WELLINGTON COMMUNITY HIGH SCHOOL AUDITORIUM

Issue: Vertical accessibility to all rows of seats in a tiered auditorium.

Analysis: The applicant is requesting a waiver from providing vertical accessibility to all rows of seats in a new, $11,529,022 auditorium addition. The facility will have 806 seats, requiring 12 wheelchair seating locations and companion seats. These are planned for the front, center and rear of the auditorium. No estimates were provided, as the applicant contends it is an issue of technical infeasibility, rather than cost. Other accessible features such as ramps, an elevator, accessible toilets and a chair lift to the stage are components of the overall project design.

Project Progress:

The project is under construction.

Items to be Waived:

Vertical accessibility to all rows of seats, as required by Section 553.509, Florida Statutes.

553.509 Vertical a ccessibility. Nothing in Sections 553.501-553.513 or the guidelines shall be construed to relieve the owner of any building, structure or facility governed by those sections from the duty to provide vertical accessibility to all levels above and below the occupiable grade level regardless of whether the guidelines require an elevator to be installed in such building, structure or facility, except for:

(1) Elevator pits, elevator penthouses, mechanical rooms, piping or equipment catwalks and automobile lubrication and maintenance pits and platforms;

(2) Unoccupiable spaces, such as rooms, enclosed spaces and storage spaces that are not designed for human occupancy, for public accommodations or for work areas; and

(3) 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.

Waiver Criteria: There is no specific guidance for a waiver of this requirement in the code. The Commission’s current rule, authorized in Section 553.512, Florida Statutes, provides criteria for granting waivers and allows consideration of unnecessary or extreme hardship to the applicant if the specific requirements were imposed.
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:** Auditorium Addition for Wellington Community High School

**Address:** 2101 Greenview Shores Blvd., Wellington, FL 33414

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:** Richard J. Logan, AIA – MPA Architects, Inc.

**Applicant's Address:** 1801 Centrepark Drive East, Suite 175, West Palm Beach, FL 33401

**Applicant's Telephone:** 561-683-7000 **FAX:** 561-478-3922

**Applicant's E-mail Address:** rlogan@mpa-pb.com

**Relationship to Owner:** Architect of Record

**Owner's Name:** The School District of Palm Beach County

**Owner's Address:** 3661 Interstate Park Rd. N., Suite 200, Riviera Beach, FL 33404

**Owner's Telephone:** 561-882-1907/Cell 561-722-0844 **FAX:** 561-882-1970

**Owner’s E-mail Address:** hader@palmbeach.k12.fl.us

**Signature of Owner:** [Signature]

**Contact Person:** Dave Hader

**Contact Person’s Title:** [Title]

**Contact Person’s Telephone:** 561-882-1907 **E-mail Address:** hader@palmbeach.k12.fl.us
This application is available in alternate formats upon request.
Form No. 2001-01
3. Please check one of the following:

[ ] New construction.

[X] 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.)

The Project consists of a stand alone Auditorium Building addition to an existing High School Campus. The Auditorium consists of 28,093 gross square feet, 3 floors, with 806 seats of which 12 are wheelchair accessible with companion seats. FBC 11-4.1.3(19)(a) requires 12 wheelchair accessible seats for the 806 seats. The wheelchair accessible seat are dispersed at the bottom, middle and upper levels of the seating area.

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

$11,529,022.42

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

[ ] Under Design [X] Under Construction*

[ ] In Plan Review [ ] Completed*

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

The School District of Palm Beach County Building Department requires a waiver relieving the requirements of FBC 11-4.1.3(5) prior to issuing a certificate of occupancy. The Building Department has noted that the Auditorium does not comply with the intent of the guidelines requiring accessibility to all levels above and below the occupiable grade level by interpretation of the code. We submit this request for relief as our seating design provides accessible seating on the bottom and middle levels by means of ramps and the upper level by means of an elevator.
7. Requirements requested to be waived. Please reference the applicable section of Florida law. Only Florida-specific accessibility requirements may be waived.

Issue

1: FBC 11-4.1.3(5) Vertical Access to all rows of seating in the Auditorium

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 necessary in order to provide an Auditorium for Public use within the bounds of the budget. The floors of the Auditorium are sloped at the bottom section and stepped at the top section in order to provide proper sightlines for the seats. Providing accessibility to all levels of the seating area is not feasible and we feel the design provides adequate accessible seating.

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

[ ] The owner has made a diligent investigation into the costs of compliance with the code, but cannot find an efficient mode of compliance. Provide detailed cost estimates and, where appropriate, photographs. Cost estimates must include bids and quotes.
9. Provide documented cost estimates for each portion of the waiver request and identify any additional supporting data which may affect the cost estimates. For example, for vertical accessibility, the lowest documented cost of an elevator, ramp, lift or other method of providing vertical accessibility should be provided, documented by quotations or bids from at least two vendors or contractors.

a. All access including but not limited to ramps and an elevator are already part of the project and is not a separate line item in the cost estimate.

b. 

c. 

10. Licensed Design Professional: Where a licensed design professional has designed the project, his or her comments MUST be included and certified by signature and affixing of his or her professional seal. The comments must include the reason(s) why the waiver is necessary.

Accommodations for accessibility are presently provided in the seating area which is indicated in the “Request of Waiver” as per the attached documents. The accommodations provided are intended to follow FBC 11-4.33.3 “Placement of wheelchair locations” requirements. To provide access to all individual seating levels is technically not feasible.

Signature: Richard J. Logan, AIA

Printed Name

Phone number: 561-683-7000

(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 8TH day of AUGUST, 2008.

Signature

Richard J. Logan
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. *This issue is being referred to the Florida Building Commission because the plans do not show accessibility to all levels of the facility as required by Florida Specific Requirements of FBC- Building section 11-4.1.3(8)*

b. *To the best of my knowledge, all information stipulated herein is true and correct.*

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: *This is new construction*

**Comments/Recommendation**  
*I recommend the Florida Building Commission approve the request*

---

**Jurisdiction:** *Palm Beach County School District Building Department*

**Building Official or Designee**  
Signature: [Signature]

*Thomas Hogarth, PE, CBO*  
Printed Name

*BU0000316*  
Certification Number

*561-688-7597 / 561-688-7694*  
Telephone/FAX

**Address:** *3300 Summit Blvd, West Palm Beach, FL 33406*