## 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:Through The Years Vintage Market
Address:102 East Alfred, Tavares, FL 32778
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:Wayne Gattilia
Applicant's Address: _312 NE 26 <sup>th</sup> Street, Wilton Manors FL 33305
<b>Applicant's Telephone</b> : 561-385-5579 <b>FAX</b> :n/a
Applicant's E-mail Address: In24hours@aol.com
Relationship to Owner:Partner in the Business
Owner's/Tenant's Name:_Russell Alan Johnson
Owner's Address:312 NE 26 <sup>th</sup> Street, Wilton Manors, FL 33305
<b>Owner's Telephone</b> :_206-291-5621 <b>FAX</b> n/a
Owner's E-mail Address:Guynextdoorsea@aol.com
Signature of Owner: Russell alan Jomson
3. Please check one of the following:
[] New construction.  Please call of email with ques  Rule 61G20-4.001  Rule 70012  Rule 61G20-4.001
FBC 2012-01 Rule 61G20-4.001

Request for Waiver

effective 4/25/2013

[] Addition to a building or facility.
[] Alteration to an existing building or facility.
[] Historical preservation (addition).
[X] Historical preservation (alteration).
4. <b>Type of facility.</b> 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 building is a 2 story, 2610 square foot building, originally built as a house but has been used commercially going back to 1935. This building is on the Historical Society of Tavares designated Registry as #16. This house has documented commercial use going back to 1935 as a boarding house, in the 1950's as the Greyhound bus depot for the City of Tavares, and last used as CATS (a counseling center). We would like to open it as a retail Vintage Market (a less formal Antique Store) keeping the historical integrity & design of the building as a major component of the store.
5. Project Construction Cost (Provide cost for new construction, the addition, or the alteration):
6. <b>Project Status:</b> 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 [X] Completed*
* Briefly explain why the request has now been referred to the Commission.
We are not planning any construction or alterations. We have not altered the building and would like to retain the historical integrity of this important historical building to the city of Tavares, FL. The building had previously been made wheelchair accessible for previous commercial use.
7. <b>Requirements requested to be waived.</b> Please reference the applicable section of Florida law. Only Florida-specific accessibility requirements may be waived.
Issue

1: Wheel chair access to 2<sup>nd</sup> floor, of this 2 story building on the City of Tavares, Historical Register to use as retail space.

Issue	
2:no other issues	

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.

\_This building is on the City of Tavares, FL Historical Society Registry. It is an important historical building and we are required to keep it as in as original historic condition as possible. This house does not have the clearance needed at the base of the stairs to put a wheel chair lift and there is no other way to add wheel chair access to the 2<sup>nd</sup> floor of the 2 story house. The city has now zoned this area mixed use and is trying to make it more commercial, not residential for their future growth plans. Not allowing the 2<sup>nd</sup> floor to be used commercially would make this building functionally obsolete. Thus risking the demolition of this historically important building to the city, for the more dense city future growth plans. We are also trying to preserve this building.

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

We purchased this building with the intent of opening this store using both floors to provide enough retail space to make a comfortable living. Without the space on the 2<sup>nd</sup> floor, there will not be enough room for our vintage items to be displayed for sale. In addition, the cost of adding a wheel chair ramp would be cost prohibitive as it would require additions to the house for an elevator or wheelchair lift, as there is presently not enough room at the base of the stairs. The purchase price of this building was \$55k, the costs of these additions would not be able to be financed as the building value could not support such expensive additions. Not receiving a waiver, would financially bankrupt our business as we would never be able to open.

[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.

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. We were not able to find anyone to give us a quote, as an elevator or wheelchair lift is not possible with the present building. It would require partial demolotion of the building or an entire addition to handle this. Again the cost of the building was \$55k, we can not afford to pay for an addition and all these costst that would easily be 50% to 100% of the price of the building.
b. We do want to serve everyone equally and will make accommodations to film merchandise on the 2 <sup>nd</sup> floor with our iPad and show anyone who would like to view it and also to bring merchandise downstairs to show them. No services will be performed upstairs that are not available downstairs as the entire building will be a retail vintage market.
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10. <b>Licensed Design Professional</b> : Where a licensed design has designed the project, his or her comments <b>MUST</b> 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.
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 5th day of August, 2014

Signature

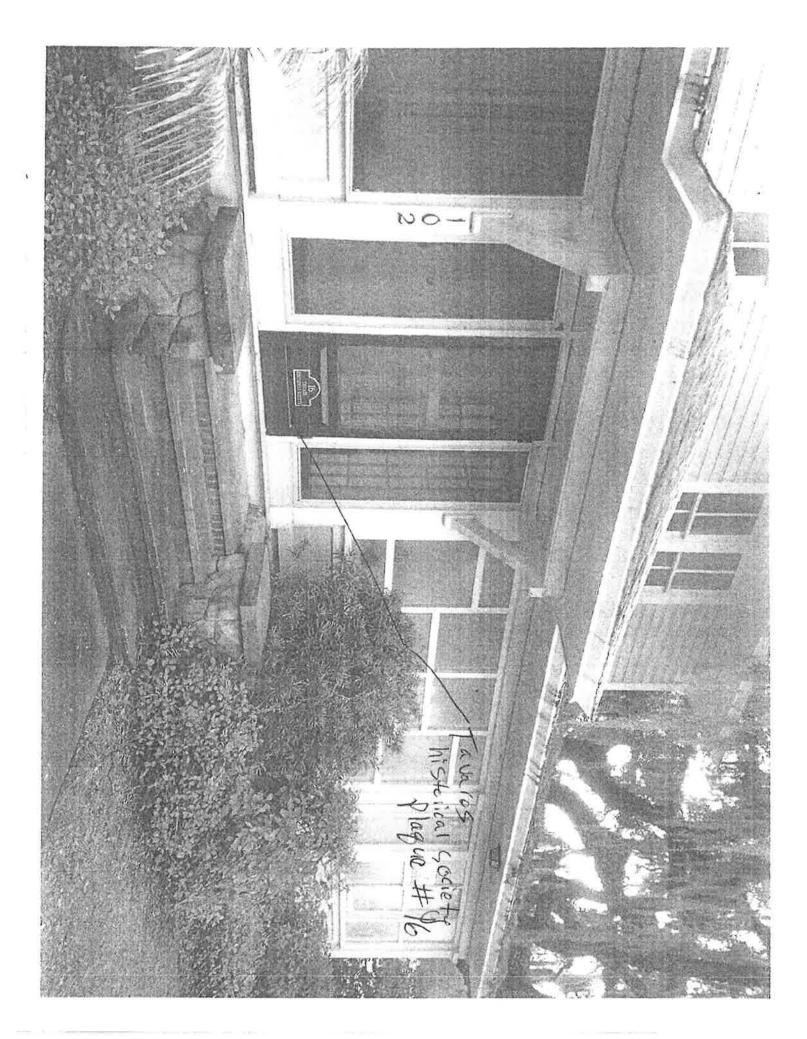
\_\_\_ Wayne Gattilia

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. SECTION 201.1.1 FLA. ALCESS. CODE 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 Jurisdiction Building Official or Designee Printed Name BU1078 Certification Number 352-602-6641 (CELL) Telephone/FAX Address 201 E, MAIN ST, POBOX 1068, TAVARES, FLORIDA 32778 - 1068



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