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: Adams Street Advocates, LLC

Address: 205 Adams Street, Tallahassee, FL 32301

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: GBGH Construction, ILC.

Applicant's Address: P.O. Box 3947, Tallahassee, FL 32315

Applicant's Telephone: *850-459-6531*

Applicant's E-mail Address: matt@gbghconstruction.com

Relationship to Owner: Owners

Owner's Name: Adams Street Advocates, LLC

Owner's Address: 205 Adams Street, Tallahassee, FL 32301

Owner's Telephone: 850-205-8825

Owner's E-mail Address: dave@adamsstadvocates.com

Contact Person: Dave Ericks

Signature of Owner:

Contact Person's Phone: 850-205-8825 E-mail : dave@adamsstadvocates.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.

[\boldsymbol{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.)

This is an existing two-story building located in downtown Tallahassee; the building footprint is approximately 820 square feet. It is currently used as office space and will remain so after the alterations.

5. Project Construction Cost (Provide cost for new construction, the addition or the alteration): Construction costs for the interior alterations are expected to be approximately \$220,000.

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

[\boldsymbol{X}] Under Design [] Under Construction*

[] In Plan Review [] Completed*

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

The main floor of the existing office space is currently 4 steps above the outside sidewalk (approximately 25-3/4"), and is not wheelchair accessible. The existing interior stair does not meet the ADA stair requirements.

A preliminary layout of the altered interior was discussed with the local Building Official along with the difficulty of providing landings and a 26' ramp within the limited footprint. The Building Official indicated they could not grant a waiver on the entrance access and that the applicant would need to seek a waiver from the Florida Building Commission. 7. **Requirements requested to be waived.** Please reference the applicable section of Florida law. Only Florida-specific accessibility requirements may be waived.

Issue

1: Request 201.1., Vertical Accessibility, be waived to ADA standards. The intent is to allow steps to the main floor level from the exterior, and to use the existing interior stair without limiting the occupant load of the upper level to 5 persons (the upper occupancy is existing and will not be increased).

Issue

2: Request 202, Existing Buildings and Facilities, be waived to ADA standards. The intent is to leave the front steps but to upgrade other accessibility features per the attached drawing (new restrooms, enlarging all doors, etc.).

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 face of the building is on the property line. There is a 6" step from the public sidewalk to a 30" deep landing onto which the entry door swings. After passing through the door and going about 24", there are three interior steps. The applicant cannot raise the sidewalk to correct the first barrier and to provide an interior ramp to correct the next three steps would severally impact the use of the first floor area.

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

A single contractor has been selected for the project and is to attach cost information to this package.

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 single contractor has been selected for the project and is to attach cost information to this package.

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.

I have prepared this application, the drawings and the text describing the existing and proposed new conditions. I would ask that relief be granted for the reasons I have stated above. The building use and occupancy is not changing. We are providing substantial accessibility upgrades throughout the facility to the maximum extend feasible. It is my intent to attend both meetings to answer any questions.

Barry A. Wilson Jr.AR0014153SignaturePrinted Name

Phone number 850-838-0521 architect@timelessway.com

(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.

day of JUNE, 20 12 Dated this Signature MATT MCHAFFIE

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. <u>The proposed alteration to the primary function area is regulated under Section 202.4, 2012</u> <u>Florida Accessibility Code. The provisions of Section 202.4, including vertical accessibility,</u> <u>are applicable. Based upon 553.512 Florida Statutes, only the Florida Building Commission</u> <u>may grant waivers to the accessibility code.</u>

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 [x] <u>A review of City records indicates no building permit activity within the</u> <u>last</u><u>three years at 205 S Adams St Tallahassee FL</u> <u>32301</u>

Comments/Recommendation Except for attesting to the accuracy of the cost estimates as presented, to the best of my knowledge, all information stipulated herein appears to be true and accurate.

Jurisdiction	(<u>City of T</u>	allahassee				
Building <u>6/19/12</u>	Official or		Designee	<u>R</u>	obert	5	Tredik
			Signature				
			Robert S Tredik Printed Name				
			BU230 Certification Number				
			850-891-7071 Telephone/FAX				
		Address:	City Hall Box B28 Tallaha	ssee FL 323	01		

Budget Breakdown

GBGH CONSTRUCTION

ADAMS ST. ADVOCATES PO BOX 3947 TLH, FL 32315

FAX 850-205-7189 OFFICE 850-205-7190

ADA Access Ramp Date:

June 18, 2012

Date:	June 18, 201	2		
Budget #	Budget Name	WITH VERTICAL LIFT	TUOHTIW	
01710	Cleaning	1200	6600	
01900	Miscellaneous	350	250	
02050	Demolition	18440	11700	
02200	Sitework	1200	0	
03050	Concrete	5800	2100	
04050	Masonry	700	300	
05120	Structural Steel	350	150	
05500	Metal Fabrications	2500	1400	
06100	Rough Carpentry	3200	3500	
08400	Storefront	5800	0	
09000	EIFS / Stucco	650	0	
15400	Plumbing	1400	11400	
16050	Electrical	1200	3800	
	Subtotal	42790	41200	
	Contractor's Fee	8558	8240	
	Total	51348	49440	
	Cost per sq ft.	32.0925	30.9	
	Percentage of total project cost	25	22	

GBGH CONSTRUCTION INC

CBC1255153

7-2-12 **PROPOSAL**

To: FBC

RE: ADAMS STREET ADVOCATES- OFFICE RENOVATIONS

205 S. ADAMS ST. TALLAHASSEE, FL 32301

WE ARE PLEASED TO SUBMIT A COST ESTIMATE AND PROPOSAL FOR THE WORK DESCRIBED BELOW. PROPOSAL BASED ON PRELIMINARY DRAWINGS BY BARRY WILSON ARCHITECTURE DATED 6-18-12.

SCOPE OF WORK: ADA ACCESS LIFT

- DEMO EXISTING FIRST FLOOR OFFICES, INTERIOR WALLS, AND SELECTED EXTERIOR OPENINGS.
- DEMO EXISTING FOUNDATION, SLAB, AND ORIGINAL STRUCTURAL DOUBLE BRICK WALLS.
- INSTALL TEMPORARY SHORING AND SUPPORT FOR REMAINING WALLS FOR INSTALLATION OF ADA VERTICAL LIFT AND NEW ENTRANCE STAIRS.
- EXCAVATE AND PREP FOR INSTALLATION OF NEW ENTRANCE STAIRS.
- PUMP, PLACE, AND FINISH CONCRETE FOR ENTRANCE STAIRS.
- INSTALL METAL HANDRAILS ALONG ENTRANCE STAIRS.
- INSTALL NEW ENTRANCE DOOR AND HARDWARE.

TOTAL ESTIMATED COST......\$ 51,348.00

THIS PROPOSAL IS 25% OF TOTAL ESTIMATED PROJECT COST, NOT INCLUDING OTHER DESIGN OBSTACLES THAT ARE UNFORESEEN OR TRADE CATEGORIES AFFECTED DUE TO THE ENTRANCE STAIRS AND VERTICAL LIFT. THIS PROPOSAL DOES NOT INCLUDE THE ADA IMPROVEMENTS TO BE MADE TO THE INTERIOR OF THE BUILDING PROPOSED BELOW:

SCOPE OF WORK: PROPOSED ADA INTERIOR IMPROVEMENTS

- 2 NEW ADA REQUIRED BATHROOMS.
- FRAME ALL NEW CORRIDORS, HALLWAYS, AND OFFICES FOR ACCESSIBILITY
- INSTALL ACCESSIBLE INTERIOR DOORS AND HARDWARE

This proposal is 22% of the total estimated project cost and includes ADA upgrades to the existing office such as 2 new bathrooms, interior doors and hardware, and hallways/corridors to accommodate accessibility. This proposal does not include any access regarding ramps.

IF BOTH PROPOSALS WERE COMPLETED, THE COSTS WOULD MORE THAN LIKELY BE WELL OVER 50% OF THE TOTAL COST OF THE PROJECT AND WOULD ALSO ELIMINATE OVER 50% OF THE ENTIRE FIRST FLOOR USEABLE AREA. PLEASE SEE BUDGET BREAKDOWN FOR ITEMIZED CATEGORIES.

RESPECTFULLY SUBMITTED,

MATT MCHAFFIE	850-459-6531		MATT@C	BBGHCONSTRUCTION.COM					
P	0 BOX 3947	-	- TALLAHASSEE, FL 323						
0	FFICE 850-20	5-71	90	FAX 850-205-7189					
WWW.GBGHCONSTRUCTION.COM									



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-+ <u>3/8</u>" = 1 FOOT SCHEMATIC NEW LOWER LEVEL

4

DR.AWING #



TO THE BEST OF MY KNOWLEDGE, THESE PLANS AND SPECIFICATIONS COMPLY WITH THE APPLICABLE BUILDING CODES AND FIRE SAFETY CODES AS DETERMINED BY THE LOCAL AUTHORITIES.

SHEET