# 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: Watermark Clubhouse	
Address: 9324 Seider Rd, Winter Garden, FL, 34787	
2. Name of Applicant. If other than the owner, please indicate rela owner and written authorization by owner in space provided:	tionship of applicant to
Applicant's Name: Raymond L. Scott, Architect of Record	
Applicant's Address: 429 S. Keller Road #200, Orlando, FL 32810	
Applicant's Telephone: 407-660-2766 FAX:	
Applicant's E-mail Address: rscott@scottarchitects.com	
Relationship to Owner: Architect of Record	
Owner's/Tenant's Name: Meritage Homes (Sean Ells)	<del>.</del>
Owner's Address: 5337 Milenia Lakes Boulevard, suite 410, Orlando, FL 32839	
Owner's Telephone: 407-571-1817 FAX 407-712-8688	
Owner's E-mail Address: sean.ells@meritagehomes.com	
Signature of Owner:	
3. Please check one of the following:	
[x] New construction.	
FBC 2012-01 Request for Waiver	Rule 61G20-4.001 effective 4/25/2013

[] 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.)  A total of 8,245 SF, single story (35' height), residential clubhouse with 5,066 SF of enclosed space (kitchens, gym, yogs room,
multi-purpose/flex rooms, rest rooms, storage rooms, offices, closets, garbage rooms.) and 1,179 SF of unenclosed areas
(pool, pool deck, playground pavilion, birthday pavilion, and trellis).
5. Project Construction Cost (Provide cost for new construction, the addition, or the alteration):  The total cost of the building is \$1,153,023.00
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.
Orange County Building Department has indicated in their review of the plans, that the proposed observation
deck does not meet the vertical accessibility requirement to this area.

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

Issue

FBC 2012-01 Request for Waiver

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.  [x] Substantial financial costs will be incurred by the owner if the waiver is denied.
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Installing either a vertical cab lift, or a stair lift, would place too much of a linancial hardship on the community. Currently, the clubhouse is under construction,
and adding a vertical fift, or stair lift, would put the project construction cost over budget. The added costs would result in a loss of amenities within the clubhouse, and then added on to the price of homes within the community to make up for the added construction costs.
[] 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.
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FBC 2012-01

Request for Waiver

Rule 61G20-4.001

effective 4/25/2013

any additional supporting data accessibility, the lowest documen	imates for each portion of the waiver request and identify which may affect the cost estimates. For example, for vertical sted cost of an elevator, ramp, lift or other method of providing provided, documented by quotations or bids from at least two
a. The cost of a vertical lift as provide	ed by Elevators Solutions will be \$25,546.00.
b	
c	
comments MUST be included an seal. The comments must include	al: Where a licensed design has designed the project, his or her nd certified by signature and affixing of his or her professional the reason(s) why the waiver is necessary.
amear	Printed Name
Phone number 407-869-2765  (SEAL)  (SEAL)	

FBC 2012-01 Request for Waiver

## **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.

day of _	AUGUST	, 20/4
YA		
	T	day of August

### **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.

FBC 2012-01 Request for Waiver

# 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. DOI.I.I 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 No Cost of Construction
Comments/Recommendation OFFERVATION DECK 16 ABONE AN APART MENT ECHNIFLEX CUMBHOUSE + 18 APPROXIMATELY
Jurisdiction DRAPLE COUNTY
Building Official or Designee Signature Signature
Printed Name
Certification Number
Telephone/FAX
CINDY, NIELGEN C OCFL. NET
Address: P.O. BOX RUGOT, OF BURD, SAFETY  Address: P.O. BOX RUGOT, OF IXNDO, FL BREON - 24807
Rule 61G20-4 001

FBC 2012-01 Request for Waiver

ELEVATOR SOLUTIONS, INC.
3171 Rolling Hills Lane, Apopka, Fl 32712
Toll Free 866 501 6483 Office 407 889 8681 Fax 407 889 8681
Email: sales@elevatorsolutions-fl.com

AGREEM	ENT	Savaria		\$	26,546.00
			Vertical Platform Lif	t .	
Contractor I		Contact			
Company:	Edwards Construction Services, Inc.				
Name:	Matthew Celinski	Phone:	407-515-1026		
Address:	4301 Vineland Road, Ste E12	Fax:	407-872-3966		
City:	Orlando	Cell: Email:	407-883-9425	of a a a a a a b a	untion nam
State: Zipcode:	FL 32811	Alt phone:	mcelinski@edwar	usconsut	JCBOH.COM
zipcode.	32011	All priorie.			
Job Site					
Project:	Watermark Clubhouse #2				
Address:	7650 Lower Gateway Loop	Date:	August 7, 2014		
City:	Orlando	Estimate #	: TBD		
State:	FL	Rep:	Jimmy Farrow		
Zipcode:	32827	6			
County:	Orange				
					· · · · · · · · · · · · · · · · · · ·
•	ent is entered into this day, the 7th of	•	•		
ELEVATOR	SOLUTIONS, INC and the Builder,	Edwards (	Construction Serv	rices, Inc	•
Quote (attach	ted in this quote as per the plans and ned hereto). All relevant state permits ess are included in the quoted price. A	and instalia Annual Certi	ition inspections re	quired du	ring the
		ERMS			
Total price o	f this contract without options:			\$	26,546.00
1. A deposit	of 10% is required to provide Enginee	ring & Plans	s,State Permits		
and to hold th	ne price quoted for a period of six (6) r	nonths.		\$	2,654.60
	nal draw of 60% will be required prior	_		\$	15,927.60
	completion of the installation, 28% of t				
	able; the final 2% of the total contract	will be due a	after the unit	\$	7,432.88
	ction satisfactorily.			\$	530.92
changes. Th Attached to the will or will not	eptions are selected for this unit, the to e progress payments due at each sta- his quote is Addendum 'A' which outlin t provide under this quote. Limited Warranty: Warranty:	ge of produc nes the deta 3	ction will change in	amount r Elevator S Date	not percentage. Solution, Inc.
		_			
Elevator Sol	_	-			
James H. Fa	rrow, Owner			Date	
Edwards Co	nstruction Services, Inc.	94			<u>.                                    </u>
Builder				Date	

© ELEVATOR SOLUTIONS, INC.
3171 Rolling Hills Lane, Apopka, Fl 32712
Toll Free 866 501 6483 Office 407 889 8681 Fax 407 889 8681 Email: sales@elevatorsolutions-fl.com

<b>AGREEM</b>	ENT	Savaria		\$	23,611.00
		V-1504	Vertical Platform Life	t	
Contractor I		Contact			
Company: Name: Address: City: State: Zipcode:	Edwards Construction Services, Inc. Matthew Celinski 4301 Vineland Road, Ste E12 Orlando FL 32811	Phone: Fax: Cell: Email: Alt phone:	407-515-1026 407-872-3966 407-883-9425 mcelinski@edwar	dsconstru	uction.com
Job Site					
Project: Address: City: State: Zipcode: County:	Watermark Clubhouse #1 7650 Lower Gateway Loop Orlando FL 32827 Orange	Date: Estimate # Rep:	August 7, 2014 :TBD Jimmy Farrow		
_	ent is entered into this day, the 7th of solutions, INC and the Builder,		4 by and between: Construction Serv		•
equipment lis	tions, Inc. agrees to furnish all labor, ted in this quote as per the plans and ned hereto). All relevant state permits ass are included in the quoted price.	specification and installa	ns listed for the am ition inspections re	iount sho quired du	wn on the Iring the
117014404	TI	ERMS			
Total price o	f this contract without options:			\$	23,611.00
and to hold the 2. An addition 3. Upon the coduce and pays passes inspection.	of 10% is required to provide Enginee ne price quoted for a period of six (6) and draw of 60% will be required prior completion of the installation, 28% of table; the final 2% of the total contract ction satisfactorily.	months. to ordering he total con will be due a	the equipment. tract value will be after the unit	* * * * * * * * * * * * * * * * * * * *	2,361.10 14,166.60 6,611.08 472.22
changes. The Attached to the	ptions are selected for this unit, the to e progress payments due at each sta his quote is Addendum 'A' which outlin provide under this quote.	ge of produc	tion will change in	amount r	not percentage.
	Limited Warranty:	3	Years From Ship	Date	
Labor Limited	Warranty:	1	Year From Comp	letion Dat	e
Elevator Sol James H. Fa	utions, inc rrow, Owner	-		Date	
Edwards Co Builder	nstruction Services, inc.	-		Date	

# WATERMARK AMENITIES PARCELS R-3 & P-13 ORANGE COUNTY, FL



2014 April 18



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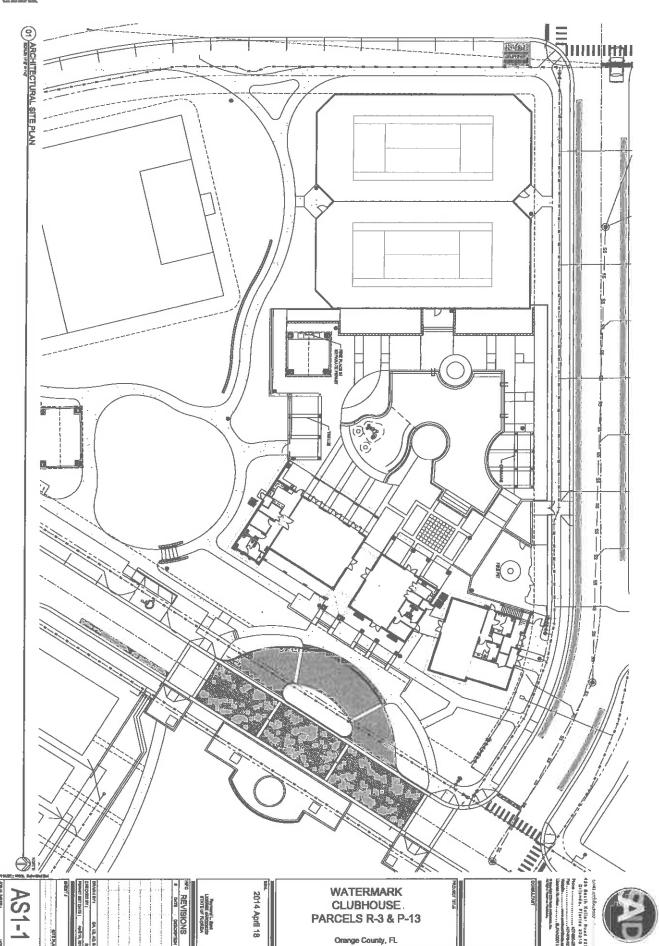
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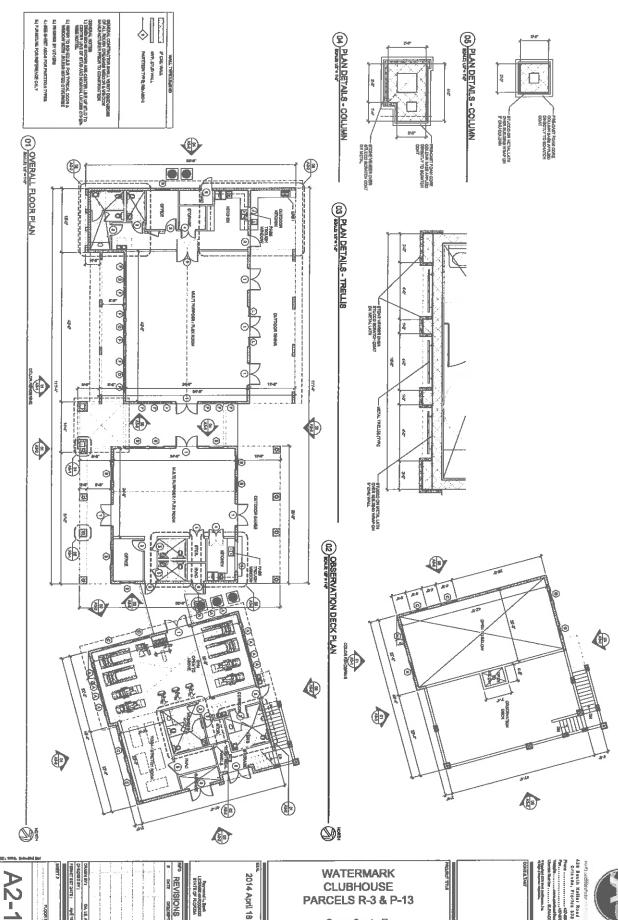
WATERMARK **CLUBHOUSE** PARCELS R-3 & P-13

Orange County, FL





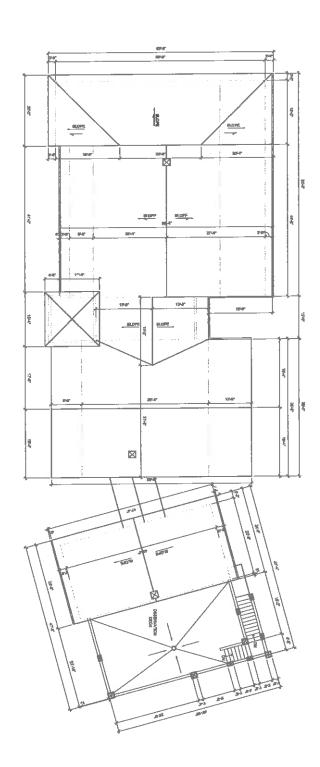
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2014 April 18

CLUBHOUSE PARCELS R-3 & P-13

Orange County, FL



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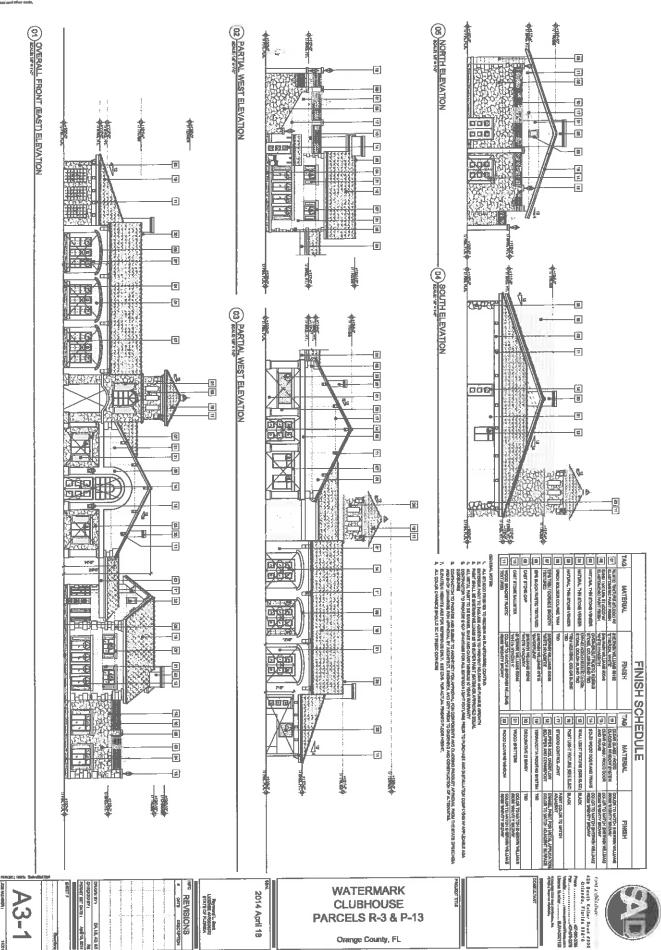
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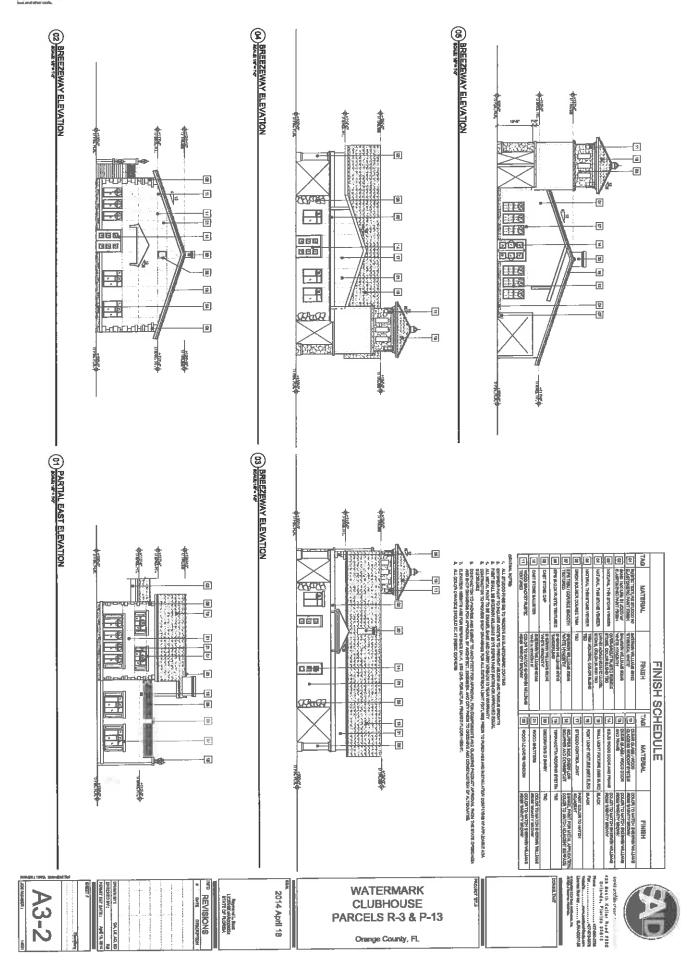
WATERMARK CLUBHOUSE PARCELS R-3 & P-13

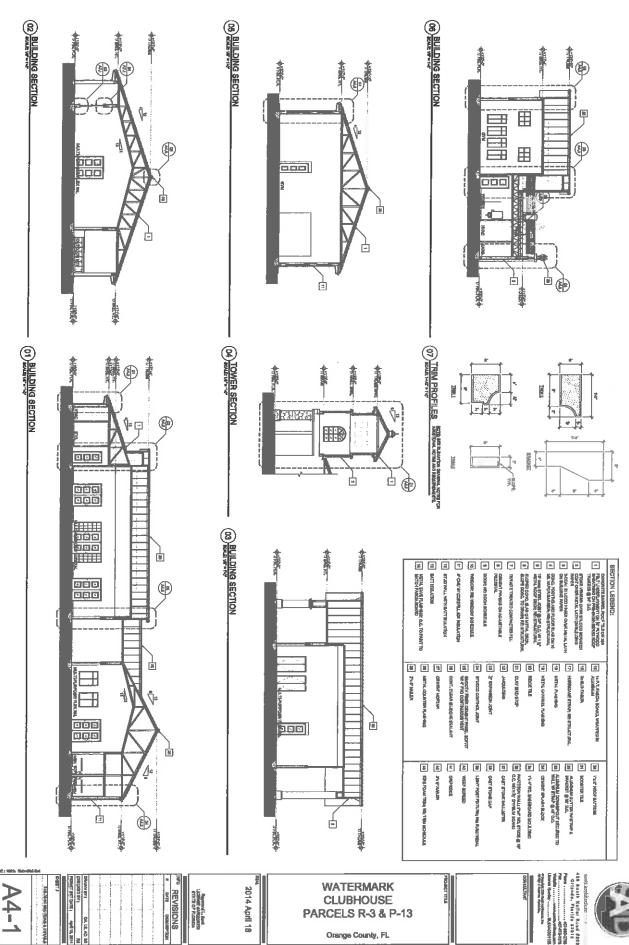
Orange County, Fl.











PARCELS R-3 & P-13 Orange County, FL