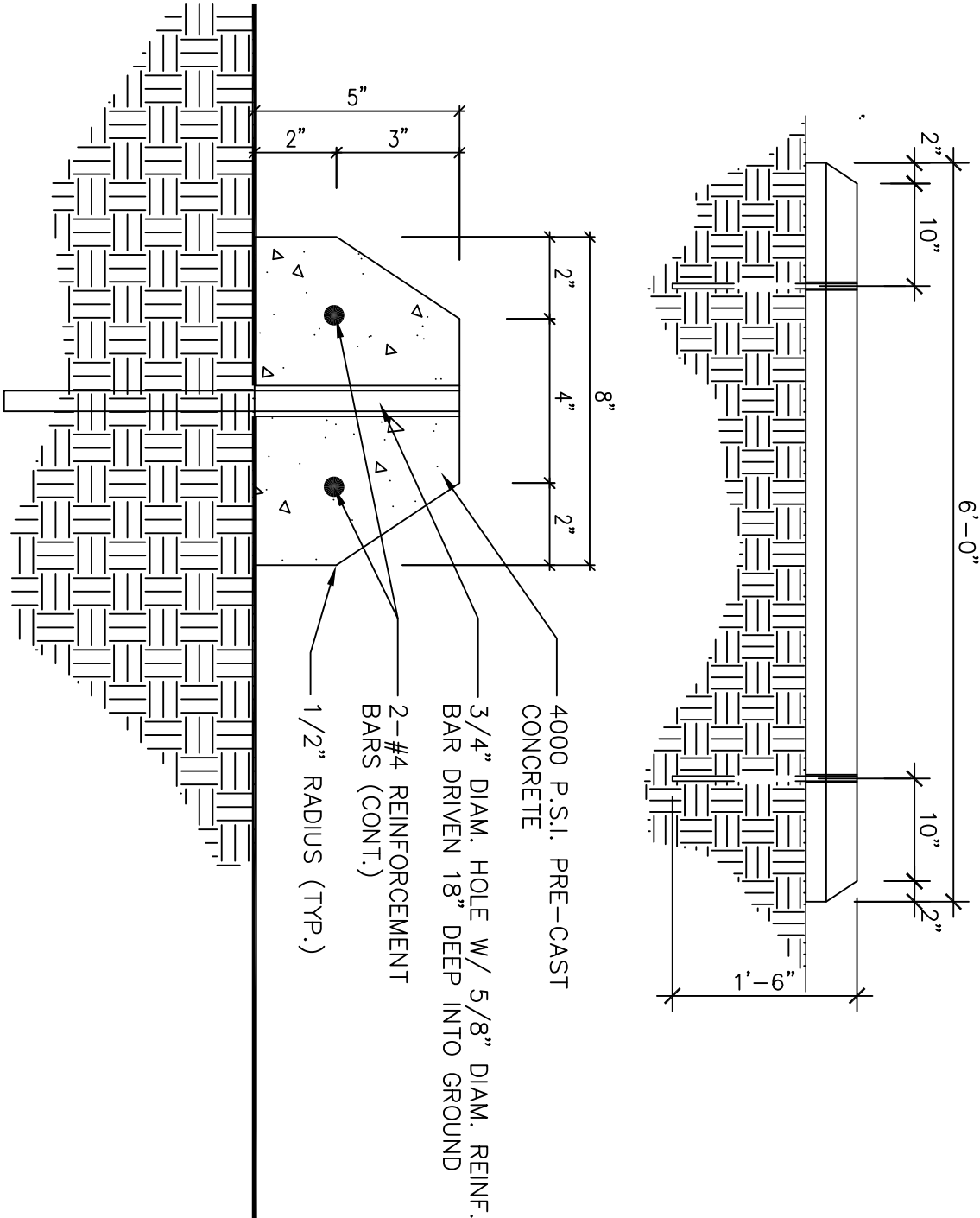
- Demo stairs
- Cut slab
- Build shaft
- Install Chain Lift

05/23/2011 12:08 PM

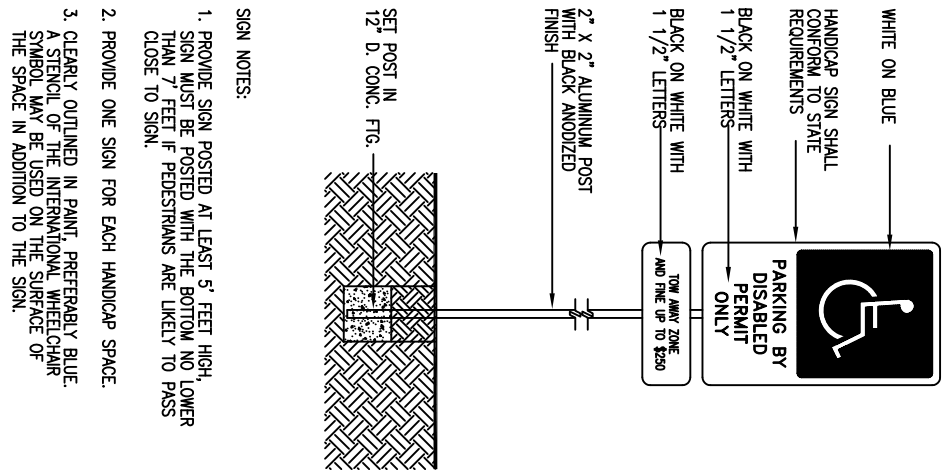




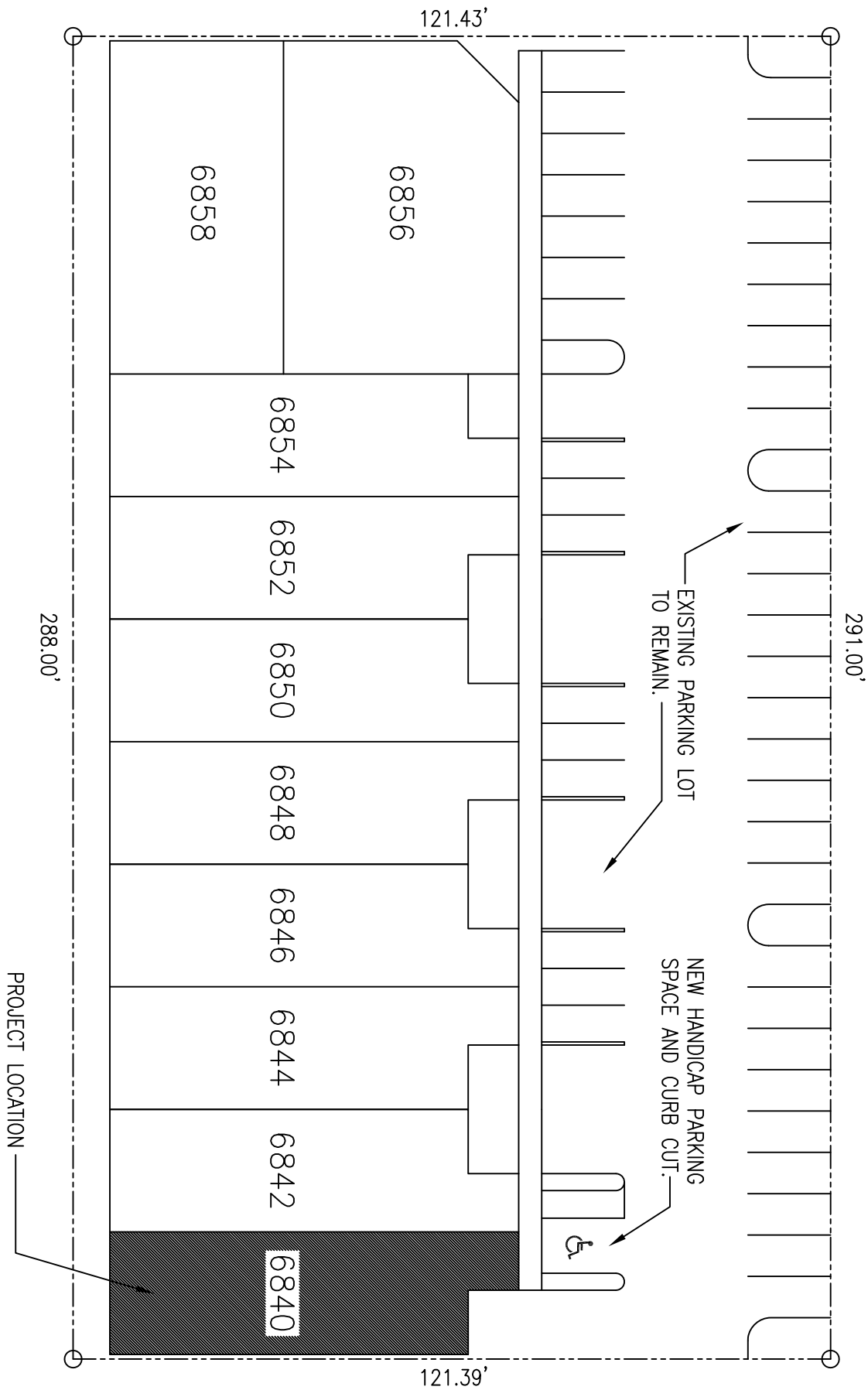
1 PARKING STRIPING DETAIL  
SCALE: N.T.S.



2 WHEEL STOP DETAIL  
SCALE: N.T.S.



3 SIGNAGE DETAIL  
SCALE: N.T.S.



SITE PLAN  
SCALE: 1/32"=1'-0"

### EXISTING USES / PARKING LEGEND

NO.	NAME	USE	UNIT SIZE	REQ'D. PARKING
6840	KALEX CONSTRUCTION & DEVELOPMENT	WAREHOUSE/OFFICE	4,387 SF	15 SPACES
6842	SEA-AIR CARGO EXPORTERS	WAREHOUSE	2,300 SF	3 SPACES
6844	SEA-AIR CARGO EXPORTERS	WAREHOUSE	2,300 SF	3 SPACES
6846	SEA-AIR CARGO EXPORTERS	WAREHOUSE	2,300 SF	3 SPACES
6848	FACTRONICS USA	WAREHOUSE	2,300 SF	3 SPACES
6850	LUCKY-TECH	WAREHOUSE	2,300 SF	3 SPACES
6852	LUORENS PHARMACEUTICAL	WAREHOUSE	2,300 SF	3 SPACES
6854	LUORENS PHARMACEUTICAL	WAREHOUSE	2,300 SF	3 SPACES
6856	STS SHIPPING & TRADING	WAREHOUSE	3,052 SF	4 SPACES
6858	STS SHIPPING & TRADING	WAREHOUSE	2,282 SF	3 SPACES
			25,705 TOTAL SF	43 TOTAL REQUIRED SPACES

EXISTING PARKING SPACES = 45 SPACES  
TOTAL REQUIRED SPACES = 43 SPACES  
PROPOSED USE - NO. 6840 - KALEX CONSTRUCTION & DEVELOPMENT  
TOTAL SQUARE FEET = 4,387 SF  
PARKING REQUIRED = 15 SPACES

REVISIONS	BY
△ BLOS. DEPT. REV. 06-17-08	AC
△ BLOS. DEPT. REV. 07-01-08	AC
△ BLOS. DEPT. REV. 07-01-08	AC
△ BLOS. DEPT. REV. 06-22-08	AC

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AR0015010

PROPOSED INTERIOR RENOVATIONS FOR:  
KALEX CONSTRUCTION  
6840 NORTHWEST 77TH COURT  
MIAMI, FLORIDA 33166

DRAWN JCS
CHECKED JCS
DATE 07-15-08
SCALE AS NOTED
CSN NO. 2007-14
SHEET INDEX
SITE PLAN
SHEET NUMBER A-1

FLOOR PLAN GENERAL NOTES

All interior finishes shall be class "A," or "B" flame spread as per FBC and NFPA.  
Contractor shall provide one coat of primer and two coats of paint on all interior and exterior trim, walls, and ceilings – Colors to be selected by owner.  
Restroom floors and base to be of smooth, corrosion resistant, non-obscurant material min 70" above finish floor at datum as per FBC 1204.3.  
All water closets, lavatories, and sinks shall comply with FBC 2004 edition.  
All Kitchen fixtures, cabinets and appliances to be selected by owner.

KEY NOTES

- 1  
2  
3  
4  
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7  
8  
9  
10  
11  
12  
13  
14
- 1/2" gypsum board over 1" x 3" p.l. wood furring strips at 24" o.c. with R-5 insulation. Typical on perimeter concrete block walls unless otherwise noted.  
3/8" gypsum board over 2" x 4" wood studs at 16" o.c. – see partition type WT-1. Typical for interior partitions unless otherwise noted.  
3/8" gypsum board over 2" x 8" wood studs at 16" o.c. – see partition type WT-2.  
1-hour fire rated partition with 3/8" type 'X' gypsum board over 2" x 4" wood studs at 16" o.c. with R-11 batt insulation – see partition type WT-3. (U.L. Assembly No. U-305)  
1-hour fire rated partition with 3/8" type 'X' gypsum board over 2" x 8" wood studs at 16" o.c. with R-11 batt insulation – see partition type WT-4. (U.L. Assembly No. U-305)  
2" X 2" acoustical ceiling tile grid. Typical unless otherwise noted.  
Ceiling: 3/8" gypsum board over 1/8" x 1-3/8" metal h-h-huts at 16" o.c.  
Existing 1-hour fire rated wall with stucco skim coat over 8" concrete block. Typical on existing party walls.  
3/8" gypsum board over 1-3/8" x 3-3/8" metal studs at 16" o.c. – see partition type WT-5. Typical for interior partitions unless otherwise noted.  
1-hour fire rated partition with 3/8" type 'X' gypsum board over 1-3/8" x 3-3/8" metal studs at 16" o.c. with R-11 batt insulation – see partition type WT-6. (U.L. Assembly No. U-329)  
Ceiling: 1-hour fire rated ceiling with 2-layers 3/8" type 'X' gypsum board anchored to wood floor joists above.  
Pre-fab electric platform lift for vertical accessibility – Ameriglide Atlas Platform Lift (Ameriglide 1-800-790-1635).  
18" deep fixed shelves.  
Stucco on wire lath over 3/4" CDX plywood on exterior face over 2" x 8" p.l. wood studs at 16" o.c. with R-11 batt insulation and with 3/8" gypsum board on interior face. – see structural drawings.

DOOR SCHEDULE

DOORS	DOORS					DOORS				
	SIZE		COMPOSITION		FINISH	HARDWARE		RATING		
	WIDTH	HEIGHT	THICKNESS	HOLLOW METAL	WD-SOLID CORE	WD-HOLLOW CORE	INSULATED METAL	PAINTED	PASSAGE LOCK WITH CLOSER	REMARKS
1	3'-0"	7'-0"	1 3/8"							SWING DOOR
2	3'-0"	6'-8"	1 3/4"							60 SWING DOOR
3	3'-0"	6'-8"	1 3/4"							60 SWING DOOR
4	3'-0"	6'-8"	1 3/4"							60 SWING DOOR
5	3'-0"	6'-8"	1 3/4"							60 SWING DOOR
6	3'-0"	6'-8"	1 3/4"							60 SWING DOOR
7	4'-8"	7'-0"	1 3/4"							FULL-GLAZED BI-FOLD SWING DOOR
8	12'-0"	6'-8"	1 3/4"							SWING DOOR

1. EVERY RESTROOM DOOR SHALL BE DESIGNED TO ALLOW OPENING FROM THE OUTSIDE DURING AN EMERGENCY WHEN LOCKED  
2. ALL DOOR HANDLES TO BE LEVER TYPE COMPLYING WITH ADA.

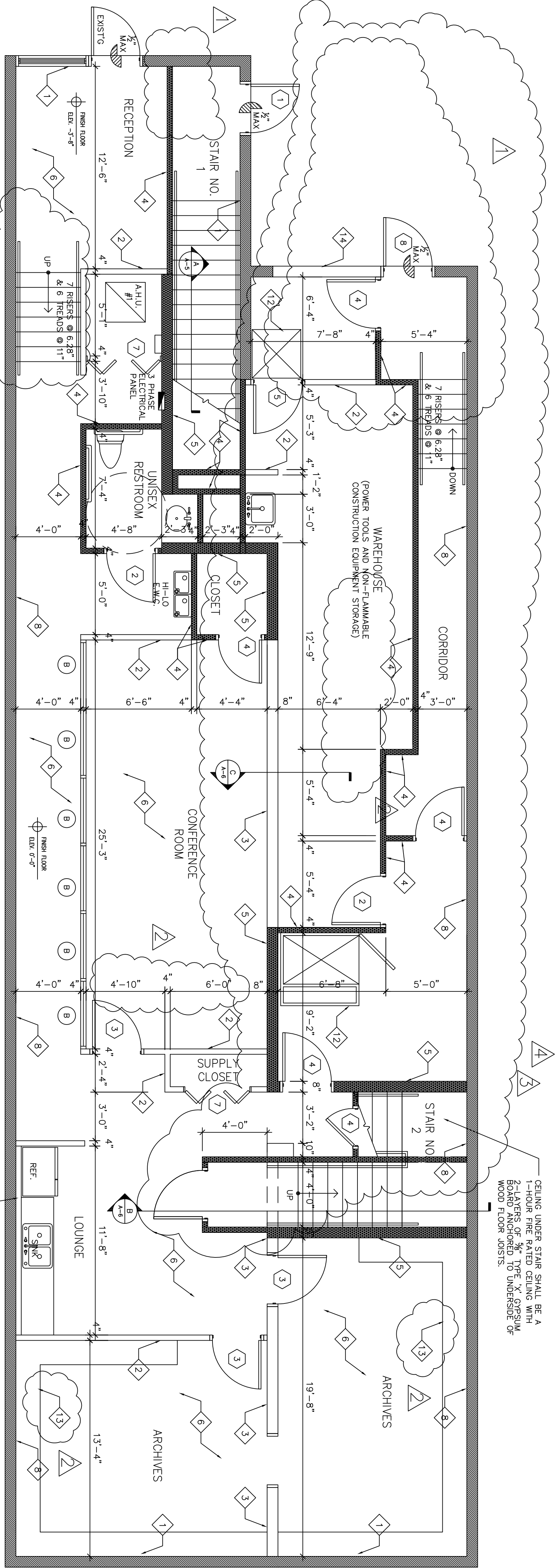
WINDOW SCHEDULE

WINDOWS	WINDOWS					WINDOWS				
	DESIGNATION		TYPE		FINISH	GLASS		REMARKS		
	WINDOW NO.									
A	5'-0" x 3'-6"		SINGLE HUNG	FIXED	ANNOIDIZED ALUMINUM		CLEAR			SAFETY GLASS
B	4'-0" x 8'-0"									SAFETY GLASS

NOTE:  
1. ALL INTERIOR GLAZING TO COMPLY W/ FEDERAL STANDARD 16 CFR 120. GLAZING TO BE CATEGORY II, CAPABLE TO WITHSTAND A 400LB. IMPACT.

AREA CALCULATIONS

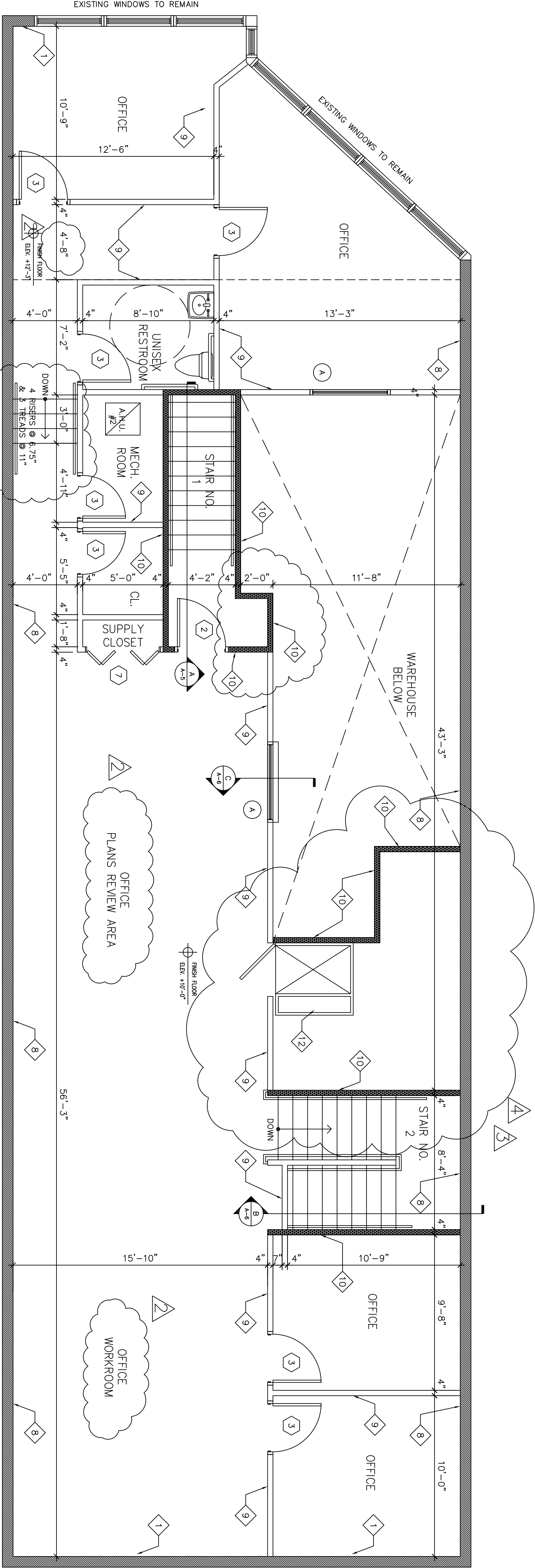
FIRST FLOOR (Warehouse)	290 SQ. FT.
FIRST FLOOR (Business)	2089 SQ. FT.
SECOND FLOOR (Business)	2008 SQ. FT.
TOTAL TENANT SQ. FOOTAGE	4387 SQ. FT.



THIS BUILDING IS FULLY  
FIRE SPRINKLERED.

FIRST FLOOR PLAN

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



THIS BUILDING IS FULLY  
FIRE SPRINKLERED.

SECOND FLOOR PLAN

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

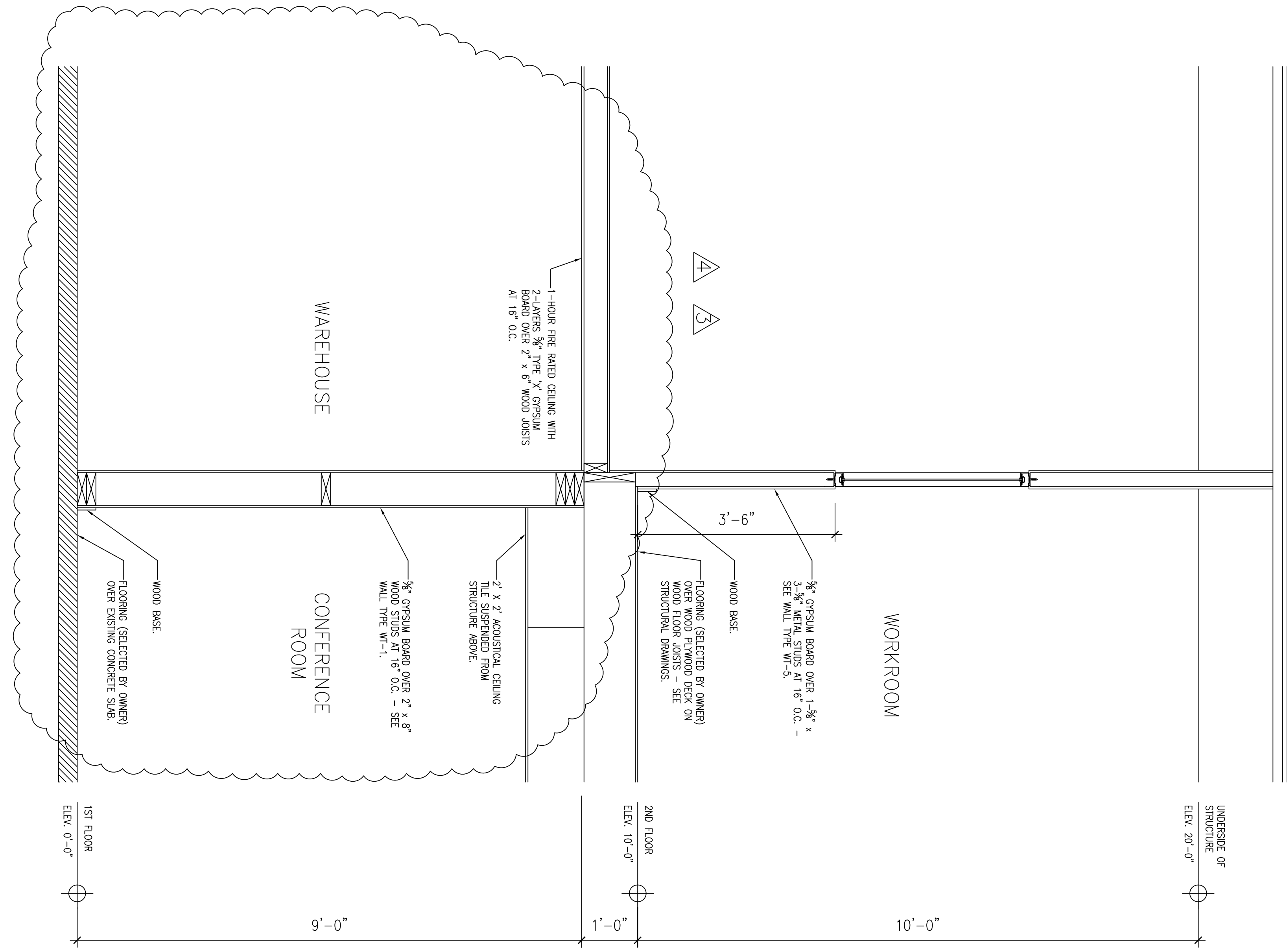
REVISIONS	BY
△ 06-12-08	AC
△ 07-01-08	AC
△ 07-01-08	AC
△ 06-27-08	AC

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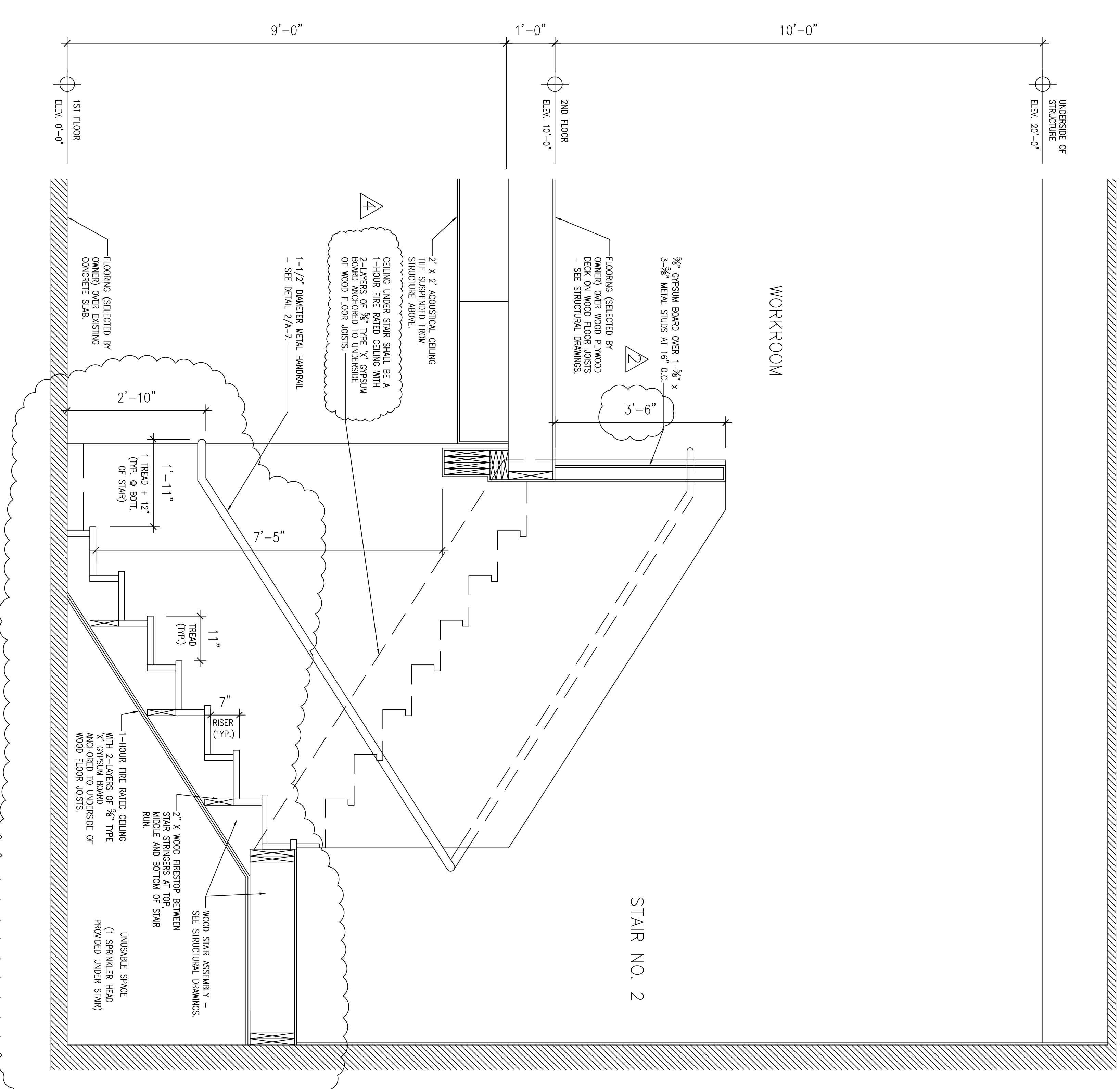
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MIAMI, FLORIDA 33166



REVISIONS	BY
△ BULK DEPT. REV. 06-12-08	AC
△ BULK DEPT. REV. 07-01-08	AC
△ BULK DEPT. REV. 07-01-08	AC
△ BULK DEPT. REV. 06-22-08	AC



C WALL SECTION  
SCALE: 3/4" = 1'-0"



B STAIR SECTION – STAIR NO. 2  
SCALE: 3/4" = 1'-0"

DRAWN BLS
CHECKED BLS
DATE 07-15-08
SCALE AS NOTED
ISSN NO. 2007-14
SHEET INDEX
SECTIONS
SHEET NUMBER <b>A-6</b>

PROPOSED INTERIOR RENOVATIONS FOR:  
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JCS

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