

PRIMROSE SCHOOLS

Issue: Mounting heights of fixtures in a child care facility.

Analysis: The applicant is requesting a waiver from mounting toilet room fixtures at the heights specified for adult use. The project is a new, 10,565 square foot facility to be used for day care of preschool children ranging from infants to pre-kindergarten. Toilets are provided for adults that comply with Chapter 11. The applicant is suggesting that the children's facilities be constructed in accordance with the ADAAG specifications for children. Toilets exceeding the plumbing code requirements are also planned for the classrooms and the local authority having jurisdiction is also requiring the discretionary toilets to have turning space provided.

Project Progress:

The project is in design.

Items to be Waived:

Mounting heights for toilets and lavatories, as required by Sections 11-4.16 and 11-4.19.

11-4.16.3: The height of water closets shall be 17 inches to 19 inches measured to the top of the toilet seat.

11-4.19.2 Lavatories shall be mounted with the rim or counter surface no higher than 35 inches above the finish floor.

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: Primrose Schools
Address: 1345 Lake Trail Drive (aka Meadow Woods)
Orlando FL

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: Bemmie Eustace / Interplan LLC
Applicant's Address: 933 Lee Road, Suite 120, Orlando FL 32810
Applicant's Telephone: 407-645-5008 FAX: 407-629-9124
Applicant's E-mail Address: beustace@interplanorlando.com
Relationship to Owner: Consultant
Owner's Name: Primrose Schools Franchising Company
Owner's Address: 3666 Cedarcrest Rd., Acworth GA 30101
Owner's Telephone: 770-529-4100 FAX 770-874-0210
Owner's E-mail Address: GGreiner@Primroseschools.com
Signature of Owner: _____
Contact Person: Bemmie Eustace
Contact Person's Telephone: cell 321-246-4715 E-mail Address: beustace@
interplanorlando.com

This application is available in alternate formats upon request.

Form No. 2001-01

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.)

Educational Daycare facility, single story, 10,566 sq ft building
area, occupancy 356 per FBC

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

NA

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.

The Building Department requests a waiver application to be
reviewed to allow children's accessibility standards for
all plumbing fixtures in the classroom's toilet rooms as well
as the lavatory in the classroom.

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

Issue

1: Request a waiver to 11-4.16 (water closets), 11-4.19 (lavatories)
to allow the use of children's accessibility standards in the
classroom toilet rooms and the lavatory serving the toilet rooms
located in the classroom.

2: Request a waiver of providing a 60" turn area where the water
closets are provided well in excess of the required water closets, and
accessible toilet facilities are adjacent + serving the same area.

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.

These conditions are specific to daycare facilities where adult
accessibility provisions would render the use of the fixtures by children
as unusable.

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


NA.

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.

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 16th day of September, 2008



Signature

Bemmie Eustace

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.

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.

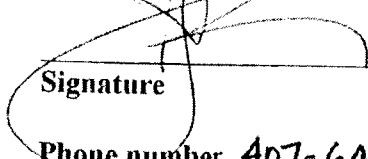
a. NA

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 use of children's accessibility standards is appropriate as equivalent facilitation for a daycare facility, and providing a turn area for optional water closets where accessible toilet facilities are adjacent for the same users is in excess of the code requirements.



Signature

DAVID BOYCE

Printed Name

Phone number 407-645-5008

(SEAL)

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

Certification Number

Telephone/FAX

Address: _____

INTERIORS:

AS-COLOUR
 PARTITIONING
 PRODUCT MANAGEMENT
 FINISHES

ON FORMS TO BE USED
 ON ALL DRAWINGS
 TO BE USED ON ALL DRAWINGS
 TO BE USED ON ALL DRAWINGS

DATE: _____

CONTRACT:

QUANTITY: _____
 DRAWING NO: _____
 SHEET NO: _____



PRIMROSE SCHOOLS
 6 HAZARD ROOMS
 DRAWING NO: _____
 INTERIORS

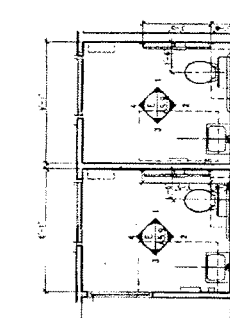
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 SHEET NO: _____

INTERIOR ELEVATIONS
 DATE: _____

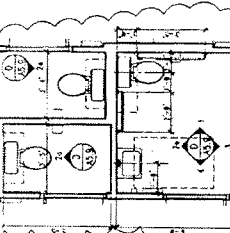
A5.9

CHORD: 200

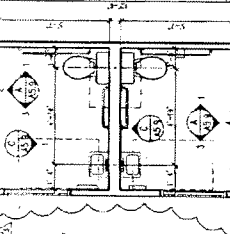
GENERAL NOTES:
 1. FOR SECURITY REASONS, THE TOILET ROOMS MUST BE KEPT LOCKED AT ALL TIMES. KEYS MUST BE KEPT IN A SECURE PLACE.
 2. ACCESSIBILITY REQUIREMENTS AS PER AS 1412-2003.



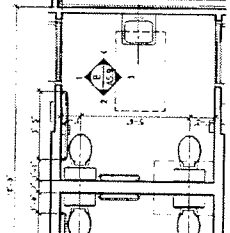
6 TOILETS # 11 & #12
 ADULTS ONLY



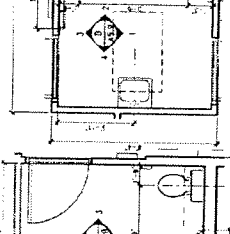
5 TOILETS # 7, 8, 8.8, 9, 10
 (PRESCHOOL-48 TO 58 MGS.)



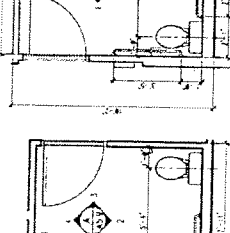
4 TOILETS # 5 & #6
 (EXPLORERS-80 MGS.)



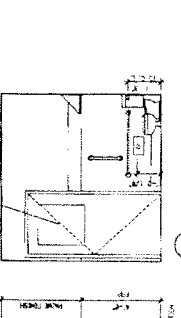
3 TOILETS # 3 & #4
 (PRESCHOOL-36 TO 47 MGS.)



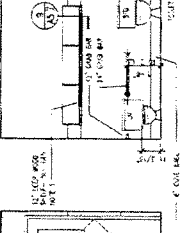
2 TOILET #2
 (EARLY PRESCHOOL-24 TO 35 MGS.)



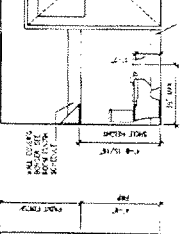
1 TOILET #1
 (YOUNG TODDLERS & TODDLERS-12 TO 23 MGS.)



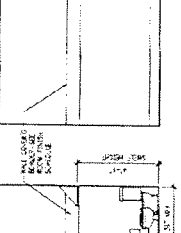
(A1) TYP. TOILET ELEVATION
 380-1107



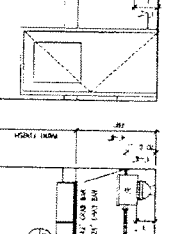
(A2) TYP. TOILET ELEVATION
 380-1107



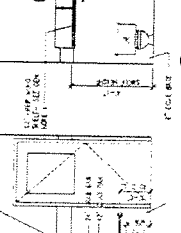
(A3) TYP. TOILET ELEVATION
 380-1107



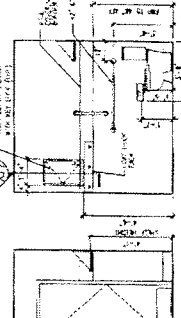
(A4) TYP. TOILET ELEVATION
 380-1107



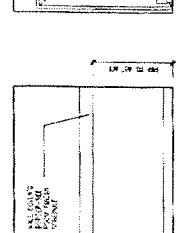
(A5) TYP. TOILET ELEVATION
 380-1107



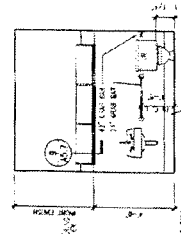
(A6) TYP. TOILET ELEVATION
 380-1107



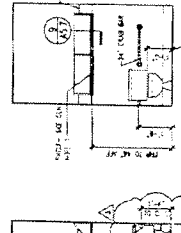
(B1) TYP. TOILET ELEVATION
 380-1107



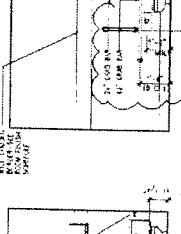
(B2) TYP. TOILET ELEVATION
 380-1107



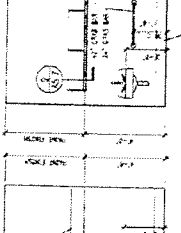
(B3) TYP. TOILET ELEVATION
 380-1107



(B4) TYP. TOILET ELEVATION
 380-1107



(B5) TYP. TOILET ELEVATION
 380-1107



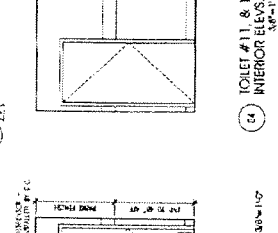
(B6) TYP. TOILET ELEVATION
 380-1107

HANDICAPPED ACCESSIBILITY REQS.
 1. THE TOILET MUST BE ACCESSIBLE FROM THE MAIN ENTRANCE.
 2. THE TOILET MUST BE ACCESSIBLE FROM THE MAIN ENTRANCE.
 3. THE TOILET MUST BE ACCESSIBLE FROM THE MAIN ENTRANCE.
 4. THE TOILET MUST BE ACCESSIBLE FROM THE MAIN ENTRANCE.
 5. THE TOILET MUST BE ACCESSIBLE FROM THE MAIN ENTRANCE.
 6. THE TOILET MUST BE ACCESSIBLE FROM THE MAIN ENTRANCE.
 7. THE TOILET MUST BE ACCESSIBLE FROM THE MAIN ENTRANCE.

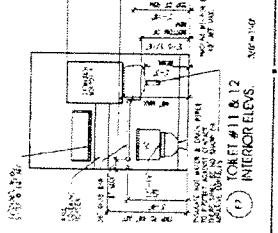
CHILDREN'S W.C. & LAVATORY SPECIFICATIONS

NO.	DESCRIPTION	MINIMUM CLEARANCE	MINIMUM CLEARANCE	MINIMUM CLEARANCE
1	TOILET	1100	1100	1100
2	TOILET	1100	1100	1100
3	TOILET	1100	1100	1100
4	TOILET	1100	1100	1100
5	TOILET	1100	1100	1100
6	TOILET	1100	1100	1100
7	TOILET	1100	1100	1100
8	TOILET	1100	1100	1100
9	TOILET	1100	1100	1100
10	TOILET	1100	1100	1100
11	TOILET	1100	1100	1100
12	TOILET	1100	1100	1100
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46	TOILET	1100	1100	1100
47	TOILET	1100	1100	1100
48	TOILET	1100	1100	1100
49	TOILET	1100	1100	1100
50	TOILET	1100	1100	1100

TOILET #11 & #12
 INTERIOR ELEVATIONS



(C1) TOILET #11 & #12
 INTERIOR ELEVATIONS



(C2) TOILET #11 & #12
 INTERIOR ELEVATIONS