

## **HENROSA HOTEL**

**Issue:** Vertical accessibility to the first floor of the building.

**Analysis:** The applicant is requesting a waiver from providing vertical accessibility from the sidewalk to the first floor of the building, which is elevated four risers above grade. The building is qualified as a historic structure and the existing elevator's interior dimensions do not meet the accessibility code requirements. To make the elevator compliant would require demolishing the existing shaft to enlarge it, which would be structurally impractical since the elevator's back shaft is also the rear wall of the building contiguous to the adjacent building. According to the applicant, the degree of demolition and reconstruction required would have a negative impact on the historic significance of the structure.

### **Project Progress:**

The project is under design.

### **Items to be Waived:**

Vertical accessibility to all levels, as required by Section 553.509, Florida Statutes.

553.509 Vertical accessibility. 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: Henrosa Hotel

Address: 1435 Collins Avenue, Miami Beach, FL 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: Emzon Shung

Applicant's Address: 1400 Broadway, New York, NY 10018

Applicant's Telephone: 212-944-1330 FAX: \_\_\_\_\_

Applicant's E-mail Address: emzon@jordache.com


Relationship to Owner: Executive Vice President

Owner's Name: Henrosa Hotel, LLC

Owner's Address: c/o Nakash Holdings, LLC, 1400 Broadway, NY, NY 10018

Owner's Telephone: 212-944-1330 FAX \_\_\_\_\_

Owner's E-mail Address: \_\_\_\_\_

Signature of Owner:  as counsel for owner

Contact Person: Robert S. Fine, Esq., AIA

Contact Person's Telephone: 305-579-0826 E-mail Address: finer@gtlaw.com

This application is available in alternate formats upon request.

**3. Please check one of the following:**

- New construction.
- 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.)

Hotel, 15,297 sq. ft., 3 floors, 40 rooms; and restaurant \_\_\_\_\_

**5. Project Construction Cost (Provide cost for new construction, the addition or the alteration):** \_\_\_\_\_ \$1.2 million

**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\*
- In Plan Review  Completed\*

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

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

**Issue**

1: \_\_\_ § 553.509, Fla. Stat.: Vertical accessibility to all levels; § 11-4.1.6(1)(k)(iii), Florida Building Code-- undersized elevator to floors 2 and 3.

**Issue**

2: \_\_\_: \_\_\_ § 553.509, Fla. Stat.: Vertical accessibility to all levels; § 11-4.1.6(1)(k)(iii), Florida Building Code-- raised first floor with stair too narrow for wheelchair lift.

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.

This is a qualified historic building where the existing elevator is less than 48 x 48" minimum and would require the shaft to be made larger to provide it. Also, the stair to the first floor is not wide enough to both have a lift and provide the required means of egress.

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

Even if there were no historic preservation issues, enlarging the elevator would require the demolition and rebuilding of a new larger elevator shaft in a historic building.

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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.

Under separate cover.

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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.      Under separate cover.

\_\_\_\_\_

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.

The Henrosa Hotel is a qualified historic building in the Miami Beach Art Deco District. It has two vertical accessibility issues. The first floor is elevated 4 risers. Because of the width of the corridor and stair, it would impermissibly encroach a required means of egress to provide a lift at that location.

The elevator does not provide 48" x 48" interior clear dimensions. In order to do so, it would require demolishing the existing shaft and reconstruction of a larger one within this historic building. Because the back of the shaft is the exterior wall of the building, up against the front of the building, enlarging the shaft would have significant historic preservation issues notwithstanding a very significant cost.

\_\_\_\_\_  
**Signature** **Printed Name**


**Phone number** \_\_\_\_\_

(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 6 day of February, 2009

  
Signature

Robert S. Fine, Esq. as counsel for owner  
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. \_\_\_\_\_
- 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** \_\_\_\_\_  
\_\_\_\_\_

Jurisdiction \_\_\_\_\_

Building Official or Designee \_\_\_\_\_  
Signature

\_\_\_\_\_  
Printed Name

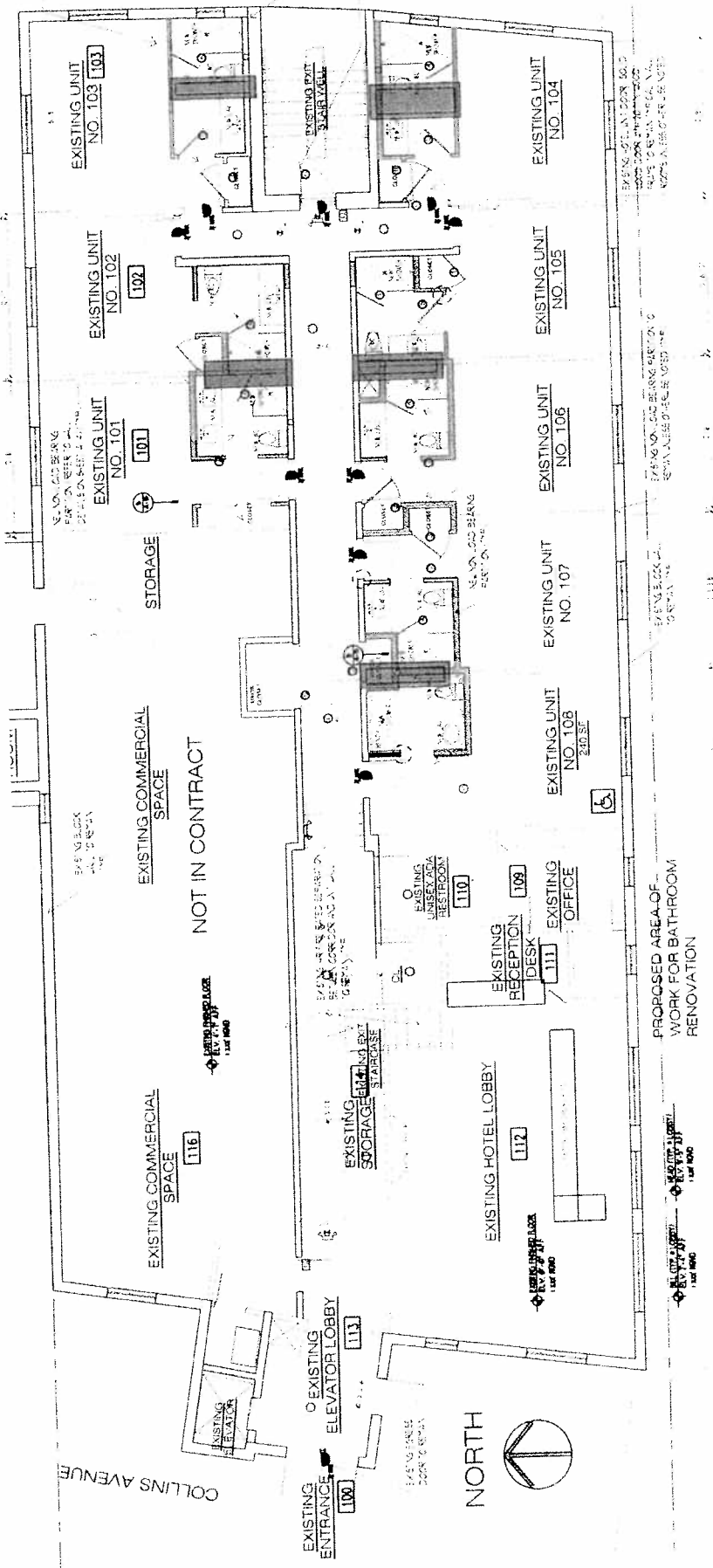
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Certification Number

\_\_\_\_\_  
Telephone/FAX

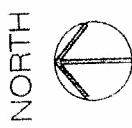
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PROPOSED AREA OF WORK FOR BATHROOM RENOVATION

EXISTING BLACK WALL TO REMAIN  
EXISTING FLOOR IS IN THE SAVED ZONE REFER TO SECTION 50-5000.1



PROPOSED AREA OF WORK FOR BATHROOM RENOVATION



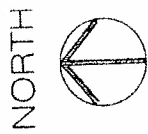
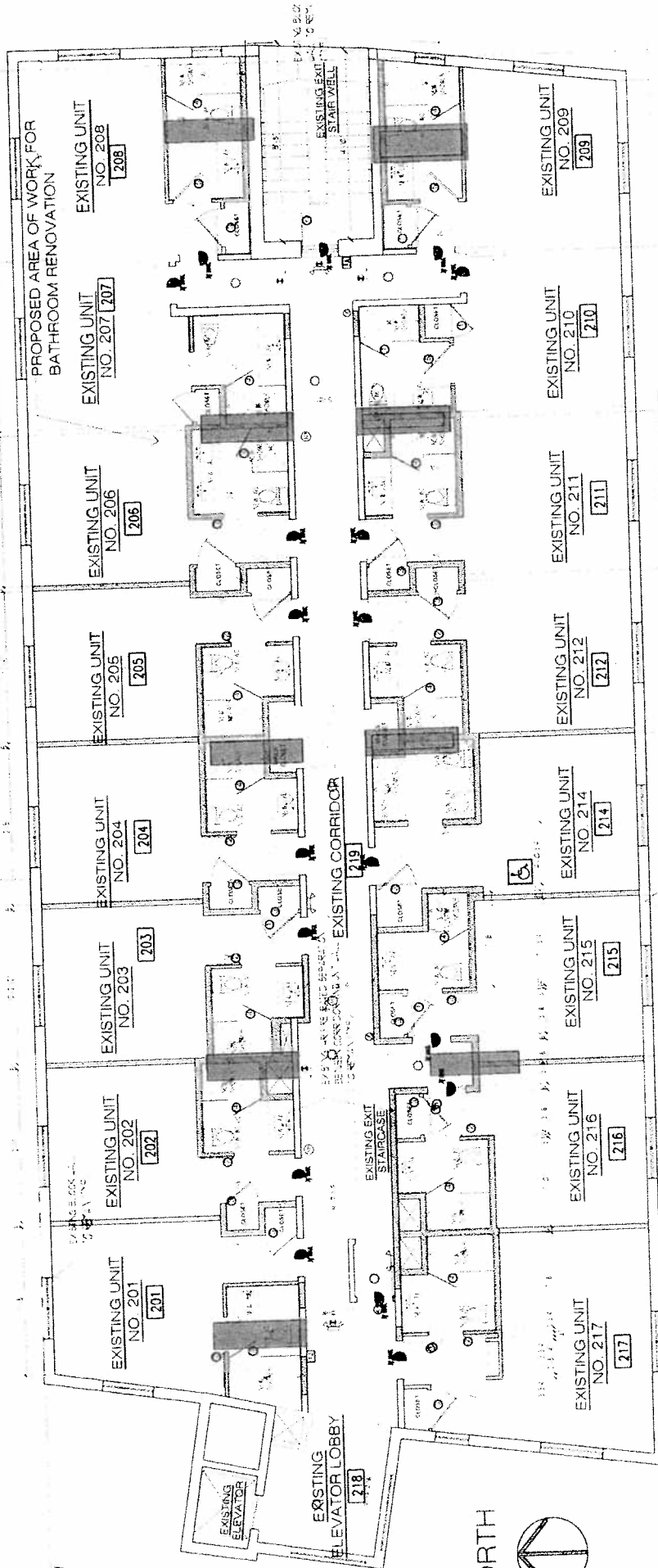
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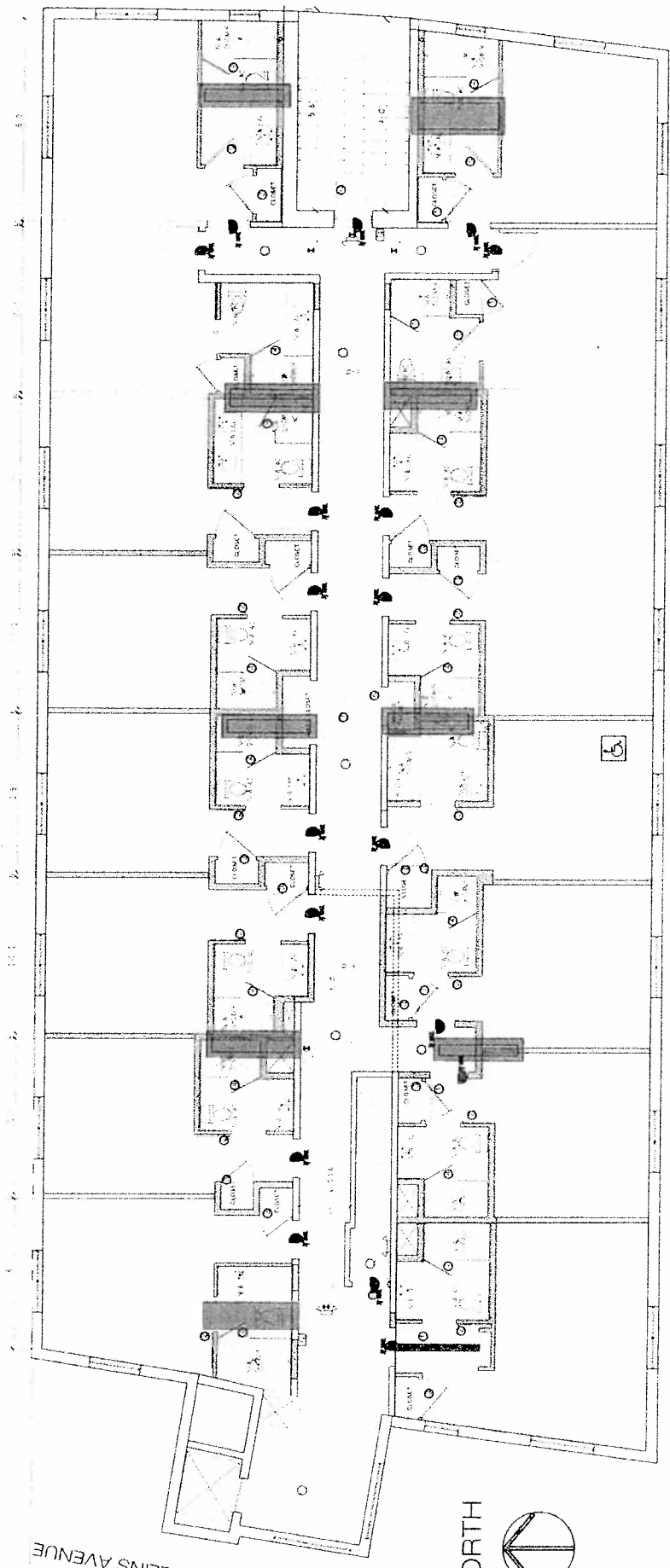
COLLINS AVENUE

ALLEY

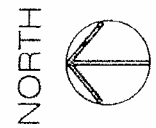


COLLINS AVENUE





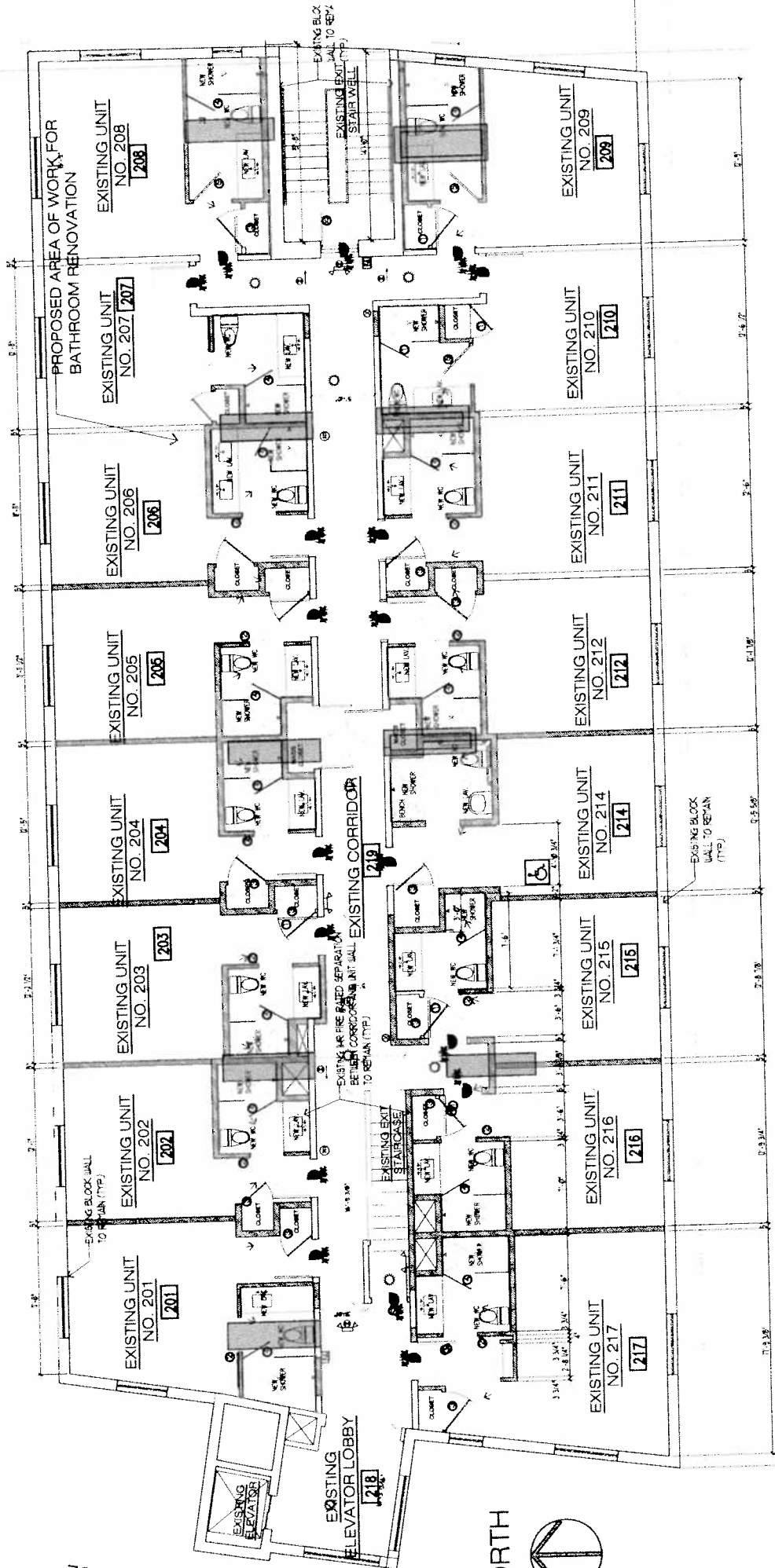
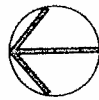
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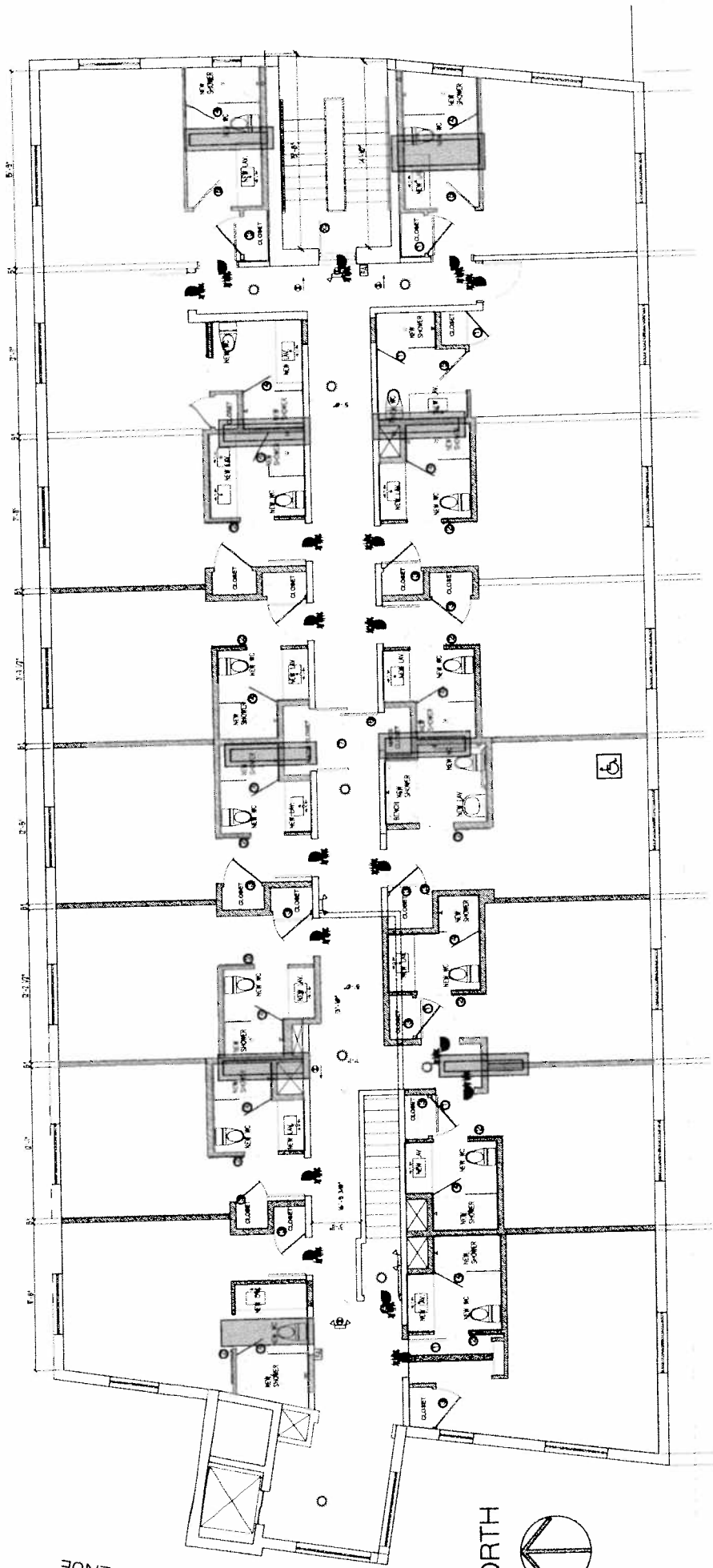




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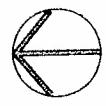
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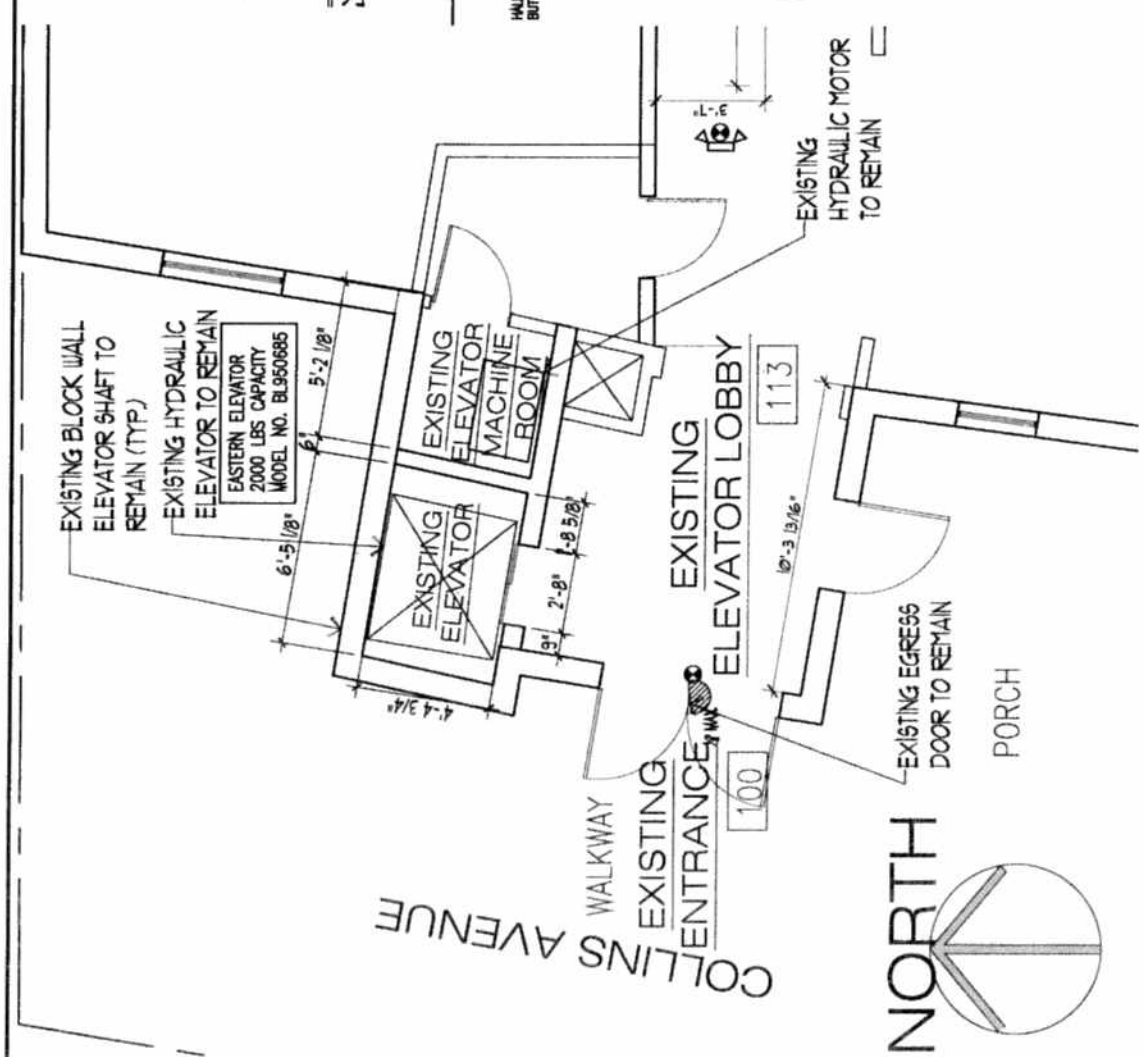




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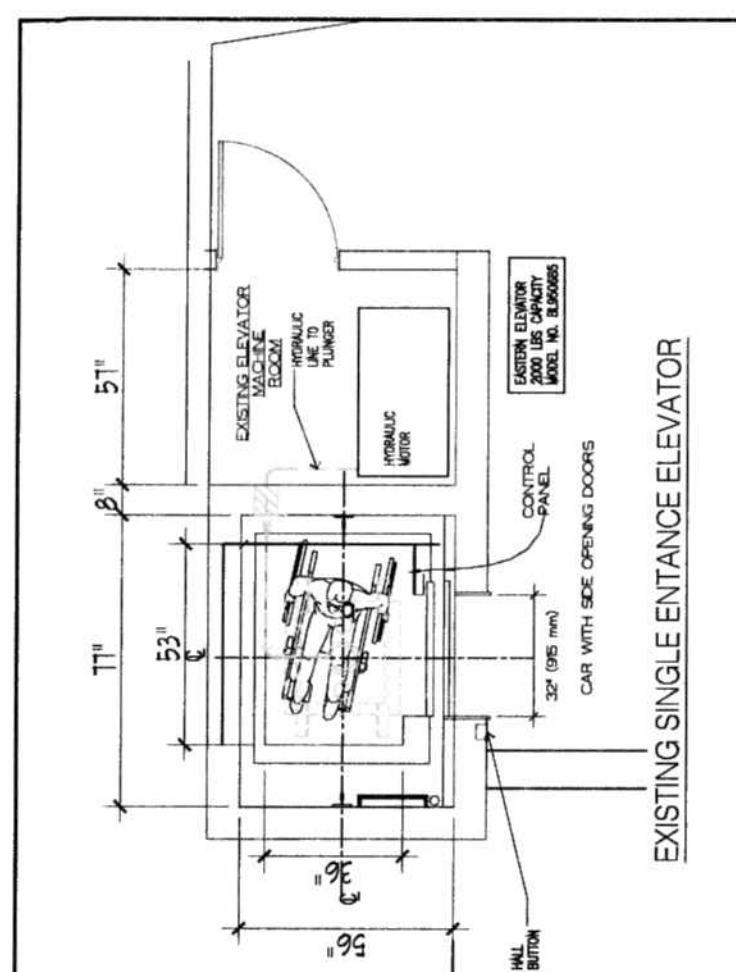
NORTH





1 ELEVATOR LOBBY FLOOR PLAN

SCALE: 1/4" = 1'-0"



2 ELEVATOR SHAFT & CAB DETAIL

SCALE: 3/8" = 1'-0"

PROJECT NO. 1000000000  
 DRAWING NO. 1000000000  
 DATE  
 SEAL  
 MARTIN J. HYMAN  
 REGISTERED ARCHITECT  
 LICENSE NUMBER: AR00098440

PROJECT LOCATION  
 PROJECT NO. 1000000000  
 DRAWING NO. 1000000000  
 DATE  
 SEAL  
 MARTIN J. HYMAN  
 REGISTERED ARCHITECT  
 LICENSE NUMBER: AR00098440

ELEVATOR FLOOR PLAN & DETAIL  
 A-1  
 9300 L.C.