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: South Beach 18 2LC.		
Address: 235 18 St. Miami Bealh PC 33139		
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: Ziva winder Shay Segou		
Applicant's Address: 1005 Pork center By. Mighi TL 33169.		
Applicant's Telephone: 954-673-8728 FAX: 305-627-9372		
Applicant's E-mail Address: 2. Va fernanagement @ comcast-net		
Relationship to Owner:		
Owner's/Tenant's Name: Shay Sabag . Segou!		
Owner's Address: 1005 Park center BW. miami FL 3316		
Owner's Telephone: 305-627-9370 FAX 305-627-9372.		
Owner's E-mail Address: Show @ Deep soucosmetics.com.		
Signature of Owner:		
3. Please check one of the following:		
[] 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.)
Existing Use: Apartment Building Proposes Use: Hotel
Quiloing has two stories First Floor 2,239 SOF 7 Secons Floor 2,060 SOF
5. Project Construction Cost (Provide cost for new construction, the addition, or the alteration): As optivis fine, the total estimates cost of construction for the remost/ being performed is 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*
M In Plan Review [] Completed*
* Briefly explain why the request has now been referred to the Commission.
Cost an prohibit as compared to the overall cost of the renovation. 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

Rule 61G20-4.001 effective 4/25/2013

1: purion survey	es 553.509 Vertical Accessibility to
all Levels re	es 553.509 Vertical Accessibility to equirements (2010 11-4.1.7 (2)
/ssue	
: Accesible	enfrances FBC 11-4.1.3 (8) (iii)
2010	
ssue	
:	
Florida-specific accessibile extreme hardship. Please	r Request: The Florida Building Commission may grant waivers of lity requirements upon a determination of unnecessary, unreasonable or e describe how this project meets the following hardship criteria. ply for consideration of granting the waiver.
The hardship is caused ffect owners in general.	d by a condition or set of conditions affecting the owner which does not
to provision vertion of show	cal accessibility would go over and beyond the requirement efure (two story) as opposed to that which is required
only reguired when A Substantial financial co	efure (two story) as opposed to that which is required not building has there or more stories). Osts will be incurred by the owner if the waiver is denied.
Posts to comply	with Accessibility will represent over 20%.
Costs to comply of the cost of I	with Accessibility will represent over 20%. Econobe ling
of the cost of 2 The owner has made a cannot find an efficient	with Accessibility will represent over 20%. Remodeling a diligent investigation into the costs of compliance with the code, but mode of compliance. Provide detailed cost estimates and, where 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 vertica 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. Payamount Elevator service total cost: \$143,500-
Alegse Sea Attached estimate.
b. Miami International Elevator. Total Cost: 52,000.
Please see Attached Estimate.
c.
10. Licensed Design Professional : Where a licensed design 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.
SEE ATTACHED CETTER
S. JOSR L GURNAN
Signature x H= Printed Name

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 1

/ day of

, 2013

Signature

SHAY SEGEV

SHAREEN ZHAOMIN RUAN Notary Public, State of Florida Commission # FF 26346 My comm. expires July 12, 2017

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.

a. Florida Statutes 553.509 Vertical Accessibility to all levels requirement. / 2010 FBC,
Accessibility Code, 202 Requirements for existing buildings.
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?
[x] Yes [] No Cost of Construction\$192,000 (B1201950-235 18 th St, MB).
Comments/Recommendation: We recommend that the waiver be granted based in the Florida Building Code section 202.3 Exception 1. According with the documentation submitted by the applicant the cost of providing vertical accessibility will be disproportionate to the cost of construction. In addition, it will be technically infeasible to provide an elevator to the 2 nd floor and a ramp to the front of the building due to existing constrains and zoning regulations. Nevertheless, the applicant is providing accessible units and ramp to the unit accessible for persons with mobility impairments. Building Official or Designee
Mariano Fernandez, PE. Printed Name BU689 Certification Number 305-673-7610 ext. 6288/305-535-7513 Telephone/FAX marianofernandez@miamibeachfl.gov
Email Address

Address: 1700 Convention Center Dr. Miami Beach, FL 33139, 2ND Floor, Miami Beach, FL

Certification of Licensed Design Professional for Rep Consent Agenda	olicated Designs to be Placed on
Note: Fill out pages only for cases in which previously approved waivers and the project can be placed on	design documents are duplicates of a Consent Agenda.
I,	nitect/engineer in the state of Florida, ereby state as follows:
1. I am the architect/engineer of record for the project known , for one or more accessibility requirements in an application to w	
2. I hereby certify that to the best of my knowledge a Commission that the design documents for the (insert above) documents previously submitted to the Commission and refet that the two projects are built or to be built on different parce	project described in paragraph 1 are the same as the design renced in paragraph 3 below, except
3. The licensed design professional of record (identify the licensed known as	ared the design documents for the
project known as the majority of the Accessibility Advisory Council recomme granted a waiver of one or more accessibility requirements in	ended approval and the Commission Final Order No
Printed Name: Affix cer	tification seal below:
Address:	
Γelephone:	
Fax:	
E-Mail Address:	

Rule 61G20-4.001

effective 4/25/2013

FBC 2012-01

Request for Waiver



C: (786) 312-6511 **F:** (786) 472-6874

E: yoel@jd-miami.com
W: www.jd-miami.com

A: 12742 SW 9th ST Miami, FL 33184

To: Florida Building Commission.

Date:

September 09, 2013

1940 North Monroe St.

Tallahassee, Fl 32399-0772

Project: B1201950.

Located at:

235 8 St

GUZIF

PE No

Miami Beach, FI 33139.

BELOW COMMENTS ARE PART OF FORM FBC 2012-01 REQUEST FOR WAIVER.

(8c) Owner has explored the possibility of constructing a ramp to provide accessible route to the lobby. Planning & Zoning Department has indicated that ramp as proposed will encroached into the city right of way. Also, it would not be consistent with the existing structure and would be, visibly, a very heavy structure in front of the building detracting from its look, character, and style.

The cost to install the elevator and construct its infrastructure would be a substantial increase in overall cost of Hotel improvements. In addition, two accessible guest rooms will be provided on ground level, with an accessible ramp by the side. New intercom system will be installed to provide communication between the client and the service personal located at the front desk. Also, Hotel website will include how this facility will provided said service thru the reservation process.

www.jd-miami.com



Fort Lauderdale, Florida Toll Free: 800.478.0524

> Phone: 954.784.5560 Fax: 866.496.3054

Paramount Elevator Service Standard Elevator Installation Agreement

Presented To: 235 18th Street Miami Beach, Florida 33139

One Dual Piston Holeless Hydraulic Passenger Elevator 2 stops In-Line 2500 lb Capacity 100 f.p.m.

Paramount Elevator Services (We), hereby agrees to furnish the necessary Labor and Materials to complete the following:

- 1) Provide The materials and labor necessary to construct (1) Elevator hoistway to the exterior of the building named above. Hoistway portion of the project will be performed by a subcontractor to Paramount Elevator Service to be named at a later date. All work under this item will include all of the necessary drawings, submittals, permits etc, related to this section.
- 2) Provide and install One dual piston holeless hydraulic passenger elevator, two stops In-Line with the following features
 - 1) Twin piston holes design
 - 2) Speed 100 f.p.m.
 - 3) 2500lb. Capacity
 - 4) 42' single speed car and hall doors
 - 5) Stainless Steel Hoistway entrances

- 6) Stainless #4 finished hall call and car operating fixtures
- 7) Digital position indicator and main landing and in car.
- 8) Standard Cab with mica finished rear and side walls, with Stainless Return and Transom

Features (cont)

- 9) Standard ceiling with aluminum frame and luminite panels
- 10) Solid state Micro processor based control NON Proprietary
- 11) Submersible power unit.
- 12) Permits and inspections Included

Equipment Description and Features

Smartrise Hydraulic Elevator Controller (Non Proprietary)

Micro processor based control with serial link communication. This controller incorporates all of the necessary software and function necessary to comply with the latest codes. The compact design is perfect for modernization projects.

IP 8300 Tape selector- The tape guided selector is the device which identifies the exact location of the elevator in relation to your building's floors. The tape design provides for smooth, quiet and consistent floor stops every time. There are no longer any noisy mechanical switches.

Solid state motor starter- The "Soft Start" motor starter seamlessly brings the pump motor up to speed without the noisy CLUNK of a mechanical motor starter. In addition, This device monitors incoming power, motor current draw and line imbalances in order to protect your pump motor. This method of starting a motor is much easier on the equipment therefore potentially extending it's life.

Infra-Red Door detector. – This device takes the place of your existing safety edge boot on the door. The detector provides a "curtain" of protection throughout the entire height and width of the door. Physical contact with the door is no longer required for re-opening.

Car and Hall operating stations

We use Innovation Industries Car and Hall operating Stations. Innovation Industries is an industry leader providing elevator fixtures to all of the major companies throughout North America. These fixtures have a proven track record for reliability and dependability. Hall stations are surface mount. All are #4 Stainless.

Car Operating Station will include hands free telephone, digital position indicator, as well as all required fire service buttons. Car Station will be ANSI A:17.1 compliant

Pit Ladder

The codes now required that you provide "safe access" to the pit via a non-combustible pit ladder. We will provide and Install.

Lead Times and Installation Time

Lead times for equipment is generally 6-8 weeks after approved drawings

Installation times for this type of install run 10-15 days. Sometimes less if everything goes smooth.

Permits and Inspections

All permits and inspections are included.

Conditions of Agreement

Paramount Elevator Service and its parent company Paramount Inspection and Consulting Inc. assumes no liability on account of accidents or injury to persons and or damage to equipment or property that has not directly resulting from actions of Paramount Elevator Services and or it's employees or agents.

It is agreed that this contract constitutes an agreement in full and that no other services and or materials other than described above are included in the agreement and that any prior representation of our services whether written or verbal have been incorporated into this agreement. It is further agreed that any changes to this agreement will be in writing and signed by both parties.

Terms of Agreement

One Third down upon acceptance of agreement, second Third upon delivery of equipment and commencement of work. Final third due upon acceptance of installation by customer. Use of equipment for it's intended purpose constitutes acceptance by customer. Any equipment installed under this agreement remains the Property of Paramount Elevator Services and or Paramount Inspection and Consulting Inc., it's Parent company, until such time as this contract is paid in full regardless as to the manner in which said equipment is attached to Real Property.

If any part of this agreement is deemed to be illegal or unenforceable, all other parts of the agreement will remain in effect.

Both parties hereby agree to waive a trial by jury. Jurisdiction for any such proceedings will be Broward County, Florida.

WE agree to provide the services as outlined herein for the sum of: \$143,500.00

One Hundred Forty – Three Thousand Five Hundred Dollars 00/100

Acceptance:	
Ву:	For Paramount Elevator
	TORESIDENT
Title	Title
Date	Date 8/29/13



235 18 STREET MIAMI BEA: H, FL 33139

Number of units: 1 Elevator ype: MIE Capacity: 2000lbs Landing: 3 Opening: 1 in line Rated Speed: 100 FPM Door opening type: Single Slide Floor-to-Floor Travel:11 ft.0in Power Unit Type: Submersible Dry Unit Mo or Starts: Not applicable Tank Heater: without Low oil Switch: Without Oil cooler: Without Machine Room Location: adj. At !ower Seismic - Zone 2 or Greater: not

specified CONTROLLER

□ Simplex STARTER OPTION □ Nudging □ Hall Lantems □ RPR □ Access Switches □ Hospital Emergency □ Mass EMT □ Anti Nuisance □ Viscosity Control □ Load weighing By Pass Provision for CRT Monitor (crt by others) □ Emerg Pwr Provision From Generator □ Final top & bottom Limits Battery Lowering Circuit provision: No Provision

Recommended Overhead: 11.92 ft (Contact Factory for minimum) nit Depth: 4 ft-0 in

ELEVATOR ADVANTAGE SERIES ELEVATOR INSTALLATION

Power Supply: 208 v 3 phase 60HZ Jack Unit Type: 1 Piece Type PJ 3N Cylinder Joint Type: Not Applicable Cylinder Protection: Without Scavenger System: Without

Quotation Note:

not included in price
included in Price

SLING/PLATFORM

Guide shoe Type: Slide Guides

26 GA Firestop

GUIDE RAILS
Rail size: Standard

☐ Ollers & Leaches

SWITCHES & FIXTURES

Car Position: multy-lite

Hall Position Indicator: Without
Keyes Switch in Halls: Without
Ada Phone: In Cover

Voice Annunciation

Special Fire Service Key Switch

Vandal Proof Push Button

Push Pull Stop Sw in Lieu of
Keyed

California Alarm & handicap

Door Hold Switch

"NO SMOKING" Text Braille on
hall Station

Phone Jack in Cart
Phone Jack on Hall

☐ Groove with ISO coupling☐ Additional ISO Coupling☐ Additional shut off valve

OIL LINE

☐ Main line strainer

☐ Strainer with magnetic plug

☐ Pipe rupture valve

HATCH ENTRANCES

Entrance finish: Enamel Hatch wall type: Up to 12' CMU

DOOR PROTECTION

☐ ICU Unit with Nudging

ELEVATOR CAB
CAB ENCLOUSURE:
Plastic Laminated on wood shell
FRONT RETURN:
Plastic laminated on wood shell
CAR DOOR FINISH:
Enamel
LIGHTING/CEILING:

LIGHTING/CEILING:
Plastic Eggrate in Alum Frame with
Fluorescent Lights
HANDRAIL AT: Rear only
HANDRAIL: 3/8X2 #4Stainless
steel
CEILING FAN: Single Speed Fan
CAB PROTECTION: None

☐ Mirror

☐ Emergency Exit Contact

☐ Emergency Exit Lock

Total Price per Car \$52,000.00

 THREE MONTHS FREE MAINTENANCE, AND ONE YEAR WARRANTY OF THIS ELEVATOR INSTALLATION.

MIAMI INTERNATIONAL









