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
- 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 One set of reduced scale (11" x 17") versions of the drawings submitted in item one above.

3. <u>NR</u> One set of overhead transparencies (8  $\frac{1}{2}$ " 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. <u>NA</u> 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. <u>X</u> 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: Barry University Health and Sports Center Bleacher Renovation

Address: 11300 NE 2<sup>nd</sup> Ave, Miami Shores, FL 33161

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: Jeffrey J. Yao, Construction Manager Facilities Services

Applicant's Address: 11600 NE 2nd Ave, Facilities Administration Building, Miami Shores, FL

Applicant's Telephone: (305) 899-3995 FAX: (305) 899-3058

Applicant's E-mail Address: jyao@mail.barry.edu

Relationship to Owner: Construction Manager Facilities Services

**Owner's Name**: <u>Barry College</u>

**Owner's Address**: <u>11300 NE 2<sup>nd</sup> Ave, Miami Shores, FL 33161</u>

**Owner's Telephone:** (305) 899-3057 FAX: (305) 899-3058

Owner's E-mail Address: jyao@mail.barry\_edu

Signature of Owner:

Contact Person: Jeffrey J. Yao, Construction Manager Facilities Services

Contact Person's Telephone: (305) 899-3995 E-mail Address: jyao@mail.barry.edu

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 14,820 SF indoor gymnasium in two-story Health and Sport Center building. The building is used for educational and recreational purposes by the students of the University.

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

\$125,000.00 .

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\*

[X] In Plan Review [] Completed\*

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

Miami Shores Village Building Official requested access to all levels of collapsible bleacher seating being replaced at gymnasium, pursuing FS 553.509 and Florida Building Code.

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

### Issue

### 1: Florida Statutes 553.509 Vertical Accessibility (FBC 11.4.1.3.5)

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 waiver is required in order to provide facilities for public use within reasonable budget limits. Providing accessibility to all and every one of the row levels of the collapsible bleacher seating is not feasible. It would incur in changes to the existing structure and electrical systems to accommodate a chair lift at a high additional cost, and it would cause extreme hardship in order to comply. The proposed design provides adequate dispersed accessible seating at the level of public entry to the bleachers.

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

### Not applicable

[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.

Accessible wheelchair spaces in the amount required by FBC 11.4.1.3.19 (a) (six spaces in each one of two banks of bleachers, each with a capacity of 454 seats) is dispersed in the first row of bleachers located in the level of entry to the bleachers and the gymnasium. Vertical dispersion accessibility to the upper levels (rows) of seating is impractical and will greatly affect the existing structure and use of the gymnasium.

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. Not Applicable

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.

Not Applicable			
Signature	Printed Name		
Phone number			
(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\_29th\_day of JWNG , 20 [] EFFRY J. Ko Printed

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. Florida Accessibility Code (FBC) 11.4.1.3.5 & Florida Statutes 53.509 (Vertical Accessibility)

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: \_\_\_\_\_NA\_\_\_\_\_.

### **Comments/Recommendation:**

I recommend approval of this waiver. The University has provided adequate accessible seating at the lower level. Providing access to all levels would create a unreasonable cost to this project. A lift or an elevator would be required.

Jurisdiction: \_\_\_\_\_ Miami Shores Village

Building Official or Designee

a

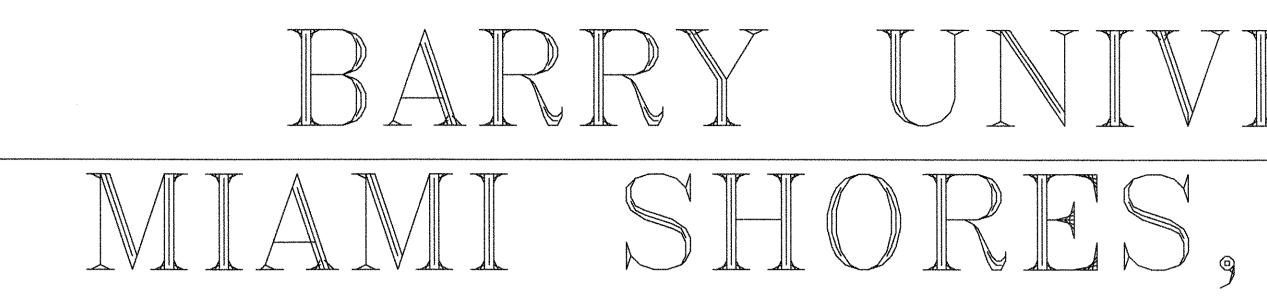
Signature

Norman Bruhn Printed Name

BU1346 Certification Number

Phone: (305) 795-2204 - Fax: (305) 756-8972 Telephone/FAX

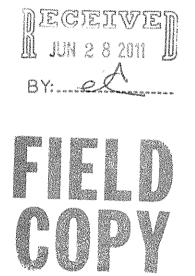
Address: 10050 NE 2nd Ave., Miami Shores, FL 33138-2304



Ι	LEGEND
$\bigotimes$	INDICATES SECTION NUMBER FOR BANK
: <b> </b>	FOOT LEVEL AISLE
	AISLE STEP
	AISLE HAND RAIL
· · ·	SELF STORING RAILED END (SEE DETAIL)
summer contra	END PANEL
ana	TELESCOPIC SEATING IN CLOSED POSITION
E	WHEELCHAIR ACCESS SPACE (33" W × 48" D)
с с	COMPANION SEAT (18" W)
Â	COMPANION SPACE (24"W)
	POWER SUPPLY (WALL MOUNTED)
; 🗖 ;	POWER SUPPLY (FLOOR MOUNTED)
<del>ک</del>	PENDANT CONTROL
0	KEY SWITCH CONTROL (SEE DETAIL)
R	WIRELESS REMOTE CONTROL
	HATCHWAY
	WOOD BACKREST
	CONTOUR PLASTIC BACKREST
	NON-USEABLE SEAT
CM	INDICATES CUT MODULE
BEX	BANK EXTENSION
[]=	= VALUE IN MILLIMETERS

# INDEX OF SHEETS

PAGE	DESCH	RIPTION
1	SH01	COVER SHEET
2	FP01	PLAN OF SEAT
3	FP02	PLAN OF SEAT
4	SC01	SECTION VIEWS
5	SC02	SECTION VIEWS
6	DT01	DETAILS
$\triangle$ 7	E01	END STOP -



THIS MUST BE ON JOB AT TIME OF INSPECTION

APPROVED	BY	DATE
ZONING DEPT		
BLDG DEPT		

Last Modified: Jun 24, 2011 - 4:09pm Plotted on: Jun 27, 2011 - 5:42pm

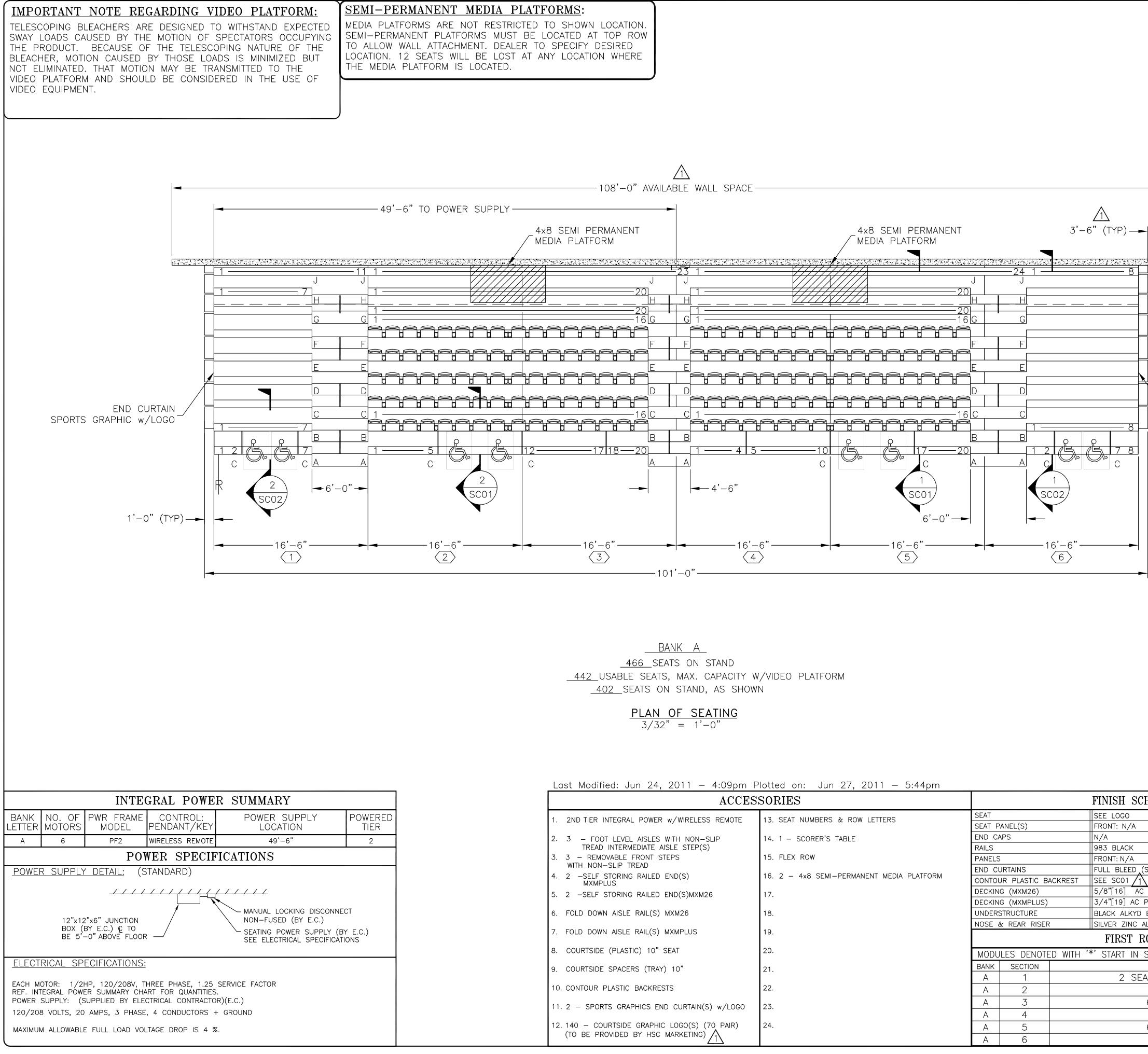
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# BARRY UNIVE

## TING: BANK A TING: BANK B VS: w/BACKRESTS VS: w/OUT BACKRESTS

COMBINATION ROW SPACING

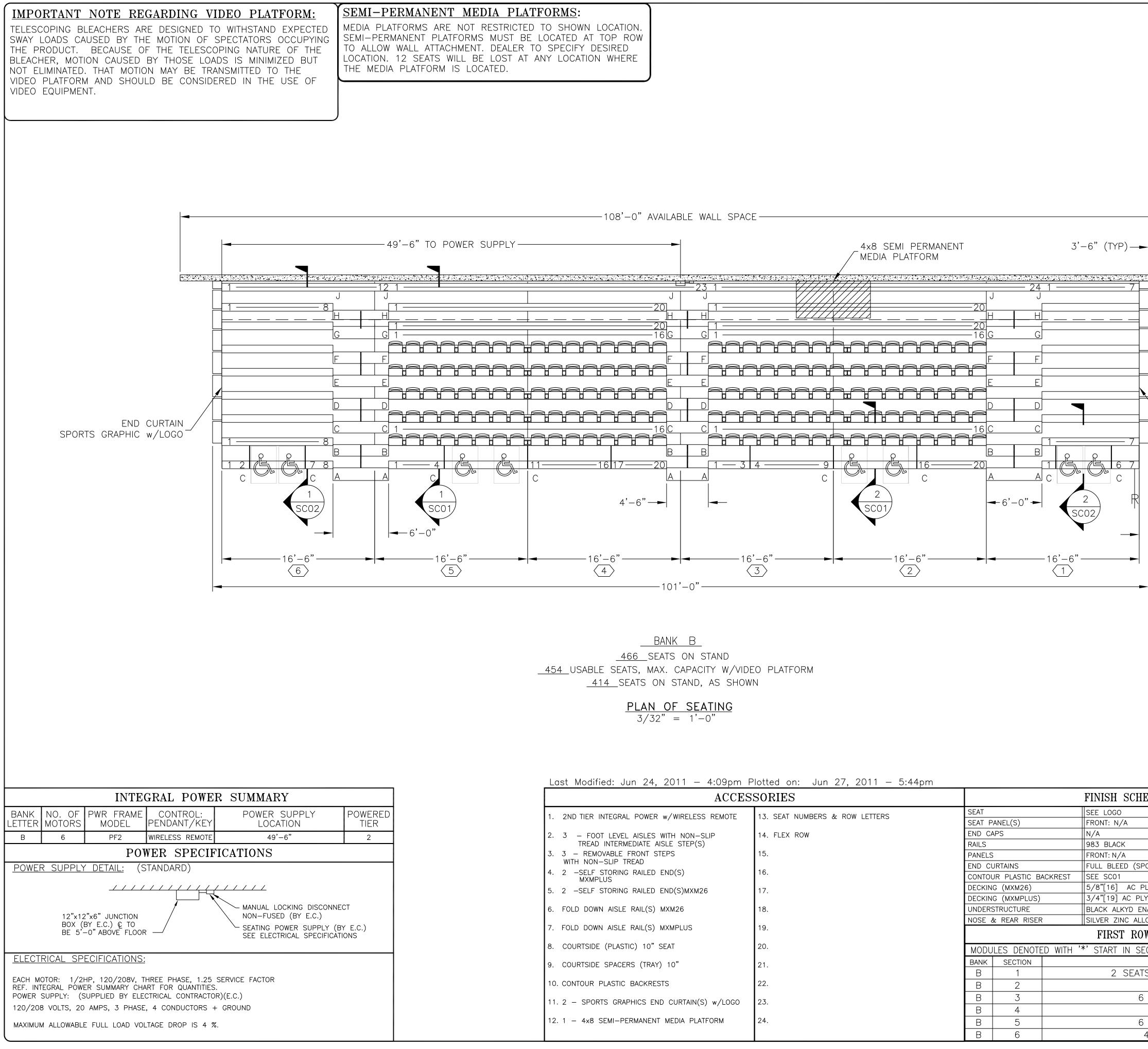
		HUSSEY SEATING COMPANY
RSTRV		SINCE 1835
		Your partner for seating solutions 38 DYER STREET EXT. NORTH BERWICK, ME. 03906 TELEPHONE: (207) 676–2271 FAX: (207) 676–9690
		IMPORTANT THIS PLAN HAS BEEN DRAWN IN ACCORDANCE WITH THE INFORMATION SUPPLIED BY THE ARCHITECT, AND/OR DEALER. HUSSEY SEATING Co. DOES NOT ACCEPT ANY RESPONSIBILITY FOR THE ACCURACY, OR RELEVANCE, SHOULD THERE BE ANY DEVIATION FROM THE INFORMATION SUPPLIED WITHOUT THE APPROVAL OF HUSSEY SEATING CO.
		GENERAL NOTES 1. DEALER WILL VERIFY ALL DIMENSIONS AND INFORMATION
COURTSIDE		SHOWN, INSURE THAT ALL FIELD CHECKED INTERMEDIATE DIMENSIONS EQUAL THEIR CORRESPONDING OVERALL DIMENSION, AND RETURN THIS DRAWING WITH THE APPROPRIATE SIGNATURES FOR FURTHER ACTION.
<b>FINISHES – COLORS</b>		2. HUSSEY SEATING Co. WILL ASSUME RESPONSIBILITY FOR MANUFACTURING AND SUPPLYING PRODUCT ACCORDING TO THIS DRAWING AND APPROVAL.
GENERAL/BACKGROUND COLORS		3. THE ARCHITECT, GENERAL CONTRACTOR AND OWNER WILL INSURE THAT FLOORING IS LEVEL WITHIN $\pm 1/8$ " IN 8'-0" AND THAT THE FLOORING IS CONTINUOUS.
COURTSIDE SEATLOGO LETTER COLORS		4. THE LAYOUT SHOWN IS DRAWN PER HUSSEY SEATING CO. INTERPRETATION OF: <u>NFPA 102 2006</u> IF THE APPLICABLE CODE IS DIFFERENT THAN THE ONE
COURTSIDE SEAT		STATED, PLEASE INDICATE ON THE LINE PROVIDED:
LOGO SHADOW COLORS		TO THE LAYOUT SHOWN, AND THAT HUSSEY SEATING Co. CANNOT BE HELD RESPONSIBLE IF ANY DEVIATION OCCURS.
FIELD CHECK AND APPROVAL INFORMATION		5. HUSSEY SEATING COMPANY STRIVES TO CONTINUOUSLY IMPROVE IT'S PRODUCT AND MANUFACTURING METHODS. THE COMPANY RESERVES THE RIGHT TO MAKE CHANGES WITHOUT NOTICE WHEN, IN THE OPINION OF THE COMPANY, SUCH CHANGES IMPROVE THE PRODUCT OR IT'S PERFORMANCE.
		$\frac{BANK}{BANK: A \& B}$ MODEL: 1 THRU 6 = MAXAM PLUS: 7 THRU 9 = MXM26
RAILS/COLOR (700 SEAT MINIMUM REQUIRED)		STAND TYPE: WALL ATTACHED RISE: 9 5/8" ROW SPACING: TIERS $1-6 = 30$ ": TIERS $7-9 = 24$ "
END CURTAIN/COLOR/LOGO		TIERS: 9 NET SEAT QTY: 1012
END CURTAIN COLOR		
LOGO YES NO IF YES, INCLUDE LOGO		EB     6/11     REV'D     FC     & APPROVAL, ADDED     E01       REV.     CHK     DATE     DESCRIPTION
FLOOR CONSTRUCTION		REVISIONS
FIELD CHECK		
SUBMITTAL APPROVAL		
APPROVED AS DRAWN APPROVED AS NOTED (PLEASE SUMMARIZE CHANGES BELOW)		
REJECTED-REVISE & RE-SUBMIT (PLEASE SUMMARIZE CHANGES BELOW)		FIELD SUMMARY (REQUIRED WITH FIELD CHECK) FLOOR CONSTRUCTION: WOOD WALL CONSTRUCTION: CONCRETE BLOCK ATTACHMENT TYPE: FLOOR ATTACHED
	$\triangle$	Field Check By: <u>TG</u> Date: <u>5/24/11</u> By: <u>TG</u> Date: <u>5/24/11</u>
		NEWTON SEATING COMPANY, INC. P.O. BOX 2858 (32203) 2344 HARPER STREET JACKSONVILLE, FL 32204 E-MAIL: m.bates@newton-fl.com
APPROVED FOR MANUFACTURING		COVER SHEET BARRY UNIVERSITY MIAMI SHORES, FLORIDA
DEALER: DATE:		DRAWN BY: C.CONRAD         DATE: 5/13/2011           CHKD BY: SLK         DATE: 5/17/2011
	J	SCALE: AS NOTED
	-	CAD NO.         JOB NO.         DRAWING NO.           0-31213         0-31213         SH01



$$\frac{\text{PLAN OF SEATING}}{3/32'' = 1'-0''}$$

	ACCES	SORIES				FINISH SCHE
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_   '	. ZND HER INTEGRAL FOWER W/ WIRELESS REMOTE	13. SEAT NUMBERS & ROW LETTERS	SEAT F	PANEL(S)		FRONT: N/A
2	. 3 – FOOT LEVEL AISLES WITH NON-SLIP	14. 1 – SCORER'S TABLE	END C	APS		N/A
	TREAD INTERMEDIATE AISLE STEP(S)		RAILS			983 BLACK
3	. 3 – REMOVABLE FRONT STEPS WITH NON-SLIP TREAD	15. FLEX ROW	PANELS			FRONT: N/A
	. 2 –SELF STORING RAILED END(S)	16. 2 – 4x8 SEMI–PERMANENT MEDIA PLATFORM	END C	URTAINS		FULL BLEED (SPO
	MXMPLUS	10. Z – 4x8 SEMI-PERMANENT MEDIA PLATFORM	CONTO	UR PLASTIC B	ACKREST	SEE SCO1 /1
5	. 2 –SELF STORING RAILED END(S)MXM26	17.	DECKIN	IG (MXM26)		5/8"[16] AC PL
			DECKIN	IG (MXMPLUS)		3/4"[19] AC PLY
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			NOSE	& REAR RISER	2	SILVER ZINC ALLO
7	. FOLD DOWN AISLE RAIL(S) MXMPLUS	19.				FIRST ROW
8	. COURTSIDE (PLASTIC) 10" SEAT	20.	MODU	JLES DENOTE	ED WITH	'*' START IN SEC
q	. COURTSIDE SPACERS (TRAY) 10"	21.	BANK	SECTION		
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	1. 2 - SPORTS GRAPHICS END CURTAIN(S) w/LOGO	23.	А	3		6
			А	4		
1	2. 140 – COURTSIDE GRAPHIC LOGO(S) (70 PAIR)	24.	Α	5		6
	(TO BE PROVIDED BY HSC MARKETING) $1$		А	6		4

F DT01	HUSSEY SEATING COMPANY FUELSESSESSESSESSESSESSESSESSESSESSESSESSE				
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EDULE: COURTSIDE 10" REAR: N/A	Image: BB       6/11       REV'D FC & APPROVAL, AVAILABLE WALL SPACE LOGO BY MARKETING, BACKREST COLOR         REV.       CHK       DATE       DESCRIPTION         REVISIONS       DESCRIPTION       REVISIONS         FIELD       SUMMARY       (REQUIRED WITH FIELD CHECK)         FLOOR CONSTRUCTION: WOOD       WALL CONSTRUCTION: CONCRETE BLOCK         ATTACHMENT TYPE:       FLOOR ATTACHED         Field Check       5 (24 / 11         Field Check       5 (24 / 11				
REAR: N/A END: N/A PORTS GRAPHICS w/LOGO)	By: <u>TG</u> Date: <u>5/24/11</u> By: <u>TG</u> Date: <u>5/24/11</u> NEWTON SEATING COMPANY, INC.				
YWOOD WITH 2 COATS OF CLEAR POLYURETHANE YWOOD WITH 2 COATS OF CLEAR POLYURETHANE	P.O. BOX 2858 (32203) 2344 HARPER STREET JACKSONVILLE, FL 32204 E-MAIL: m.bates@newton-fl.com				
NAMEL OY MATTE W SCHEDULE	PLAN OF SEATING: BANK A BARRY UNIVERSITY MIAMI SHORES, FLORIDA				
ECTION INDICATED, END IN ADJACENT SECTION MODULE LAYOUT	DRAWN BY: C.CONRAD DATE:5/13/2011				
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PLAN	OF	SEATING
3/32	" =	1'-0"

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	T. ZND HER INTEGRAL FOWER W/ WIRELESS REMOTE	13. SEAT NUMBERS & ROW LETTERS	SEAT F	PANEL(S)		FRONT: N/A
	2. 3 - FOOT LEVEL AISLES WITH NON-SLIP	14. FLEX ROW	END C	APS		N/A
	TREAD INTERMEDIATE AISLE STEP(S)		RAILS			983 BLACK
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			DECKIN	IG (MXMPLUS)		3/4"[19] AC PLYW
	6. FOLD DOWN AISLE RAIL(S) MXM26	18.	UNDER	UNDERSTRUCTURE		BLACK ALKYD ENA
			NOSE	NOSE & REAR RISER		SILVER ZINC ALLO
	7. FOLD DOWN AISLE RAIL(S) MXMPLUS	19.		FIRST ROW		
	8. COURTSIDE (PLASTIC) 10" SEAT	20.	MODU	MODULES DENOTED WITH '*' START IN		
	9. COURTSIDE SPACERS (TRAY) 10"	21.	BANK	SECTION		
			В	1		2 SEATS
	10. CONTOUR PLASTIC BACKRESTS	22.	В	2		
	11. 2 – SPORTS GRAPHICS END CURTAIN(S) w/LOGO	23.	В	3		6
	TT. Z STORTS GRAFFIES END CORTAIN(S) W/ E000	20.	В	4		
	12. 1 – 4x8 SEMI-PERMANENT MEDIA PLATFORM	24.	B	5		6
			В	6		4

	HUSSI	EY SEATING COM	MPANY
	•	HUSSEIN	
		SINCE 1835	
	Your partr	<b>er</b> for seating s	olutions
	NC	38 DYER STREET EXT. DRTH BERWICK, ME. 0390	6
		) 676–2271 FAX:(207)	
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REAR: N/A		DN: WOOD DN: CONCRETE BLOCK PE: FLOOR ATTACHED	
	Field Check		Date: _5/24/11_
REAR: N/A END: N/A		N SEATING COMPA	
PORTS GRAPHICS w/LOGO)	P.O. BOX 2858 2344 HARPER JACKSONVILLE,		L: (904) 355–2080
PLYWOOD WITH 2 COATS OF CLEAR POLYURETHANE LYWOOD WITH 2 COATS OF CLEAR POLYURETHANE	JACKSONVILLE,		X: (904) 355—7021 ates@newton—fl.com
NAMEL LOY MATTE		SEATING: BANI	K B
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4 SEATS, 10 SEATS 4 SEATS, 2 SEATS	0-31213	0-31213	FP02

