## Department of Community Affairs FLORIDA BUILDING COMMISSION 2555 Shumard Oak Boulevard Tallahassee, Florida 32399-2100

#### NOTICE TO WAIVER APPLICANTS

Please make certain you comply with the following:

- The person submitting the waiver request application as the Applicant MUST sign the application. Should you fail to do so, your application will be returned.
- If a licensed design professional (architect or engineer) has designed the project, his or her comments MUST be included as a part of this application.
- Be as explicit as possible. The more information provided to the Florida Building Commission, the more informed its decisions can be. If you are claiming financial hardship, please specify why and to what degree.
- If at all possible, PLAN TO ATTEND the Accessibility Advisory Council and the Florida Building Commission meetings. Sometimes pertinent facts are inadvertently omitted, or information provided/presented in the Request for Waiver application is not clear. Your attendance at the meetings to answer questions will enhance the possibility of the waiver being approved, since the Council and the Commission will receive the most complete information from you. When we receive the completed application, we will send you a notice of the time, date, and place for both the Council and the Commission meetings.

Enclosed are a List of Required Information and the Request for Waiver application.

If you have questions or would like additional information, please call the Codes and Standards Section at (850)487-1824.

This application is available in electronic format at: http://www.dca.state.fl.us/fhcd/fbc/access\_waiver/waiverap.htm.

Please mail this application to the Department of Community Affairs at the address above. As well as a hard copy, please include a copy of the application (without drawings or plans) on a 3.5 floppy disk in PC format.

This application is available in alternate formats upon request.

#### LIST OF REQUIRED INFORMATION:

1. X Drawings that will clearly present your project and that identify the issue(s) that relate to the waiver you are requesting. As a minimum, the following drawings must be submitted:

a. Project site plan

b. 24" x 36" minimum size drawings

c. Building/project sections (if necessary to assist in understanding the waiver request)

d. Enlarged floor plan(s) of the area in question

2. X One set of reduced scale (11" x 17") versions of the drawings submitted in item one above.

3. One set of overhead transparencies (8-1/2" x 11") of the drawings submitted in item one above. When numerous features are shown on the drawings, please designate the location of the waiver items by highlighting or outlining in color the affected areas.

4. When substantial financial cost of compliance is alleged, supporting cost estimates with quotes from at least two vendors or contractors and catalog information.

5. If you feel photographs and/or renderings are necessary for your presentation, provide 40 legible color photocopies of the photographs and/or renderings. If color photocopies of photographs are provided, use a minimum size of 4" x 6" photographs with a maximum of two photographs per photocopied page.

#### General Information:

a. Equipment: An overhead projector is provided at the presentation; any other equipment necessary for your presentation, such as TV/VCR, slide or LCD projectors, etc., is the responsibility of the applicant.

plication on a 3.5 floppy disk in PC format. PLEASE NOTE: Do not submit drawings or plans on the disk.

Please submit a hard copy of this application to the Department of Community Affairs, as well as a copy of the ap-

b. Verbal Descriptions: Presentations may be to sight or hearing impaired persons; visual presentations should consider adequate verbal and text descriptions of charts and pictures.

Your application will be reviewed by the Accessibility Advisory Council. You will have the opportunity to answer questions and/or make a short presentation not to exceed 15 minutes. The Council will provide recommendations to the Florida Building Commission. The Commission will review the application. You will have another opportunity to answer questions and/or give a short presentation not to exceed 15 minutes. The Commission will consider all information and the Council's recommendation before voting on the waiver.

This application is available in alternate formats upon request.

# REQUEST FOR WAIVER FROM ACCESSIBILITY REQUIREMENTS CHAPTER 553, PART V, FLORIDA STATUTES

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Your application will be reviewed Commission. You will have the oppeach meeting. The Commission withe waiver request.			
1. Name and address of project f	for which the waiver is reques	ted.	
Name: Boys & Girls	Club of Palm Beach		,
Address: 905 Drexel Ro			
	ch, Florida		
2. Name of Applicant. If other th tion by owner in space provided	an the owner, please indicate r :	elationship of applicant to o	owner and written authoriza-
Applicant's Raul Ocam	po, Jr.	Name:	
Applicant's 417 SW California A	Ave., Stuart, FL 34	Address:	
Applicant's Telephone: 772-2	286-9004 FAX 7	72-286-9066	×
Applicant's raul@ocampoassociat	E-mail	Address:	
Relationship Architect	to	Owner:	*
Owner's Name Boys & G	irls Club of Palm H	Beach	
Owner's Address: 800 Nor	th Point Parkway, S	uite 204, WPB, FL	33407
Owner's Telephone: 561-68			B
Owner's E-mail Address:	onnor@bgcpbc.org		
Signature of Owner:	ry J. O Corner		
Contact Person: Mary O'	Connor		:e
Contact Person's Telephone 68	3-3287 E-mail Address:	oconnor@bgcpbc.or	rg .
This application is available in alternate f	formats upon request.		

3. Please check one of the following:
K) 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.)
Boys & Girls Club - Child Facility
22,000 S.F., One Story .
5. Project Construction Cost (Provide cost for new construction, the addition or the alteration):
\$3,000,000.00
6. Project Status: Please check the phase of construction that best describes your project at the time of this application. Describe status.
[] Under Design [X] Under Construction*
[] In Plan Review [] Completed*
* Briefly explain why the request has now been referred to the Commission.
Building department requested we secure a waiver due to code
interpretation, requiring bleachers to be fully accessable by
wheelchair.
wheelchair.

7. Requirements requested to be waived. Please reference the applicable section of the Florida law. Only Florida-specific accessibility requirements may be waived.
Issue
1: Wheelchair accessability for proposers: Gymnasium
bleachers (4 tier) per accessability code section 11-4.33.1
Issue
2:
Issue
3:
quirements 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.  We feel we meet the requirements of code section 11-4.33.1.
[] Substantial financial costs will be incurred by the owner if the waiver is denied.
[] 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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c		- Company of the Comp
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waiver is necessary	on Professional: Where a design professional has design they signature and affixing of his or her professional sea v.	
Section 11-4 comply with	1.33 requires wheelchair accessa code by providing wheelchair sp	pace for viewing directly con-
Section 11-4 comply with nected to pa	1.33 requires wheelchair accessa code by providing wheelchair sp ath of travel & adjacent to blea	pace for viewing directly con- achers. End bleacher is located
Section 11-4 comply with nected to pa	1.33 requires wheelchair accessa code by providing wheelchair sp ath of travel & adjacent to blea	pace for viewing directly con-
Section 11-4 comply with nected to pa adjacent whe	1.33 requires wheelchair accessation code by providing wheelchair spath of travel & adjacent to blead acceptation on the Printed Name Raul Ocampo	pace for viewing directly con- achers. End bleacher is located drawings provided). Furthermore

### 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 be the best of my knowledge true and correct

Dated this 30 day of August ,20 11
Signature ,20 11
PENAUJ J. CLEMENS

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 DEPARTM	DEVIEW	ANT	D RECOMMENDATION	BY LOCAL BUILDING I	DEPARTMEN	VT.
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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.

tion of the Accessionity Code.
a. 2007 FLORIDA BUILDING CODE SECTION 11-4,1,3 (5)
b. 2007 FIORIDA PUILLING CODE SECTION 11-4.33,3
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 2,195,300.
Comments/Recommendation THE BUILDING OFFICIAL SUPPORTS THE WAIVER
REQUEST FOR VERTICAL ACCESS TO BOYS & GIRLS CLUB BLEACHERS
Jurisdiction PAIN BEACH COUNTY BUILDING DEPARTMENT  Building Official or Designee 100000000000000000000000000000000000
Signature Signature
KERGZACALDWELL
Printed Name  BU 676  Certification Number
561-233-510\ Telephone/FAX

2007 FLORIDA BUILDING CODE—BUILDING

## Form No.: 2001-02, Page 1 of 2

Certification of Licensed	Design Professional fo	r Replicated Designs to	be Placed o	n Consent Agenda
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NOTE: This form is to be used only for cases in which design documents are duplicates of previously approved waivers and the project can be placed on a Consent Agenda pursuant to Rule 9B-7.003(3), Florida Administrative Code.
I, Raul Ocampo, a licensed architect/engineer in the state of Florida, whose Florida license number is, hereby state as follows:
1. I am the architect/engineer of record for the project known as (name of project) <u>Boys &amp; Girls Club of Palm Beach County</u> , for which the Owner seeks a waiver of one or more accessibility requirements in an application to which this Certification is attached.
2. I hereby certify that to the best of my knowledge and belief to the Florida Building Commission that the design documents for the (insert project described in paragraph 1 above) Boys & Girls Club of P.B.County are the same as the design documents previously submitted to the Commission and referenced in paragraph 3 below, except that the two projects are built or to be built on different parcels of land at different locations.
3. The licensed design professional of record (identify the licensed design professional of record),  Raul Ocampo , prepared the design documents for the project known as Boys & Girls  Club of Palm Beach County , for which the majority of the Accessibility Advisory Council recommended approval and the Commission granted a waiver of one or more accessibility requirements in Final Order No
Printed Name: Raul Ocampo Affix certification seal below:
Address:417 SW California Avenue
Stuart, Fl 34994
772-286-9004 Telephone:
Fax: 772-286-9066
E-Mail Address: raul@ocampoassociates.com