



BETTER. FASTER. CHEAPER

**TurnKey Recovery**

Managed Direct Repair Program

## INVITATION FOR BID (IFB)

<u>IFB Number</u>	<u>Scope Description</u>	<u>Closing Date</u>	<u>Closing Time</u>
GC2022107863-036001-12838	Restroom repairs-build back	07/31/2023	4:30 PM CST

Insured Property Owner: City of Sanibel

Property Location Name: Restrooms

Address Line 1: 153 periwinkle Way

Address Line 2: -

City: Sanibel

State: FL

Zip Code: 33957

**DESCRIPTION:** Furnish all required labor, materials, and equipment necessary to provide Scope-of-Work at the above-described location. Work is being authorized under the elected FMIT TurnKey Recovery Program<sup>SM</sup> administered by Synergy NDS, Inc. (SynergyNDS) on behalf of the Insured Property Owner, a Member of the Florida Municipal Insurance Trust (FMIT).

**SUBMITTAL INSTRUCTIONS:** In support of Procurement Guidelines, the IFB Packet includes specifications and terms & conditions associated with the above referenced project information.

1. Bids shall be received no later than the Closing Date & Time indicated above. Bids received after above deadline or that are not submitted in accordance to Submittal Instructions may be rejected without further explanation or contractor notification.
2. Bid shall be completed and submitted via DocuSign by filling out the **Contractor Submittal Form** (see Page 5 of this IFB Packet). Contractor may attach additional supporting documents that may or may not be used in the overall scoring of the IFB Contractor Submittal. Attachments do not change &/or modify any of the IFB Terms & Conditions as outlined in the following pages (Pages 1-10).
3. Contractor IFB Form Submittal **MUST INCLUDE** all applicable Sales Tax or any other Local, State &/or Federally mandated fee(s) within the aggregated Lump Sum Proposal. Do not breakout separately.
4. Contractor is responsible to validate all Quantities and Units of Measurements specific to the following scope items &/or products. The information and descriptions provided in the IFB are intended for general guidance purposes only. Contractor may not change or alter any material &/or specifications identified in the IFB for submission purposes without prior written/email notification to: [bids@synergynnds.com](mailto:bids@synergynnds.com).
5. Contractor has the sole responsibility to ensure that all services and material for BID Submittal (whether stated correctly in the IFB or not) satisfactorily meet all required Codes & Standards, OSHA Guidelines and The Americans with Disabilities Act (ADA).
6. Contractor should also consider the approach (if necessary) in which to stock/store material at the jobsite in a safe and secure manner. SynergyNDS will not be responsible for lost or stolen material, supplies or equipment stocked at the jobsite.
7. Bid award will be made based on best overall LUMP SUM project value as determined by SynergyNDS in accordance to market valuation, project demands, critical path scheduling – as well as overall Insured Member's WorkForce Participation Goals. Contributing factors, in addition to price, may be considered as necessary to help determine bid award based on any additional criteria set forth by the specific FMIT Insured Member.

8. SynergyNDS reserves the right to modify the IFB Specifications and Terms & Conditions at any time during the bid solicitation process. Timely notice to all bidders will be given via an electronically distributed Addendum.
9. All registered HUB & HUB Zone Contractors, as well as DBEs are encouraged to participate. Additional Contractor Financial Assistance is available to help support daily HUB/DBE Contractor's operations under the terms and condition of a successful contract award.
10. SynergyNDS is an equal opportunity employer and administers all Contracts & Contractor Agreements in accordance to the requirements of 41 CFR §§ 60-1.4(a), 60-300.5(a) and 60-741.5(a).
11. Contractor is strongly encouraged to schedule a Site Visit of the property as necessary to support the IFB Submittal. All scheduled site visits can be requested at [bids@synergynnds.com](mailto:bids@synergynnds.com).
12. When a mandatory Pre-BID Meeting is identified and scheduled in a specific IFB, Contractor Attendance is a requirement as part of the Solicitation. Contractors who fail to attend the Pre-BID Meeting will not be eligible to participate in the IFB and subsequent submittal process.
13. Contractor can submit all questions &/or concerns specific to the IFB by email to: [bids@synergynnds.com](mailto:bids@synergynnds.com).

## SCOPE-OF-WORK SUMMARY

Refer to **EXHIBIT A** for scope-of-work description.

### Yes | No

- |  |   |
|--|---|
| <input type="checkbox"/>   <input checked="" type="checkbox"/> | This IFB is part of a publicly advertised solicitation      |
| <input type="checkbox"/>   <input checked="" type="checkbox"/> | This IFB is part of a potential Federally Funded Project.   |
| <input checked="" type="checkbox"/>   <input type="checkbox"/> | This IFB is being distributed externally                    |
| <input type="checkbox"/>   <input checked="" type="checkbox"/> | This IFB requires a Contractor Payment or Performance Bond. |
| <input checked="" type="checkbox"/>   <input type="checkbox"/> | This IFB requires a Pre-BID Meeting                         |
| <input type="checkbox"/>   <input checked="" type="checkbox"/> | This IFB supports workforce participation goals.            |

**\*\* THE REMAINING PART OF THIS PAGE IS INTENTIONALLY LEFT BLANK \*\***



## IFB EXHIBIT A Scope-of-Work

<u>IFB Number</u>	<u>Scope Description</u>	<u>Closing Date</u>	<u>Closing Time</u>
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Property Location Name: Restrooms

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Address Line 2: -

City: Sanibel

State: FL

Zip Code: 33957

### GENERAL SCOPE DESCRIPTION

Restroom Rehab: Structural Damages/Plumbing/Painting/Partitions/Vent Repairs

### GENERAL SCOPE-OF-WORK DISCUSSION

Build new block walls to engineered drawing specs provided.

Replace all toilets, sinks, mirrors, air blowers, baby changing stations and accessories.

Prime and paint all walls.

Repair all vents and screens on the exterior.

The bid should include all labor and materials to complete this project.

*\*Information should match scope-of-work description as described in SimpliCity<sup>SM</sup>.*

### ADDITIONAL NOTES &/OR REQUIREMENTS

None

### DRAWING & SPECIFICATION DESCRIPTION

STRUCTURAL REPAIRS FOR CITY OF SANIBEL - LIGHTHOUSE RESTROOMS  
Architectural plan / diagram

Document #1 STRUCTURAL REPAIRS FOR CITY OF SANIBEL - LIGHTHOUSE RESTROOMS

Document #2 TMP22115880 - 1st F Enc #3 Diagram - Architectural Plan

### ADDITIONAL CONTRACTOR EXPECTATIONS

None

*\*Contractor should understand overall expectations as further detailed in the attached TurnKey Recovery<sup>SM</sup> Contractor Expectation Document in support of accounting for a responsible IFB Submittal.*

### GENERAL WORKDAY &/OR JOBSITE CONSIDERATIONS

The contractor shall ensure the job site is cleaned daily and be free from excess debris, trash and hazards that can be exposed to workers, the city staff and general public.

- **Occupant Workday:** ☒ Standard (M-F/8-5pm) ☐ Wknd/After Hours ☐ Other \_\_\_\_\_
- **Building/Site Occupancy:** ☐ Occupied ☒ Vacant ☐ Partial
- **Site Access:** ☒ Open ☐ Restricted (Gated/Security)
- **Parking/Laydown Area:** ☒ Open/Available ☐ Restricted ☐ Limited
- **Restroom Facilities:** ☐ Fixed/Indoor ☒ Portalets ☐ Not Available
- **Waste/Debris Containers:** ☐ Provided/Onsite ☒ Include in BID

**Email all IFB Questions to [Bids@synergynds.com](mailto:Bids@synergynds.com)**



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 Managed Direct Repair Program

## IFB – CONTRACTOR SUBMITTAL FORM

<u>IFB Number</u>	<u>Scope Description</u>	<u>Closing Date</u>	<u>Closing Time</u>
GC2022107863-036001-12838	Restroom repairs-build back	07/31/2023	4:30 PM CST

**Company Name:** \_\_\_\_\_

**Address Line 1:** \_\_\_\_\_

**Address Line 2:** \_\_\_\_\_

**City:** \_\_\_\_\_

**State:** \_\_\_\_\_

**Zip Code:** \_\_\_\_\_

**Contractor Certification:**    ☐ DBE    ☐ WBE/WOSB    ☐ HUB    ☐ SDVOSB/VOSB

**CONTRACTOR LUMP SUM PROPOSAL:**

IFB TITLE		PROPOSAL:	\$
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**CONTRACTOR NOTES:****MATERIAL DEPOSIT:**    ☐ Required    ☐ Requested    \$

I understand that all applicable Sales Tax or any other Local, State &/or Federally mandated fee(s) are to be included within the aggregated Lump Sum Proposal. Do not breakout separately. Contractor may attach additional supporting documents that may or may not be used in the overall scoring of the IFB Contractor Submittal. Attachments do not change &/or modify any of the Terms & Conditions as outlined in the IFB, Scope-of-Work (Exhibit A) and the Turnkey Recovery<sup>SM</sup> Contractor Expectations.

**I, having the legal authorization to represent the “Company” (the undersigned) have read and understood the IFB, its Scope-of-Work and the Turnkey Recovery<sup>SM</sup> Contractor Expectations in accordance with the Terms & Conditions:**

 \_\_\_\_\_  
**Company Contact Name (Please Print)**

 \_\_\_\_\_  
**Company Title (Please Print)**

 \_\_\_\_\_  
**Signature**

 \_\_\_\_\_  
**Date**



## **TURNKEY RECOVERY<sup>SM</sup> PROGRAM Overview & General Contractor Expectations**

### **PROGRAM OVERVIEW**

Synergy NDS, Inc. (SynergyNDS) and Florida Municipal Insurance Trust (FMIT) have partnered in support of the critical needs of FMIT's 360+ Public Entities since 2004, representing over \$11 Billion of insured assets. SynergyNDS has the proven capacity and resources necessary to assist Florida Municipalities with disaster planning, preparation, response & recovery.

FMIT Turnkey Recovery<sup>SM</sup> (Turnkey Recovery<sup>SM</sup>) is exclusive to Members who insure their fixed real property with FMIT and the insurance coverages offered under their Property Policy. Administered by SynergyNDS, Turnkey Recovery<sup>SM</sup> supports individual Member's response & recovery directives using a more transparent approach to Project Management throughout the lifecycle of the restoration/repair project. More importantly, Turnkey Recovery<sup>SM</sup> supports contractors by reducing the "red-tape" and exposure often associated with public entity projects by streamlining the contracting and payment process. All approved Work Authorizations and Invitations for Bid (IFB) Contract Awards with eligible upfront material deposits and progress payments are paid directly by SynergyNDS to applicable contractors within defined terms/conditions. Contractors within Turnkey Recovery<sup>SM</sup> can be those identified by the Member's own procurement process, as well as those participating in the qualified Managed Vendor Program (MVP<sup>SM</sup>).

### **GENERAL CONTRACTOR EXPECTATIONS**

Information contained throughout this document supports Turnkey Recovery<sup>SM</sup> expectations/requirements for a specified Work Authorization, or as necessary for subcontractor to provide a responsible IFB Response submittal. Where any conflicts arise from language outlined in this document in support of a specific Work Authorization or IFB Contract Award (which is inclusive of and incorporated into the Contractor's IFB Response submittal), the General Services Agreement between Contractor and SynergyNDS, or the IFB Contract Award becomes the guiding and controlling form.

1. Contractor shall be responsible for field verification of all conditions, dimensions & quantities associated with work prior to Work Authorization or Contractor IFB Response Submittal. Any Exhibits, Plans, Drawings &/or Other Supporting Documents that may be provided by SynergyNDS to Contractor are for general reference purposes only.
2. Contractor is responsible for identifying and satisfactorily addressing all applicable regulatory requirements, including but not limited to Codes & Standards, HUD/DBE Participation Goals & Guidelines and ADA/FHA Specifications.
3. Contractor shall indicate in writing and submit to SynergyNDS via email distribution to [projects@synergynds.com](mailto:projects@synergynds.com) any request or need for additional 3<sup>rd</sup> Party Assignment as necessary to

further identify required codes & standards, scope specifications or public health safety concerns outside of Contractor's professional competence &/or licenses.

4. Contractor is to obtain their own permits and schedule all applicable inspections. Permits can be obtained by contacting the Building Department or other administering entity. Permit Fees are reimbursable directly from SynergyNDS (in addition to contractor's Lump Sum Proposal) if incurred and submitted with proper documentation.
5. Contractor shall prohibit discrimination against staff &/or available workforce based on their status as protected veterans or individuals with disabilities and prohibit discrimination against all individuals based on their race, color, religion, sex, sexual orientation, gender identity or national origin. Moreover, these regulations require that Contractor and its subcontractors take affirmative action to employ and advance in employment individuals without regard to race, color, religion, sex, sexual orientation, gender identity, national origin, protected veteran status or disability.
6. Contractor is required to be familiar with and follow all OSHA and State of Florida safety requirements, including OSHA form 300 Logs reporting requirements, if applicable.
7. Contractor shall independently implement a site-specific health and safety plan for each project to include hazard communication and related OSHA requirements to protect workers, building occupants, and the public who has access to the work area.
8. Prior to beginning work each day, Contractor is to independently hold jobsite safety meetings that review the work to be performed, the hazards involved with the work, and the acceptable methods for reducing and eliminating such hazards. Contractor shall maintain appropriate meeting records, including a Job Safety Analysis (JSA), or similar, that includes information from the daily jobsite safety meeting, including an attendee list, which shall be maintained by Contractor and available for SynergyNDS review at all times. Contractor shall be solely liable for any and all unsafe acts and/or safety violations associated with their employees.
9. Contractor shall require all employees to be familiar with job-specific hazard mitigation when performing the work, including but not limited to: slip, trip & fall protection, eye and ear protection, hand and foot protection, head protection, fire protection & prevention, confined space protection, employee thermal stress protection, etc.
10. Contractor is responsible for supplying and educating all on-site employees in the proper use of Personal Protective Equipment (PPE), including but not limited to: hard hat(s), safety glasses, face shields, ear plugs, gloves, boots, fall protection (where required), breathing protection (where required), tie off ropes/apparatuses/points (where required), fire extinguishers, first aid kits, etc.
11. Contractor is required to have the appropriate Material Safety Data Sheets (MSDS), and be able to provide to the Industrial Hygienist of record (for the project) for any products used during the performance of their work for which an MSDS is required, including, but not limited to, glues, cleaners, paints, solvents, anti-microbial products, sanitizing agents, etc. The Industrial Hygienist of record retains the right to restrict the use of any of the products selected for use on the project.
12. Contractor shall be responsible under terms of the Agreement for supplying all necessary labor, equipment, tools, materials and travel expense to complete the scope of work unless directed otherwise in the Work Authorization or IFB Contract Award. This includes, but is not limited to: Rental Equipment, Dumpsters, Storage Containers, Jobsite Trailer, General Conditions, Associated

Expenses, Travel Cost and Overhead & Profit which are to be included in the Work Authorization and/or IFB Contract Award.

13. Contractor shall protect all property from damage during the performance of work. This includes, but is not necessarily limited to: wall finishes, floor finishes, windows, electrical systems, mechanical systems, communication systems, life safety systems, security systems, HVAC control systems, plumbing systems, lighting systems, structurally related components, exterior elements, vegetation, property-of-others, etc.
14. Contractor shall be responsible for repair, replacement &/or cleaning of property damaged by employees, as well as any debris, coatings, coverings, overspray, or caulking residue located on any 3<sup>rd</sup> party property due to actions of Contractor employees. If affected property cannot be successfully cleaned &/or restored to pre-existing condition, SynergyNDS will seek reimbursement from Contractor &/or deduct the appropriate replacement cost from outstanding Invoice Payment (Contract Value).
15. Contractor shall be responsible for securing work area(s) from access by non-authorized building occupants, including all persons not directly part of the restoration, repair and/or rebuild efforts. This includes securing work area(s) as identified in the Work Authorization, IFB Scope-of-Work &/or under Contractor's control.
16. If the Contractor determines that deviations or modifications (change order or supplemental costs) from the initial Work Authorization or IFB Contract Award are required, Contractor shall submit a written request to SynergyNDS for review and approval prior to start of any additional work not otherwise included in initial Work Authorization or IFB Contract Award. The written request will contain, at a minimum:
  - a. Reason for deviation or modification
  - b. Description of deviation or modification
  - c. Project cost addition or subtraction for deviation or modification
  - d. Estimated time required for deviation or modification.
17. Contractor is NOT responsible for any conditions or activities implemented prior to their performance of work and/or arrival to the job site. During the performance of Contractor's work, if pre-existing damage to the building, structure, system failures or other anomalies is found, Contractor has the responsibility to identify, document and report these deficiencies immediately to SynergyNDS by email notification to [projects@synergynnds.com](mailto:projects@synergynnds.com). Verbal notification &/or discussion with the onsite Project Manager is encouraged, but not required. Written documentation approved by SynergyNDS must be provided to ensure that pre-existing damages are not the responsibility of the Contractor and to maintain transparency with work performance.
18. Contractor represents that it has adequate and sufficient equipment in good working order and fully trained, licensed personnel capable of safely and efficiently operating such equipment and performing and/or providing (a) restoration &/or repair services work, including, but not limited to labor, supervision, tools, equipment, vehicles, transportation and machinery specific to Work Authorization/IFB Invitation and/or (b) materials, goods, supplies, or other products.
19. Contractor services and scope-of-work will be performed and provided in a good and workmanlike manner with strict adherence to general industry customs and specifications, completed in a safe



manner, and in accordance with all legally required and/or accepted codes and standards. The Services will follow customs and practices of workmanship within Contractor's trade, profession, craft or line of work.

20. Contractor is responsible for submitting all applicable project/contracting documents and progress updates in support of scope-of-work and invoicing to include, but not necessarily limited to any: Architectural Drawings, Work Scope Breakout & Description, Engineering or 3rd Party Reports, Certificates of Insurance, Change Order Requests, Warranty Info/Certificates or any written documentation with SynergyNDS that would otherwise change &/or modify the Work Authorization or IFB Contract.
21. Contractor agrees to provide a workmanship warranty, with a 12-month period of correction from the date that work performed by the Contractor is completed. Contractor will be responsible for remedying any patent or latent defects related to their work performance in accordance with the rules prescribed under Florida Construction Law. For patent defects, SynergyNDS will notify Contractor verbally, or in writing, and Contractor will make a best effort to remedy to the satisfaction of SynergyNDS within 1-5 business days. For latent defects, SynergyNDS will notify Contractor in writing and allow Contractor up to 10 business days to review the defect. SynergyNDS and Contractor will then develop a remediation plan to resolve the latent defect to the satisfaction of SynergyNDS.

**PAYMENT:** Project is managed by SynergyNDS under the FMIT Turnkey Recovery<sup>SM</sup> Program. Payments will be made by SynergyNDS directly to the Contractor in accordance with terms & conditions described in the Work Authorization or IFB Contract Award. Qualified contractors may be eligible for an upfront material deposit or progress payments as determined prior to work performance. **Contractor must be registered in the MVP (Managed Vendor Program) whereby required contractor documents must be uploaded to the database. There is annual \$49.95 processing and maintenance fee as part of the initial contractor vetting and background check.**

**PAYMENT TERMS:** Payments will be made after inspection and approval of work by SynergyNDS, FMIT Member Building Official &/or FMIT Desk Adjuster. Accurate invoices and required project documentation must be submitted to SynergyNDS for project review and/or audit prior to payment. Contractor will provide all applicable product warranty documentation or certification prior to release of final payment. \*Material Deposits &/or Advanced Payments require Contractor to complete online registration in the Managed Vendor Program (MVP).

**INSURANCE & LICENSING SUMMARY:** Before starting work, the Contractor will provide SynergyNDS at minimum, proof of Worker's Compensation and General Liability Insurance. The Contractor must be licensed to do business in the State of Florida, as well as hold whatever specific trade licenses to perform and/or oversee such work in the State of Florida. In some cases, Professional Liability insurance will also be required. SynergyNDS must be named as an additional insured on all liability insurance certificates. Contractor will need to go to [www.synergynds.com/MVP](http://www.synergynds.com/MVP) and complete the initial registration for the Managed Vendor Program (MVP).

**The certificate holder(s) must be noted as:**

Synergy NDS, Inc.  
1400 Sarno Rd, Melbourne, FL 32935

**INSURANCE & LICENSING REQUIREMENTS:** Contractor will be required to upload in the MVP Contractor Profile the following information (when applicable) prior to contract award and eligible material deposits.

- a) Workers Compensation Insurance Certificate for all employees engaged in work at the site, in accordance with State or Territorial Worker's Compensation Laws.
- b) General Liability Insurance Certificate with bodily injury and property damage limits at a combined single limit of at least \$500,000 in order to protect the contractor and SynergyNDS against claims for injury or death of one or more persons.
- c) Automobile Liability Certificate on owned and non-owned motor vehicles used on the site(s), or in connection with the sites, for a combined single limit for bodily injury and property damages of not less than \$500,000.00 per occurrence.
- d) Professional Liability Certificate with \$1,000,000 per occurrence (if applicable).

Contractor will not allow any required insurance coverage to lapse, and will provide SynergyNDS with updated Certificates of Insurance, as necessary. All policies must provide at least thirty (30) days' notice of cancellation will be given to SynergyNDS. All Contractor employees &/or subcontractors are bound by the Insurance Requirement. **Contractor is the sole responsible party for all its Employee &/or Subcontractor infractions, accidents, damages, and all general and professional liability concerns that occur, whether directly or indirectly, as related to Work performed by Contractor or subcontractors under the control of Contractor.**

**CONTRACT IMPLEMENTATION:** Work Authorization or IFB Contract Award will be initiated upon review and comparative analysis of all bids &/or proposals received by SynergyNDS, and in some cases the FMIT Member, in accordance with a defined Procurement Process. Notification of Intent-to-Contract with Contractor will be engaged upon written notification by SynergyNDS and contractor signed/returned General Services Agreement Form. Contract-in-Full will be awarded upon receipt by SynergyNDS of all required contracting documentation, including but not limited to:

- a) Performance Bond &/or Payment Bond (when required)
- b) Certificate of General Liability Insurance
- c) Certificate of Auto Insurance
- d) Certificate of Worker's Compensation or Letter of Exemption
- e) Contractor's W-9
- f) State License Documentation

Further description of insurance requirements is listed in the General Services Agreement. No material deposits &/or payments will be made to Contractor until all required documentation has been received.



STRUCTURAL REPAIRS FOR  
CITY OF SANIBEL - LIGHTHOUSE RESTROOMS

153 PERIWINKLE WAY  
SANIBEL, FL 33957

DRAWING LIST	REVISION	DRAWING LIST	REVISION
G000 DRAWING LIST,PROJECT SCOPE, DESIGN CRITERIA	-		
S001 STRUCTURAL NOTES	-		
S101 ROOF PLAN, ELEVATION, & DETAILS	-		

**BUILDING DATA**

ADDRESS: 153 PERIWINKLE WAY, SANIBEL, FL 33957

STORIES: 1

USE GROUP: B

CONSTR. TYPE: VB

RISK CATEGORY: II



1 VICINITY PLAN

SCALE: NTS



2 SCHEMATIC SITE PLAN

SCALE: NTS

SYMBOLS

**COLUMN LINE GRID INDICATOR**

ALPHABETIC IN SEQUENCE

COLUMN LINE ID

NUMERIC IN SEQUENCE

**DOOR OPENING IDENTIFIER**

DOOR ID (NUMBER)

**EQUIPMENT IDENTIFIER**

EQUIPMENT ID

**ROOM IDENTIFICATION**

ROOM NAME

ROOM NUMBER

**WALL TYPE IDENTIFIER**

WALL TYPE ID

**WINDOW IDENTIFIER**

WINDOW TYPE ID

**SLOPE IDENTIFIER**

SLOPE ID

DOWN OR UP

**GENERAL SYMBOLS**

& AND

@ AT

Q CENTER LINE

# NUMBER

Ø DIAMETER

% PERCENT

= EQUAL TO

> GREATER THAN

< LESS THAN

≥ GREATER THAN OR EQUAL TO

≤ LESS THAN OR EQUAL TO

P PROPERTY LINE

/ PER

STATION EQUIPMENT

BREAKLINE

ELEVATION POINT

ALIGN

**ABBREVIATIONS**

ADDL ADDITIONAL

BTWN BETWEEN

DBL DOUBLE

EA EACH

EJ EXPANSION JOINT

E EXISTING

FV FIELD VERIFY

IN INFORMATION

KSI KIPS PER INCH

MAX MAXIMUM

MIN MINIMUM

N NEW

NTS NOT TO SCALE

O.C. ON CENTER

PL PLATE

PSI POUNDS PER SQUARE INCH

PSF POUNDS PER SQUARE FOOT

PT PRESERVATIVE (PRESSURE) TREATED

R&R REMOVE AND REPLACE

REQD REQUIRED

SIM SIMILAR

STL STEEL

TA TRIBUTARY AREA

TS TUBE STEEL

UNO UNLESS NOTED OTHERWISE

VIF VERIFY IN FIELD

W/ WITH

WS WOOD SCREW

**Project North**

NORTH ARROW

**REFERENCE BOUNDARY**

DETAIL DESIGNATION (NUMBER)

DRAWING NUMBER OF THE SHEET WHERE THE DETAIL IS SHOWN

DETAIL DESIGNATION (NUMBER)

PLAN/DETAIL NAME

SCALE

**DETAIL REFERENCE**

1ST FLOOR PLAN

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

**PLAN/DETAIL IDENTIFIER**

SECTION DESIGNATION (LETTER)

DRAWING NUMBER OF THE SHEET WHERE THE DETAIL IS SHOWN

**SECTION IDENTIFIER**

ELEVATION ORIENTATION

DRAWING NUMBER OF THE SHEET WHERE THE DETAIL IS SHOWN

**EXTERIOR ELEVATION IDENTIFIER**

REVISION IDENTIFIER

ELEVATION IDENTIFICATION

DESIGN CODE CRITERIA			
1. CONSTRUCTION SHALL FOLLOW THE REQUIREMENTS OF THE FOLLOWING CODES AND AMENDMENTS AS ADOPTED BY THE STATE OF FLORIDA AND CITY OF SANIBEL: 2020 FLORIDA BUILDING CODE WITH LOCAL BUILDING CODE AMENDMENTS, 2020 FLORIDA EXISTING BUILDING CODE.			
2. DESIGN LOAD CRITERIA:			
ROOF DEAD LOAD	15 PSF		
ROOF LIVE LOAD	20 PSF		
WIND:			
BASIC WIND SPEED - 3 SEC GUST (ULT)	161 MPH		
BASIC WIND SPEED - 3 SEC GUST (ASD)	113 MPH		
TOPOGRAPHIC FACTOR (Kzt)	1.0		
EXPOSURE CATEGORY	"D"		
ENCLOSURE CLASSIFICATION	ENCLOSED		
Gcpi	0.18±		
SEISMIC:			
SEISMIC OCCUPANCY CATEGORY	"II"		
SEISMIC IMPORTANCE FACTOR (Ie)	1.0		
REDUNDANCY FACTOR, RHO (N-S)	1.0		
REDUNDANCY FACTOR, RHO (E-W)	1.0		
MAPPED SPECTRAL RESPONSE ACCELERATIONS:	Ss = 0.044g S1 = 0.023g		
SITE CLASS	"D"		
SPECTRAL RESPONSE COEFFICIENTS:			
	Sds = 0.319g Sd1 = 0.177g		
SEISMIC DESIGN CATEGORY	"A"		
RESPONSE MODIFICATION FACTOR, R	4		
SEISMIC FORCE RESISTANCE SYSTEM:	LIGHT FRAME WOOD SHEATHED WALLS		
ANALYSIS PROCEDURE:	EQUIVALENT LATERAL FORCE		
SEISMIC RESPONSE COEFFICIENT (Cs)	0.012		

PROJECT SCOPE	
1. THE INTENT OF THESE DRAWINGS IS TO REPAIR STRUCTURAL DAMAGE TO THE ROOF AND CMU WALLS OF THE BUILDING DUE TO HURRICANE DAMAGE.	
2. THE DRAWINGS DETAIL THE SCOPE OF STRUCTURAL WORK.	
3. THERE ARE NO ADDITIONS OR RECONFIGURATIONS OF THE FLOOR PLAN.	

GENERAL NOTES	
1. CONTRACTOR SHALL FIELD VERIFY ALL DIMENSIONS AND ACCESSIBILITY PRIOR TO BEGINNING WORK. ANY DISCREPANCIES FOUND SHALL BE BROUGHT TO THE ATTENTION OF THE PROJECT ARCHITECT/ENGINEER. ANY NECESSARY ADJUSTMENTS SHALL BE MADE PER PROJECT ARCHITECT/ENGINEER'S WRITTEN DIRECTION	
2. ALL DESIGN CHANGES SHALL BE SUBMITTED IN WRITING FOR REVIEW BY THE PROJECT ARCHITECT/ENGINEER	
3. ALL WRITTEN DIMENSIONS PER PLAN TAKE PRECEDENCE OVER SCALED DIMENSIONS. DO NOT SCALE DRAWINGS	
4. CONTRACTOR SHALL COORDINATE THE WORK OF ALL TRADES INVOLVED	
5. CONSTRUCTION DETAILS AND FEATURES SHOWN ON DRAWINGS ARE TYPICAL AND SHALL BE APPLIED GENERALLY THROUGHOUT THE ENTIRE PROJECT AT SIMILAR CONDITIONS	
6. NOTES AND DETAILS LABELED AS TYPICAL, IF INCLUDED, SHALL BE USED UNLESS SPECIFIC NOTES AND DETAILS ARE SHOWN ELSEWHERE WHERE THEY ARE TO BE APPLIED	
7. ALL MATERIALS SHOWN OR CALLED FOR ON THESE PLANS SHALL BE INSTALLED PER MANUFACTURERS WRITTEN/PRINTED RECOMMENDATIONS AND SPECIFICATIONS	
8. THE CONTRACTOR SHALL BE RESPONSIBLE FOR OBTAINING ALL REQUIRED PERMITS FOR THE PROPOSED WORK	
9. THE COORDINATION OF ALL REQUIRED BUILDING DEPARTMENT INSPECTION IS THE RESPONSIBILITY OF THE CONTRACTOR. THE CONTRACTOR SHALL MAKE EVERY EFFORT THROUGH PROPER AND TIMELY NOTIFICATION TO ENSURE THE REPAIRS ARE COMPLETED WITH MINIMAL DELAY FOR INSPECTIONS	
10. THE GENERAL CONTRACTOR SHALL DETERMINE FROM THE LOCAL BUILDING AUTHORITY, AT THE TIME THE BUILDING PERMIT IS OBTAINED, WHETHER LETTERS OF CONSTRUCTION COMPLIANCE WILL BE REQUESTED FROM THE ARCHITECT/STRUCTURAL ENGINEER. THE CONTRACTOR SHALL NOTIFY THE ARCHITECT/STRUCTURAL ENGINEER OF ALL SUCH REQUIREMENTS PRIOR TO THE START OF CONSTRUCTION. FOUR DAY ADVANCE NOTICE SHALL BE GIVEN WHEN REQUESTING SITE VISITS NECESSARY AS THE BASIS FOR THE COMPLIANCE LETTER. THE GENERAL CONTRACTOR SHALL PROVIDE COPIES OF ALL THIRD PARTY TESTING AND INSPECTION REPORTS TO THE ARCHITECT/STRUCTURAL ENGINEER A MINIMUM OF ONE WEEK PRIOR TO THE DATE THAT THE COMPLIANCE LETTERS ARE NEEDED	
11. THE STRUCTURE HAS BEEN DESIGNED TO RESIST VERTICAL AND LATERAL FORCES AFTER THE CONSTRUCTION OF ALL STRUCTURAL ELEMENTS HAVE BEEN COMPLETED. STABILITY OF THE STRUCTURE PRIOR TO COMPLETION IS THE SOLE RESPONSIBILITY OF THE CONTRACTOR. THIS RESPONSIBILITY INCLUDES, BUT IS NOT LIMITED TO JOB SITE SAFETY ERECTION MEANS, METHODS AND SEQUENCES. TEMPORARY SHORING, FORMWORK AND BRACING AND USE OF EQUIPMENT AND CONSTRUCTION PROCEDURES	
12. ALL DIMENSIONS INDICATED ON DRAWINGS ARE APPROXIMATE. CONTRACTOR TO FIELD VERIFY	

NOTES:

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SEAL:

JOHN HAROLD STEWART  
No. 42970  
STATE OF FLORIDA  
PROFESSIONAL ENGINEER

NO.	ISSUED FOR:	DATE (Y-M-D):
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PROJECT:

STRUCTURAL REPAIRS FOR  
SANIBEL ISLAND - LIGHTHOUSE  
BATHROOMS  
153 PERIWINKLE WAY  
SANIBEL, FL 33957

CLIENT:

SYNERGY NDS, INC.  
202 S PARK AVE, SUITE B  
WINTER PARK, FL 32789

SHEET TITLE:

DRAWING LIST,  
PROJECT SCOPE,  
DESIGN CRITERIA

FOR CLIENT'S SOLE USE PER GOVERNING CONTRACT AND LIMITED TO APPLICABLE PROJECT. NO MODIFICATIONS OR REPRODUCTIONS WITHOUT WRITTEN APPROVAL OF RIMKUS. CONTRACTOR SOLELY RESPONSIBLE FOR VERIFYING ALL DIMENSIONS.

PROJECT NO:	100219117
DATE (Y-M-D):	2023-06-28
SCALE:	AS NOTED
DESIGNED BY:	MW
DRAWN BY:	RIMKUS
CHECKED BY:	JHS

DRAWING NO:

G000

SHEET NO: 1 OF 5

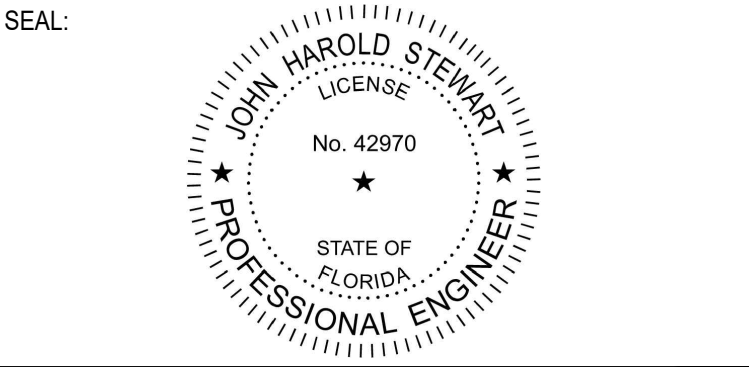


STRUCTURAL NOTES		NOTES:
<div>CONCRETE MASONRY</div> <div><div><div>1. MASONRY CONSTRUCTION SHALL CONFORM TO ACI "BUILDING CODE REQUIREMENTS FOR MASONRY CONSTRUCTION" (ACI/ASCE 5.30) AND SPECIFICATIONS FOR MASONRY CONSTRUCTION (ACI 530.1/ASCE 6).</div><div>2. MATERIALS: F'm=1500 PSI COMPRESSIVE STRENGTH OF MASONRY MUST BE VERIFIED BY THE UNIT STRENGTH METHOD AS SPECIFIED IN CBC SECTION 2105.2.<div><div>A. CONCRETE BLOCK: 1900 PSI</div><div>B. GRADE N, MEDIUM WEIGHT OPEN END UNITS CONFORMING TO ASTM C 90 WITH MAX LINEAR SHRINKAGE OF 0.06%</div><div>C. GROUT: F'g AT 28 DAYS           2000 PSI</div><div>D. COURSE GROUT AS DEFINED IN 2103.12 SHALL BE USED WITH 3/8" MAXIMUM AGGREGATE.</div><div>E. MORTAR (AT 28 DAYS): 1800 PSI MORTAR SHALL BE TYPE "S," CONFORMING TO CBC SECTION 2103.8.</div></div></div><div>3. HIGH LIFT GROUTED CONSTRUCTION SHALL CONFORM TO ACI 530/ASCE 5. SPECIAL INSPECTION SHALL BE PROVIDED FOR HIGH LIFT CONSTRUCTION.</div><div>4. BLOCK LAYUP: STACK BOND, CONCAVE COMPRESSED JOINTS AND INVERTED BOND BEAM UNITS FOR STARTING COURSES.</div><div>5. ALL HORIZONTAL REINFORCEMENT SHALL BE PLACED IN BOND BEAM OR LINTEL BEAM UNITS. ALL BOND BEAM BLOCK SHALL BE "DEEP CUT" UNITS.</div><div>6. GROUTING:<div><div>A. ALL CELLS SHALL BE SOLID GROUTED UNLESS NOTED OTHERWISE ON THE DRAWINGS.</div><div>B. ALL GROUT SHALL BE CONSOLIDATED WITH A MECHANICAL VIBRATOR AT THE TIME OF PLACEMENT AND THEN RECONSOLIDATED BEFORE PLASTICITY IS LOST.</div><div>C. WHEN GROUTING IS STOPPED FOR ONE HOUR OR LONGER, HORIZONTAL CONSTRUCTION JOINTS SHALL BE FORMED BY STOPPING THE GROUT POUR 1-1/2 INCHES BELOW TOP OF THE UPPERMOST UNIT.</div><div>D. POURS OVER 5 FEET: PROVIDE CLEANOUTS IN BOTTOM COURSE AT VERTICAL REINFORCEMENT (32 INCHES MAX). SPECIAL INSPECTION IS REQUIRED.</div><div>E. GROUT SHALL BE PLACED IN A CONTINUOUS POUR IN GROUT LIFTS NOT EXCEEDING 6 FEET.</div></div></div><div>7. REINFORCING STEEL SHALL BE GRADE 60 IN ACCORDANCE WITH ASTM A-615.</div><div>8. SECURE NEW MASONRY TO EXISTING MASONRY WITH MASONRY TIES SPACED AT 16 INCHES ON CENTER VERTICALLY AT ALL VERTICAL JOINTS</div><div>9. ANCHOR BOLTS MUST BE SET WITH TEMPLATES AND HELD IN PLACE PRIOR TO GROUTING. PROVIDE AT LEAST ONE INCH OF GROUT BETWEEN ANCHOR BOLT AND MASONRY.</div><div>10. FOUNDATIONS TO RECEIVE MASONRY WALLS: THE MASONRY CONTRACTOR SHALL FIELD VERIFY THE LOCATION OF ALL DOWELS PRIOR TO CONCRETE PLACEMENT.</div><div>11. SPLICES (LAPS): AS SPECIFIED IN DRAWINGS.</div><div>12. NO CONDUIT OVER ¾ INCH DIA. SHALL BE PLACED IN CMU WALLS WITHOUT ENGINEER'S APPROVAL.</div></div></div>	<div>REINFORCING STEEL</div> <div><div><div>1. ALL REINFORCING STEEL SHALL BE GRADE 60 IN ACCORDANCE WITH ASTM A-615</div><div>2. REINFORCING STEEL SHALL BE SPLICED AS DETAILED AND/OR NOTED. SPLICES AT OTHER LOCATIONS SHALL BE AS APPROVED BY ENGINEER</div><div>3. REINFORCING SPLICES IN WALLS, SLABS AND/OR FOOTINGS SHALL BE STAGGERED 4'-0" ON CENTER, AS A MINIMUM, UNLESS NOTED OTHERWISE</div><div>4. ALL REINFORCEMENT, ANCHOR BOLTS AND/OR OTHER INSERTS SHALL BE SECURED IN PLACE PRIOR TO PLACING OF CONCRETE AND/OR GROUT</div><div>5. ALL BENDING OF REINFORCING STEEL SHALL BE COLD BENDS</div><div>6. PROVIDE THE FOLLOWING MINIMUM CLEAR COVER OF CONCRETE OVER REINFORCING BARS:<div><div>A. CONCRETE CAST AGAINST AND PERMANENTLY EXPOSED TO EARTH 3 INCH</div><div>B. CONCRETE EXPOSED TO EARTH AND/OR WEATHER<div><div>1. #6 BAR THROUGH #18 BAR           2 INCH</div><div>2. # 5 BAR AND SMALLER           1-1/2 INCH</div></div></div></div></div><div>C. CONCRETE NOT EXPOSED TO WEATHER ON IN CONTACT WITH EARTH<div><div>1. SLABS, WALLS, AND/OR JOINT<div><div>a. #14 AND #18 BARS           1-1/2 INCH</div><div>b. #11 BAR AND SMALLER           3/4 INCH</div></div></div><div>2. BEAMS AND COLUMNS<div><div>a. PRIMARY REINFORCEMENT, TIES, STIRRUPS AND SPIRALS 1-1/2 INCH</div></div></div><div>3. SHELLS AND FOLDED PLATE MEMBERS<div><div>a. #6 BAR AND LARGER           3/4 INCH</div><div>b. #5 BAR AND SMALLER           1/2 INCH</div></div></div></div></div></div></div>	
<div>STRUCTURAL WOOD</div> <div><div>1. SHEATHINGS: PLYWOOD OR OSB AND SHALL BE APA RATED STRUCTURAL 1 SHEATHING EXPOSURE 1 WITH A MINIMUM SPAN RATING OF 32/16. ALL SHEATHING SHALL BEAR THE TRADEMARK STAMP "APA, THE ENGINEERED WOOD ASSOCIATION," AND SHALL CONFORM TO STANDARD PS-1 OR PS-2. THE MINIMUM SPECIFIC GRAVITY, G, SHALL BE 0.49 AND THE MOISTURE CONTENT SHALL NOT BE GREATER THAN 16% AT THE TIME OF INSTALLATION.<div><div>a. ROOF SHEATHING: MATCH EXISTING SHEATHING THICKNESS OR MINIMUM 19/32 INCH THICK OR AS SHOWN ON THE PLANS</div></div></div><div>2. INSTALL SHEATHINGS WITH LONG DIMENSION, OR STRENGTH AXIS OF EACH SHEET, ACROSS THREE OR MORE SUPPORTS (FACE GRAIN PERPENDICULAR TO THE SUPPORTS) AND STAGGER SHEET END JOINTS SO THAT ADJACENT END JOINTS DO NOT LAND ON A COMMON SUPPORT. MAINTAIN MINIMUM 1/8" GAP BETWEEN ALL SHEETS. MAINTAIN MINIMUM 3/8" MINIMUM EDGE DISTANCE FROM SHEET EDGES TO NAIL CENTERS.</div><div>3. MINIMUM SHEATHING NAILING REQUIREMENTS PER TABLE 2308.12.4 AND TABLE 2304.9.1 OF THE FLORIDA BUILDING CODE 2020, OR AS FOLLOWS: FASTEN ROOF SHEATHING TO ROOF FRAMING WITH 8D NAILS AT 6" O.C. AT EDGES AND 6" O.C. AT INTERMEDIATE FRAMING.</div><div>4. MOISTURE CONTENT OF WOOD AT TIME OF PLACING SHALL NOT EXCEED 19%.</div><div>5. OVER DRIVING OF NAILS THROUGH SHEARWALL, ROOF, OR FLOOR SHEATHING IS NOT ALLOWED. NAILS SHALL BE DRIVEN SO THAT THE HEADS ARE FLUSH WITH THE SURFACE OF SHEATHING.</div><div>6. MACHINE APPLIED NAILING: SUBJECT TO SATISFACTORY JOB SITE DEMONSTRATION FOR THIS PROJECT AND CONTINUED SATISFACTORY PERFORMANCE MAINTANING EDGE DISTANCES AND WITHOUT OVERDRIVING NAILS.</div><div>7. ANCHOR BOLTS, FASTENERS, NAILS, WOOD SCREWS, LAG SCREWS, BOLTS AND ALL OTHER CONNECTORS IN CONTACT WITH PRESERVATIVE TREATED OR FIRE-RETARDANT TREATED WOOD SHALL BE GALVANIZED IN ACCORDANCE WITH ASTM A-153, ASTM A-653 HOT DIPPED ZINC COATED GALVANIZED OR SHALL BE STAINLESS STEEL. FASTENERS OTHER THAN NAILS, WOOD SCREWS AND LAG SCREWS SHALL BE PERMITTED TO BE OF MECHANICALLY-DEPOSITED ZINC-COATED STEEL WITH COATING WEIGHTS IN ACCORDANCE WITH ASTM B695, CLASS 55 MINIMUM.</div><div>8. WHEN HARDWARE THAT REQUIRES 10d x 1 1/2" NAILS IS INSTALLED OVER SHEATHING, THE LENGTH OF NAILS USED SHALL BE INCREASED BY THE THICKNESS OF THE SHEATHING.</div></div>		

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PROJECT:

STRUCTURAL REPAIRS FOR  
SANIBEL ISLAND - LIGHTHOUSE  
BATHROOMS  
153 PERIWINKLE WAY  
SANIBEL, FL 33957

CLIENT:

SYNERGY NDS, INC.  
202 S PARK AVE, SUITE B  
WINTER PARK, FL 32789

SHEET TITLE:

STRUCTURAL NOTES

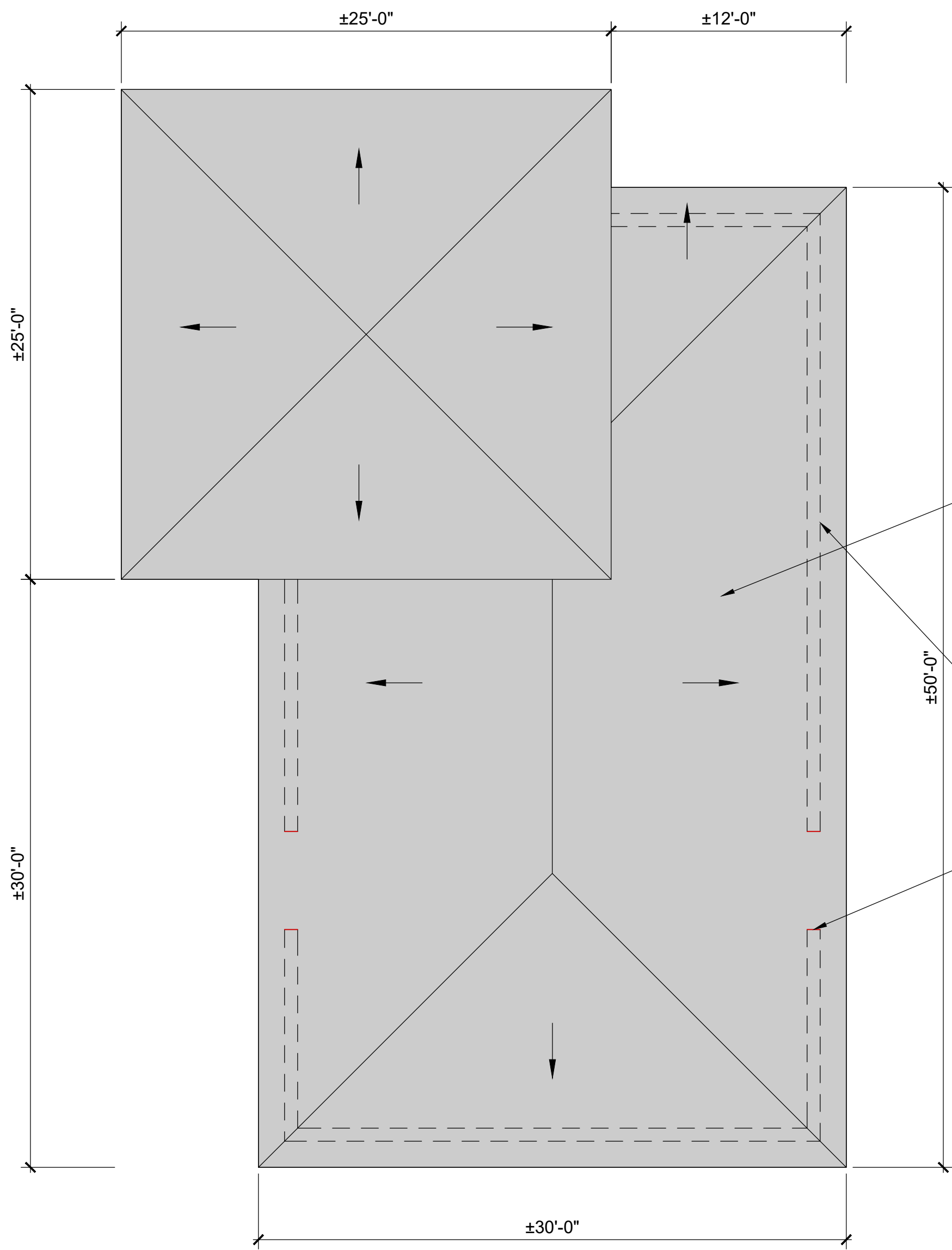
FOR CLIENT'S SOLE USE PER GOVERNING CONTRACT  
AND LIMITED TO APPLICABLE PROJECT. NO  
MODIFICATIONS OR REPRODUCTIONS WITHOUT  
WRITTEN APPROVAL OF RIMKUS. CONTRACTOR SOLELY  
RESPONSIBLE FOR VERIFYING ALL DIMENSIONS.

PROJECT NO:	100219117
DATE (Y-M-D):	2023-06-28
SCALE:	AS NOTED
DESIGNED BY:	MW
DRAWN BY:	RIMKUS
CHECKED BY:	JHS

DRAWING NO:

S001

SHEET NO: 2 OF 5



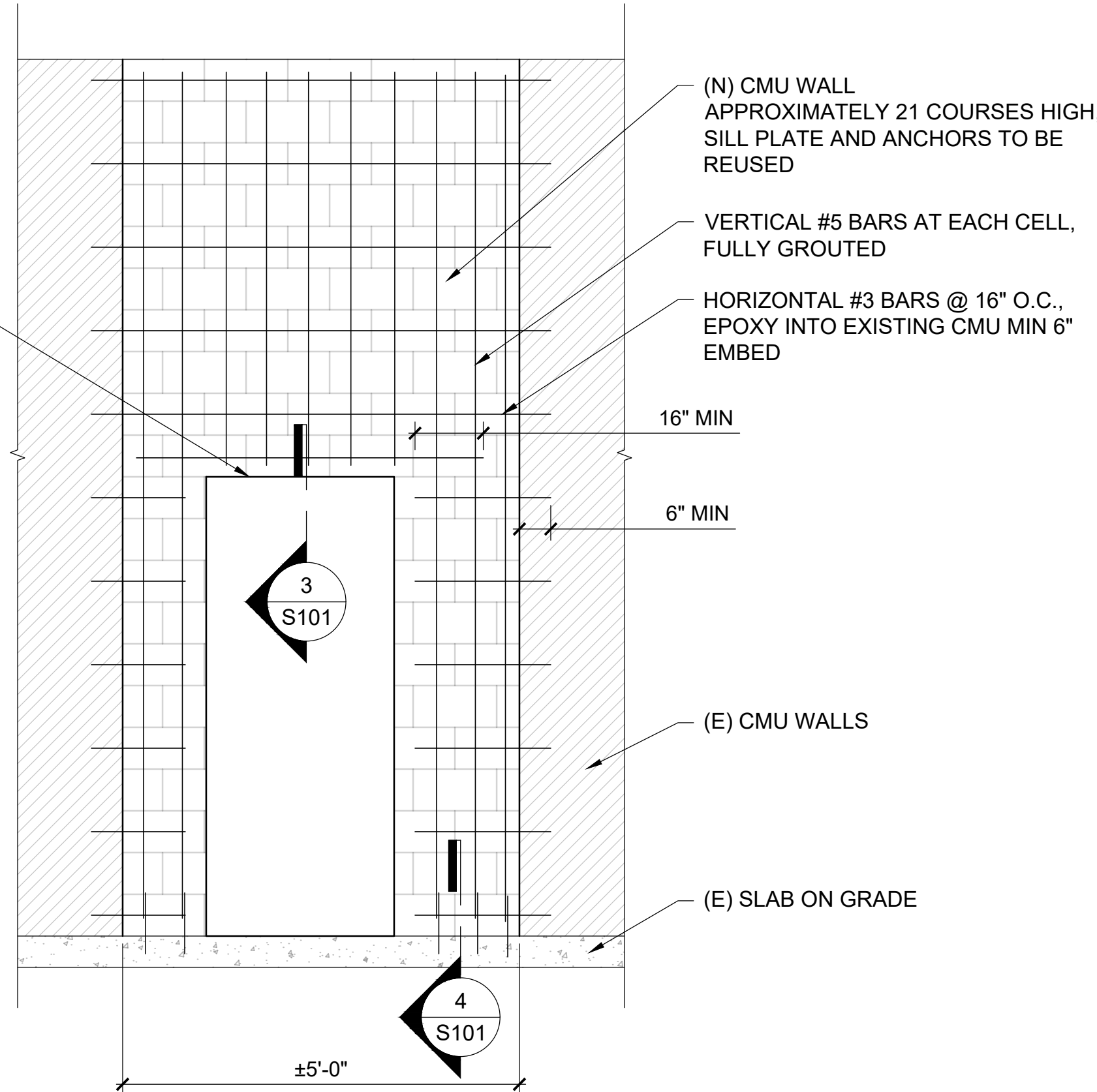
**1 ROOF PLAN**  
SCALE: 3/16"=1'-0"

STANDING SEAM METAL ROOF AT BOTH LEVELS TO BE REMOVED AND REPLACED. CONDITIONS OF UNDERLYING STRUCTURAL ROOF FRAMING TO BE VERIFIED UPON REMOVAL OF ROOF SHEATHING, AND EOR TO BE CONTACTED IF ANY ADDITIONAL DAMAGE IS FOUND.

WALLS BELOW

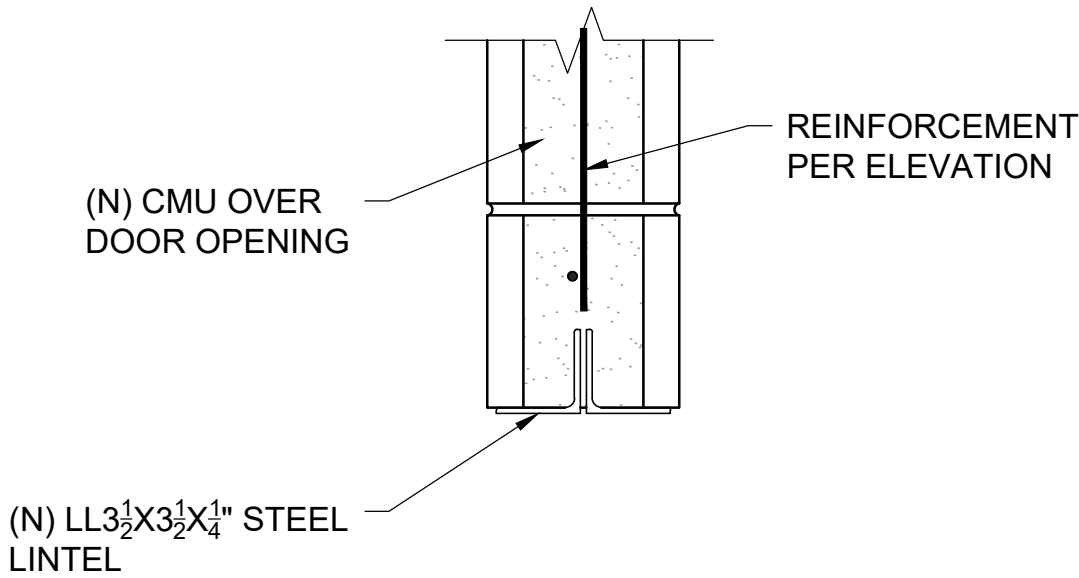
REPAIR CMU WALL DOOR OPENINGS BELOW, SEE ELEV. 2/S101

(N) DOOR OPENING W/ LL3½X3½X¼" STEEL LINTEL W/ MIN 8" BEARING AT EACH END

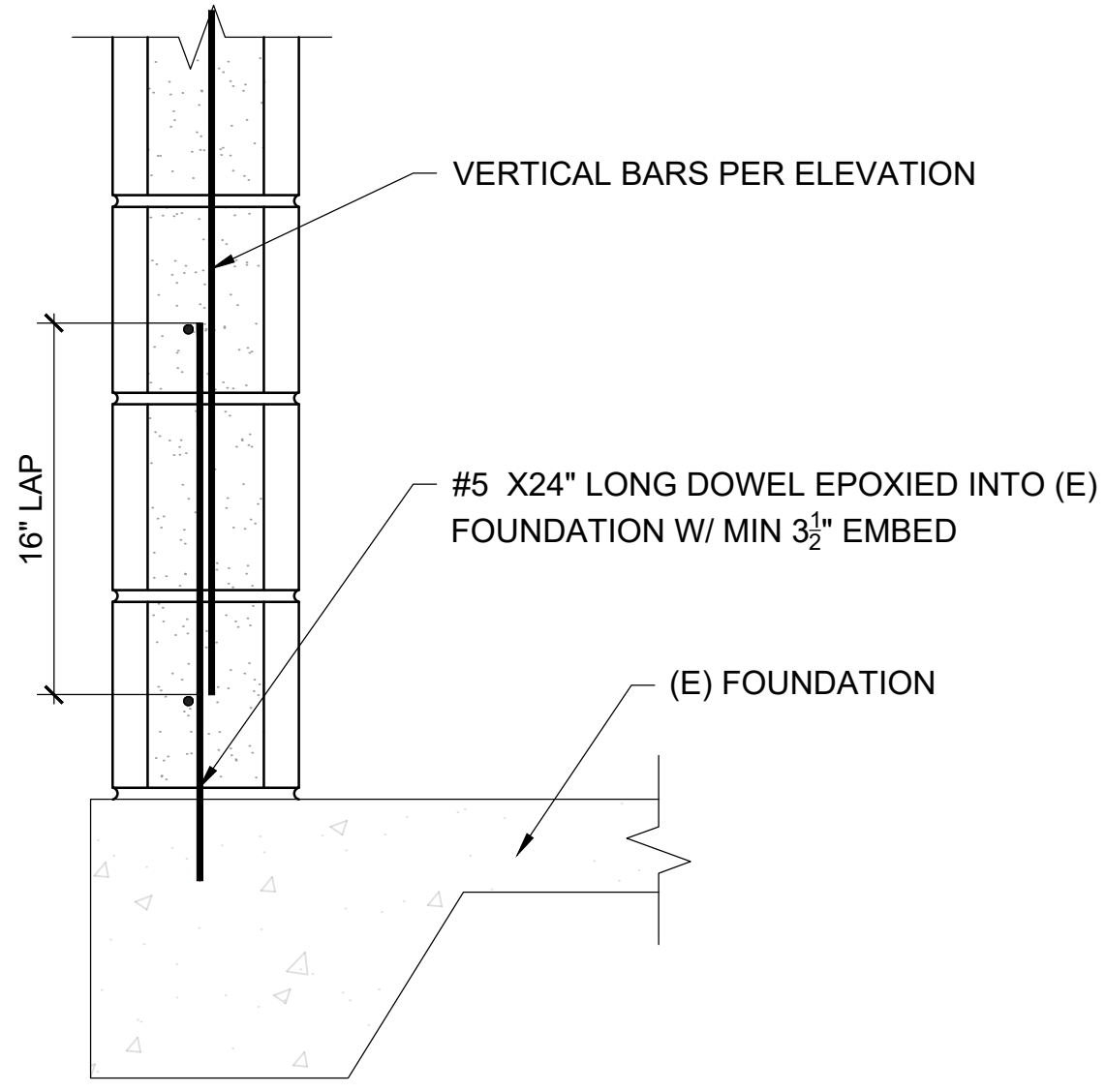


**2 CMU DOOR OPENING ELEVATION**  
SCALE: 1/2"=1'-0"

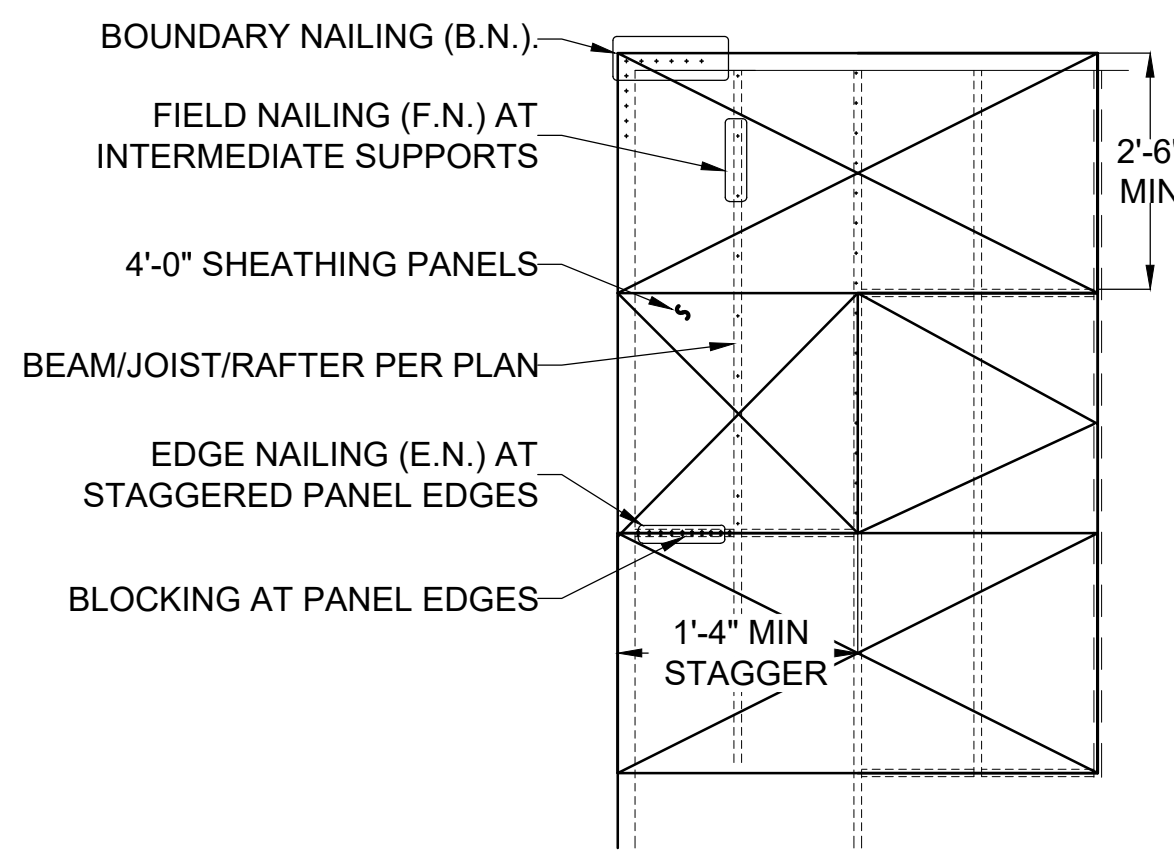
NOTE:  
1. 6" EPOXY EMBED TIE TO BE USED FOR ALL CONENCTIONS BETWEEN NEW CMU WALLS AND EXISTING



**3 LINTEL SECTION**  
SCALE: 1 1/2"=1'-0"



**4 FOUNDATION CONNECTION**  
SCALE: 1 1/2"=1'-0"



ROOF SHEATHING NAILING SCHEDULE							
MARK	NAILS	B.N	E.N.	F.N.	MIN FRAMING SIZE	BLOCKED	CAPACITY (PLF)
	10d	6"	6"	12"	2X	NO	215

- NOTES
1. MINIMUM NAIL EDGE DISTANCE = 3/8" TO EDGE OF SHEET OR FRAMING
  2. ALL NAILS SHALL BE COMMON WIRE
  3. BLOCKING WIDTH SHALL MEET MIN FRAMING SIZE REQUIREMENTS. BLOCKING SHALL BE 4X NOMINAL IN DEPTH. PLACE BLOCK IN 'Z CLIPS'
  4. ONE 'PSCL' SHEATHING CLIP SHALL BE USED MIDWAY BETWEEN EACH SUPPORT AT UNBLOCKED SHEATHING EDGES
  5. MINIMUM FRAMING SIZE SHALL BE USED FOR ALL MEMBERS
  6. SHEATHING SHALL BE STRUCTURAL-1, 5/8" MATERIAL THICK
  7. MINIMUM NAIL EMBEDMENT INTO JOIST OR BLOCKING= 1 5/8"

**5 SHEATHING SCHEDULE**  
SCALE: N.T.S.

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SEAL:  
JOHN HAROLD STEWART  
LICENSE  
No. 42970  
STATE OF FLORIDA  
PROFESSIONAL ENGINEER

NO.	ISSUED FOR:	DATE (Y-M-D):
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PROJECT:  
**STRUCTURAL REPAIRS FOR  
SANIBEL ISLAND - LIGHTHOUSE  
BATHROOMS**  
153 PERIWINKLE WAY  
SANIBEL, FL 33957

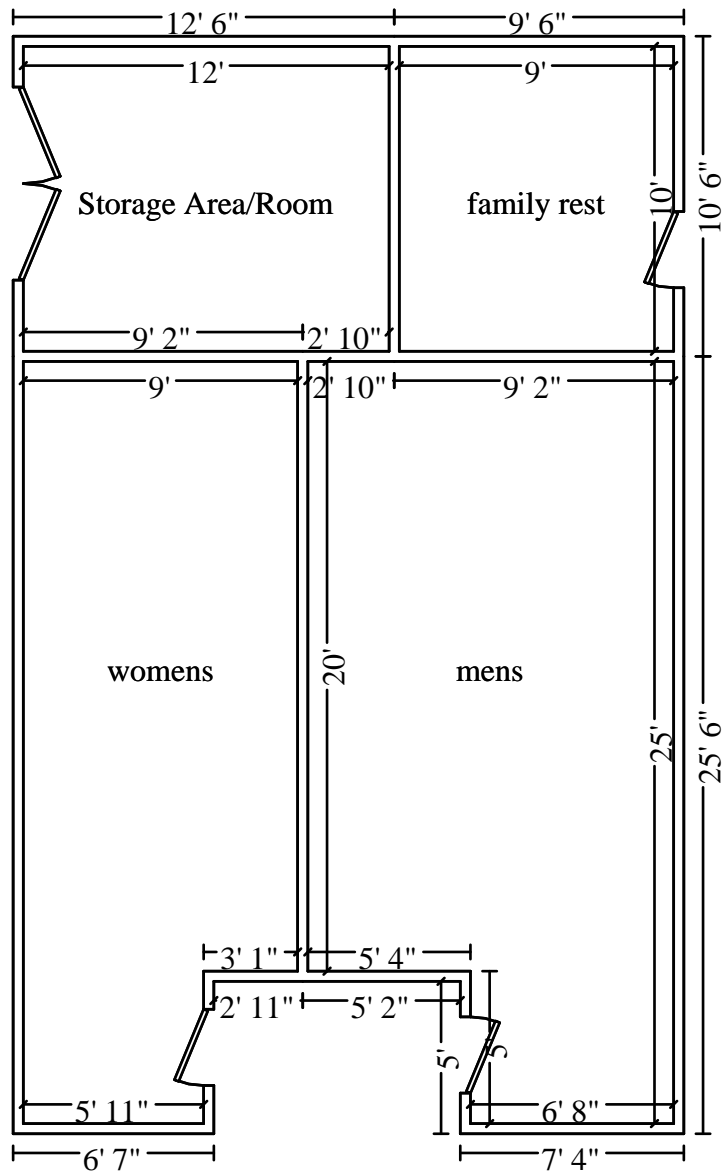
CLIENT:  
**SYNERGY NDS, INC.**  
202 S PARK AVE, SUITE B  
WINTER PARK, FL 32789

SHEET TITLE:  
**ROOF PLAN, ELEVATIONS,  
& DETAILS**

FOR CLIENT'S SOLE USE PER GOVERNING CONTRACT  
AND LIMITED TO APPLICABLE PROJECT. NO  
MODIFICATIONS OR REPRODUCTIONS WITHOUT  
WRITTEN APPROVAL OF RIMKUS. CONTRACTOR SOLELY  
RESPONSIBLE FOR VERIFYING ALL DIMENSIONS.

PROJECT NO:	100219117
DATE (Y-M-D):	2023-06-28
SCALE:	AS NOTED
DESIGNED BY:	MW
DRAWN BY:	RIMKUS
CHECKED BY:	JHS

DRAWING NO:  
**S101**  
SHEET NO: 3 OF 5



Main Level