

**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 is a **List of Required Information** and the **Request for Waiver** application.

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

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 and drawings or plans on a CD in PDF format. NOTE: Please do not send CAD files, but rather scan the CAD files and save as a pdf. Must be in Microsoft Compatible format.**

NOTE: Failure to submit electronically will not have any bearing on whether your petition is heard by the Commission, however, electronic filing will facilitate the Commission's movement toward utilizing CD technology to display the waiver application and attached floor plans to the Counsel and Commission.

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. x One set of overhead transparencies (8 ½" 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. N/A When substantial financial cost of compliance is alleged, supporting cost estimates with quotes from at least two vendors or contractors and catalog information.
5. N/A 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.
6. x Please submit a hard copy of this application to the Department of Community Affairs. PLEASE NOTE: Although not required by Rule 9B-7, F.A.C., in addition to the hard copy please include a copy of the application and drawings or plans on a CD in PDF format.

General Information:

- a. **Equipment:** A CD projector is provided at the Accessibility Advisory Council and Florida Building Commission meetings. Any other equipment necessary for your presentation, such as an overhead projector, TV/VCR, slide or LCD projectors, etc., is the responsibility of the applicant.
- 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
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: The Coca-Cola Company

Address: 2501 West Orange Avenue, Apopka, Florida, 32703

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: Tom Hellmann

Applicant's Address: 659 Van Meter Street, Cincinnati, OH 45202

Applicant's Telephone: 513-241-1230 FAX: 513-241-1287

Applicant's E-mail Address: thellmann@hixson-inc.com

Relationship to Owner: Design Architect

Owner's Name: ERIC BENNETT

Owner's Address: 2501 WEST ORANGE AVE

Owner's Telephone: 407-814-2839 FAX 407-886-5694

Owner's E-mail Address: ebennett@na.lco.com

Signature of Owner:  _____

Contact Person: Bill Sander (Project Manager)

Contact Person's Telephone: 513-241-1230 E-mail Address: wsander@hixson-inc.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.)

102,200 SF, 1 and 2 story Consumable Liquids Processing Facility

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

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.

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

Issue

1: Section 11-4.1.3 (5) Elevator Access to second floor

Issue

2:

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.

9,900 SF second floor used for liquids processing requires two (2) operators to run
(see attached operator descriptions).

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.

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. The owner is not requesting this waiver based on construction cost of compliance but impact to their daily operation and ability to produce (i.e. reduce production floor area, blockage of operational and maintenance access and ongoing maintenance costs).

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.


Signature

Thomas J Hellmann
Printed Name

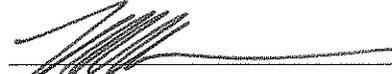
Phone number 513.241.1230

(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 18th day of October, 2011



Signature

Thomas J Hellmann

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.

Certification of Licensed Design Professional for Replicated Designs to be Placed on Consent Agenda

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, _____, 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) _____, 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) _____ 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), _____, prepared the design documents for the project known as _____, 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: _____ Affix certification seal below:

Address: _____

Telephone: _____

Fax: _____

E-Mail Address: _____

Certification of Applicant for Replicated Designs to be Placed on Consent Agenda

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, _____, am applying for placement on the Consent Agenda pursuant to Rule 9B-7.003(3), Florida Administrative Code. I (check one of the following and complete blanks):

am the owner of this Project (name of project) _____,

and was the owner of the project known as _____,

am the franchisee of this Project (name of project) _____,

am under the same franchiser (name of franchiser) _____

who was the franchiser of the project known as _____,

am the licensee of this Project (name of project) _____,

am under the same licensor (name of licensor) _____,

who was the licensor of the project known as _____,

for which the majority of the Accessibility Advisory Council recommended approval, and the Florida Building Commission granted a waiver of one or more accessibility requirements in Final Order No. _____.

I hereby swear or affirm that the above information to the best of my knowledge is true and correct.

Dated this _____ day of _____, 20 _____

Signature

Printed Name

Providing false information to the Florida Building Commission is punishable as a misdemeanor under Section 775.083, Florida Statutes.

[Print](#)

Job:	30004293/Production Operator	Last Updated:	05/16/2006
Org.Id:	United States		
Function:	Supply Chain		
Family:	Manufacturing		
Role:	Administrative/Technical	Currently Used In:	COR-Science
Tier:			

Function Specific Activities - The following is a list of top Function-Specific activities performed in the job.

- Perform production activities for equipment set-up, package filling and labeling, and records retention using The Coca-Cola Quality System guidelines in order to ensure product quality and customer satisfaction.
- Prepare (e.g., inspect, verify condition) all equipment used in the manufacturing process prior to use in order to ensure smooth, sanitary and safe operation.
- Clean and sanitize tanks using technology (e.g., computer-guided processes) and physical ability (e.g., washing the tanks) in order to maintain sanitary production equipment in manufacturing plant.
- Operate a label-printing machine and manually label bags or boxes as needed in order to ensure proper packaging of ingredients.
- Maintain the plant's manufacturing equipment in sanitary condition (e.g., clean and sanitize tanks and pipe routings, maintain conveyor belts, hook up and unload raw material delivery tankers, clean work areas) according to Company GMP policies and procedures in order to assure the quality of the manufactured product.
- Protect the Company and all Company information against unauthorized disclosure, eavesdropping and legal exposure.
- Move raw materials and finished product (e.g., syrup, concentrate, parts, point-of-sale) within the warehouse or production facility, using forklifts or other warehouse equipment in order to supply production and/or facilitate shipping.
- Perform final quality check/inspection for accuracy and visible damage prior to shipment to customer.
- Maintain warehouse inventory levels in order to prepare for anticipated demand using available tools or technologies (e.g., forklifts, ERP systems, cycle counting, orders, forecasts).
- Inspect facility (e.g., production, warehouse, service/installation) to assure adherence to safety and operating policies and Good Manufacturing Practices (GMP) using Company policies and procedures.
- Hook drums lines to tank outlet, close and cap all outlets according to standard operating procedures to ensure proper flow of ingredients and proper tank utilization.
- Safeguard Company trademarks that standardize and protect all information surrounding confidential ingredients and flavors manufactured by The Coca-Cola Company in order to prevent breach of trademark security within the Company.
- Protect all intellectual property, information and technology surrounding confidential processes and products using established legal safeguards in order to prevent a breach of trademark security within the Company.
- Implement, evaluate and maintain effective application of The Coca-Cola Quality System in order to ensure product quality as defined by Company requirements.
- Calculate production yields and scrap quantities in order to accurately record material usage variances.

Job Requirements - The following is a listing of minimum indicated requirements for this job.

Education	High school diploma; GED equivalent
Related Work Experience	At least 2 years

Core Competencies - The following is a list of top Core Competencies needed for the job.

	Req'd at Entry
<ul style="list-style-type: none"> • Drives Innovative Business Improvements: Develops new insights into solutions that result in organizational improvements; promotes a work environment that fosters creative thinking, innovation and rational risk-taking. 	Yes
<ul style="list-style-type: none"> • Balances Immediate and Long-Term Priorities: Seeks to meet critical objectives while considering the impact of those decisions and activities on the ability to achieve long-term goals. 	Yes
<ul style="list-style-type: none"> • Delivers Results: Focuses on the critical few objectives that add the most value and channels own and others' energy to consistently deliver results that meet or exceed expectations. 	Yes
<ul style="list-style-type: none"> • Imports and Exports Good Ideas: Relentlessly seeks, shares and adopts ideas and best practices in and outside the Company and embraces change introduced by others. 	Yes
<ul style="list-style-type: none"> • Develops and Inspires Others: Builds and maintains relationships that motivate, guide, and/or reinforce the performance of others toward goal accomplishments. Develops self and others to improve performance in current role and to prepare for future roles; seeks and provides feedback and coaching to enhance performance. 	Yes
<ul style="list-style-type: none"> • Lives the Values: Demonstrates the values of The Coca-Cola Company through words, actions, and by example; fosters an environment that reflects the values of the company. 	Yes

Technical Skills - The following is a list of the top Technical Skills needed for the job.

	Req'd at Entry
<ul style="list-style-type: none"> • Manufacturing Equipment Operation: Ability to operate standard manufacturing and other job-related equipment (e.g., check weigher, filler, scales, computer applications, labeler, mixing tank, palletizer). 	No
<ul style="list-style-type: none"> • Heavy Equipment Operation: Ability to operate heavy equipment (e.g., forklift, Company vehicle). 	
<ul style="list-style-type: none"> • Hand Tools: Ability to use common hand tools and small power tools (e.g., screw drivers, hand drills). 	
<ul style="list-style-type: none"> • Good Manufacturing Practices: Knowledge of the basic elements of Good Manufacturing Practices (GMP) in a manufacturing environment and the ability to apply them. 	
<ul style="list-style-type: none"> • Food Safety Regulations: Knowledge of the Company, local, national and international food safety regulatory requirements that apply to Company locations or processes and the actions required to keep the Company in compliance with these regulations. 	

- Clean In Place: Knowledge of the Company's Clean-in-Place (CIP) policies and procedures and the ability to perform the associated tasks (e.g., physically entering tanks, heavy lifting, handling large hoses and hot water).
 - Lab Safety: Knowledge of government lab safety regulations, including hazardous materials, OSHA and chemical hygiene policies. Includes knowledge of procedures for safe handling of chemicals and glassware, use of personal protective equipment and adhering to Company safety rules. Knowledge and application of Good Laboratory Practices (e.g., housekeeping, handling chemicals and glassware, preparing standards and reagents proper measuring techniques).
 - Occupational Safety Regulations: Knowledge of the Company, local, national and international regulatory requirements (e.g., safety, emergency management) that apply to Company locations or processes and the actions required to keep the Company in compliance with these regulations.
 - Quality Assurance: Knowledge and application of quality cost analysis, inspection, corrective action planning, customer and consumer satisfaction tracking, and internal monitoring to detect and correct non-conforming information, materials or processes. Knowledge of the principles systems and costs associated with product quality. Knowledge of the methods and techniques used during quality monitoring and auditing. Ability to use software and statistical techniques to aid in quality control.
 - Safety and Loss Prevention: Knowledge of and ability to apply safety and loss prevention techniques and processes required for fire prevention and protection related to the manufacture and distribution of Company products.
-

transmittal

HIXSON
659 Van Meter Street
Cincinnati, Ohio
45202-1568
513 241 1230
FAX 513 241 1287

TO: Department of Community Affairs
Codes & Standards Section
2555 Shumard Oak Blvd.
Tallahassee, FL 32399-2100

JOB NO. 7870.20

DATE: 10/21/11

SUBJECT: Project Optimus
Elevator Waiver

ENCLOSED

UNDER SEPARATE COVER

ATTENTION: Mary-Kathryn Smith

DELIVERED BY:
UPS Next Day Air

COPIES	DESCRIPTION
	Please see the enclosed.
1	Set of full size documents bound of drawing 3-C0.1 and 3-A1.2b
1	Set of 11 x 17 documents unbound of drawing 3-C0.1 and 3-A1.2b
1	Set of 8 ½ x 11 transparencies of drawing 3-C0.1 and 3-A1.2b
1	Notice to Waiver Applicants with operator description attachment.
1	Compact Disc with electronic copies of the above

HIXSON

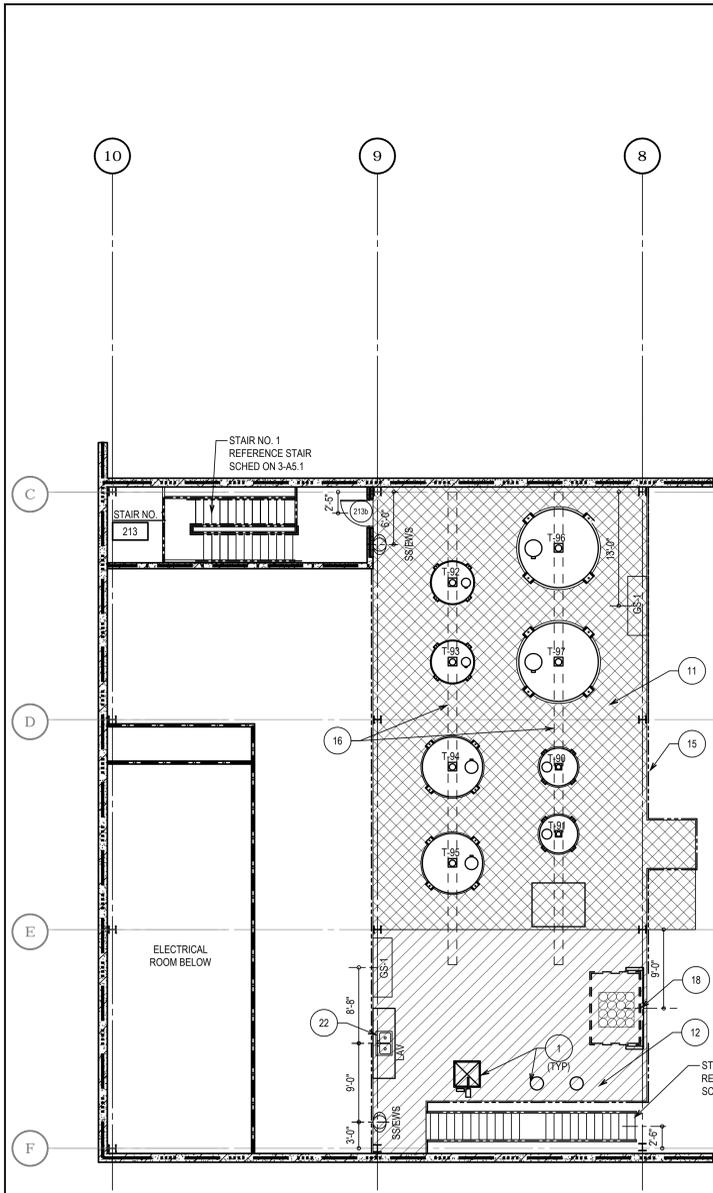


William H. Sander, NCARB
Senior Vice President/Project Manager

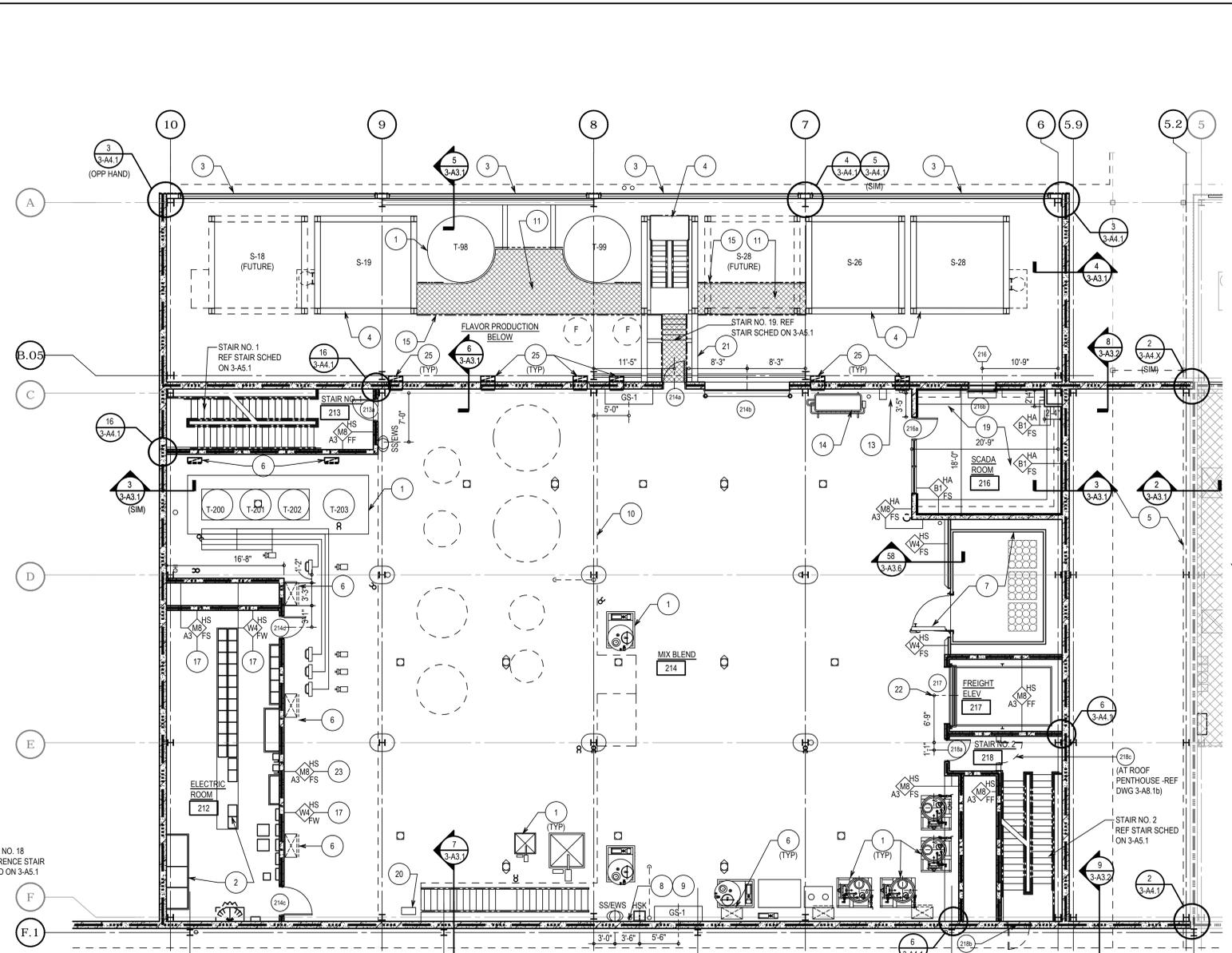
WHS/mbe

cc: Mark Lee
SRK w/ trans only

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PARTIAL PLATFORM PLAN
1/8" = 1'-0"



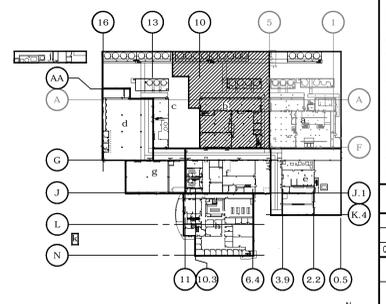
PARTIAL SECOND FLOOR PLAN
1/8" = 1'-0"

KEYNOTES

- 25. OPENING THROUGH 4-HOUR RATED MASONRY WALL PROVIDE 4-HOUR MIN UL FIRE RATED THRU-PENETRATION FIRESTOP SYSTEM PER HILTI DESIGN SYSTEM OR EQUAL. REFERENCE LINTEL SCHEDULE ON 3-A3.0 FOR AN OPENING GREATER THAN 1'-0" WIDE. REFERENCE 'M/P/E/T' DRAWINGS FOR ADDITIONAL INFORMATION. COORDINATE OPENINGS WITH WALL REINFORCING.

LEGEND

- GS-1 GANG STATION (GS-1) - REFERENCE 'M' AND 'P' DRAWINGS FOR ADDITIONAL INFORMATION
- LAV SINK - REFERENCE 'P' DRAWINGS
- SS/EWS SAFETY SHOWER AND EYE WASH - REFERENCE 'P' DRAWINGS
- HSK HAND SINK - REFERENCE 'P' DRAWINGS
- 1 HR FIRE RATED WALL - UL90S
- 2 HR FIRE RATED WALL - UL90S
- 4 HR FIRE RATED WALL - UL901
- INDICATES FIBERGLASS FLOOR GRATING - REFERENCE SPECIFICATION 068000
- INDICATES SST FLOOR PLATE 'ALGRIP' - REFERENCE SPECIFICATION 055000



KEYPLAN
NTS

FIREPROOFING NOTES

- A. THE FOLLOWING COLUMNS ARE TO RECEIVE INTUMESCENT FIREPROOFING (REFERENCE SPECIFICATION 078123) OF 1-HR RATING (UL DES NO. X829): C6, C7, C8, C9, C10, D6, D7, D8, D9, D10, E6, E7, E8, E9, E10, F6, F7, F8, F9 & F10. ALSO, PROVIDE SIMILAR FIREPROOFING TO ALL BEAMS AND STRUCTURE SUPPORTING THE PLATFORM MEZZANINE.
- B. ALL STEEL BEAMS AND METAL DECK SUPPORTING THE ROOF WITHIN COLUMN LINES C TO F AND 6 TO 10 ARE TO RECEIVE FIREPROOFING (REFERENCE SPECIFICATION 078100) OF 1-HR RATING (UL DES P723).

DRAWING NOTES

- A. DIMENSIONS ARE TO FINISH FACE OF WALL, COLUMN CENTERLINE OR CENTER OF DOOR/ OPENING, UNLESS OTHERWISE NOTED.
- B. REFERENCE DRAWING 3-A3.0 FOR ALL INTERIOR WALL TYPES, GENERAL NOTES AND PARTITION NOTES.
- C. SOLID GROUT ALL MASONRY CORES TO 24" AFF1.
- D. AT PIPE PENETRATIONS THROUGH EXTERIOR METAL WALL PANELS PROVIDE REFERENCED FLEXIBLE PIPE BOOT FLASHING (BY ITW BUILDDEX 800-384-5339).
- E. TYPICAL DOOR CENTERLINE DIMENSION, TO A PERPENDICULAR WALL ADJACENT TO HINGE SIDE, = 1/2 DOOR WIDTH PLUS 8 INCHES FOR MASONRY WALLS UNO.
- F. TYPICAL DOOR CENTERLINE DIMENSION, TO A PERPENDICULAR WALL ADJACENT TO HINGE SIDE, = 1/2 DOOR WIDTH PLUS 8 INCHES FOR MASONRY WALLS UNO.
- G. EQUIPMENT ON PLAN SHOWN FOR REFERENCE ONLY. COORDINATE FINAL SIZE AND LOCATION WITH 'M', 'P', 'R', 'E', 'J', 'T' DRAWINGS.
- H. INTERIOR CMU WALL COURSING TO ALIGN WITH EXTERIOR CMU WALLS.
- J. BOTTOM OF LINTEL ELEVATION AT DOORS = 127'-4" (AT SECOND FLOOR ONLY).
- K. ALL CMU WALLS IN THIS AREA DESIGNATED WITH FLOOR CONDITION (FS) ON WALL TAG WILL START FROM TOP OF STRUCTURAL SLAB.

KEYNOTES

- 1. PROCESS EQUIPMENT - REFERENCE 'T' DRAWINGS.
- 2. ELECTRICAL EQUIPMENT - REFERENCE 'E' DRAWINGS.
- 3. LOUVER - REFERENCE 'M' DRAWINGS.
- 4. EQUIPMENT BY OTHERS.
- 5. EXTENT OF PIPE RACK - REFERENCE 'S' DRAWINGS FOR ADDITIONAL INFORMATION.
- 6. DUCT - REFERENCE 'M' DRAWINGS.
- 7. PREFABRICATED COOLER #2. REFERENCE SPECIFICATION 132134.
- 8. TOWEL DISPENSER BY 'MAMMASTER-CARR' (330-342-6100). MODEL #: 2278K19. COORDINATE FINAL LOCATION OF PAPER TOWEL DISPENSER WITH OWNER.
- 9. PROVIDE WALL-MOUNTED, 800 ml CAPACITY, BAG-IN-BOX SOAP DISPENSER BY 'MAMMASTER-CARR' (330-342-6100). MODEL #: 7143T161. COLOR: BLACK. COORDINATE FINAL LOCATION OF SOAP DISPENSER WITH OWNER.
- 10. REFERENCE 1/3-A1.2b FOR PLATFORM ABOVE.
- 11. EQUIPMENT PLATFORM FRAMING WITH FIBERGLASS GRATING. REFERENCE 'S' DRAWINGS FOR ADDITIONAL INFORMATION.
- 12. EQUIPMENT PLATFORM FRAMING WITH 'ALGRIP' FLOOR PLATE. REFERENCE 'S' DRAWINGS FOR ADDITIONAL INFORMATION.
- 13. NITROGEN HOSE REEL. REFERENCE 'P' DRAWINGS.
- 14. COP TANK - REFERENCE 'P' AND 'E' DRAWINGS.
- 15. GUARDRAIL AT PLATFORM - REFERENCE 83-A5.9.
- 16. MONORAIL WITH JOIST - REFERENCE 'S' DRAWINGS.
- 17. INSULATED METAL WALL PANEL TYPE WCS-4. REFERENCE SPECIFICATION 123216.
- 18. MEZZANINE SAFETY GATE PIVOT MODEL. REFERENCE SPECIFICATION 055000.
- 19. REFERENCE 3-A11.1 FOR ADDITIONAL ROOM INFORMATION.
- 20. EQUIPMENT BY OWNER. COORDINATE FINAL SIZE AND LOCATION WITH OWNER OR OWNER'S REPRESENTATIVE PRIOR TO INSTALLATION.
- 21. PIPE BRIDGE - REFERENCE 'S' DRAWINGS FOR ADDITIONAL INFORMATION.
- 22. COORDINATE SIZE, LOCATION AND DETAILS OF OPENING WITH ELEVATOR SHOP DRAWING.
- 23. FROM STRUCTURAL SLAB TO 10'-8" AFF.
- 24. PLASTIC LAMINATE CABINETS AND COUNTERTOP.

<p>PRELIMINARY DRAWING NOT FOR CONSTRUCTION</p> <p>For use only by authorized parties, including HIXSON PROJECT ONLY. No part of these documents may be reproduced or used in any other form on any project without the prior written approval of Hixson.</p> <p style="text-align: right; font-size: small;">HIXSON 659 Van Meter Street Cincinnati, OH 45202 Tel: 513 241 4200 Fax: 513 241 1287 www.hixson-inc.com</p>	<p>PROJECT OPTIMUS THE COCA - COLA CO FMAP FACILITY APOPKA FLORIDA</p> <p>THE Coca-Cola Company</p> <p>PARTIAL SECOND FLOOR PLANS</p> <table border="1" style="width: 100%; border-collapse: collapse; font-size: x-small;"> <tr> <td>DWG FILE</td> <td>j:\00787000\awork\787020</td> </tr> <tr> <td>DRAWN</td> <td>TSJ</td> </tr> <tr> <td>CHECKED</td> <td>SRK</td> </tr> <tr> <td>D.C. REVIEW</td> <td>SRK</td> </tr> <tr> <td>DRAWING DATE</td> <td></td> </tr> <tr> <td>JOB NUMBER</td> <td>7870.20</td> </tr> <tr> <td>PRINT DATE</td> <td>102111 10:43</td> </tr> </table> <p style="text-align: right; font-size: large; font-weight: bold;">3-A1.2b</p>	DWG FILE	j:\00787000\awork\787020	DRAWN	TSJ	CHECKED	SRK	D.C. REVIEW	SRK	DRAWING DATE		JOB NUMBER	7870.20	PRINT DATE	102111 10:43
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DRAWN	TSJ														
CHECKED	SRK														
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