

VARIANCE FEES

MGO \$50.00
 COMM \$490.00
 Priority - Double above

Amount Paid

490 7/2/15 fmR

PETITION FOR VARIANCE APPLICATION

CITY OF MADISON
Building Inspection
Division

215 Martin Luther King Jr. Blvd.
 Madison, WI 53703
 (608) 266-4568

Name of Owner Peter Andreakos	Project Description A toilet room to be added in the basement level and the back staircase enclosed to provide a storage room on the first floor .	Agent, architect, or engineering firm Destree Design Architects
Company (if applies) Eyeopia		No. & Street 222 W. Washington Ave Suite #310
No. & Street 2134 Atwood Ave	Tenant name (if any) Eyeopia	City, State, Zip Code Madison, WI 53703
City, State, Zip Code Madison, WI 53704	Building Address 1719 Monroe St	Phone 608.268.1499
Phone 608.316.7999		Name of Contact Person Jeremy Cynkar
e-mail drpeter@eyeopia.com		e-mail jeremy@destreearchitects.com

1. The rule being petitioned reads as follows: (Cite the specific rule number and language. Also, indicate the nonconforming conditions for your project.)
IBC 1208.2 - Occupiable spaces, habitable spaces and corridors shall have a ceiling height of not less than 7'-6". The ceiling in the basement is 6'-11" in most of the space with a few areas at 6'-4".
2. The rule being petitioned cannot be entirely satisfied because:
This is an existing condition.
3. The following alternatives and supporting information are proposed as a means of providing an equivalent degree of health, safety, and welfare as addressed by the rule:
This existing condition has previously been approved for a variance exception when it was requested by the previous tenant.
The low ceiling height will be posted to indicate the low ceiling.
This area will not be as a sales area and will only be used by the staff familiar with the condition of the space.
A new exit door and stair to be added out the back so that 2 exits will be maintained even after removal of the one interior stair.

JOSEPH HANKES
 Notary Public
 State of Wisconsin

Note: Please attach any pictures, plans, or required position statements.

VERIFICATION BY OWNER – PETITION IS VALID ONLY IF NOTARIZED AND ACCOMPANIED BY A REVIEW FEE AND ANY REQUIRED POSITION STATEMENTS.

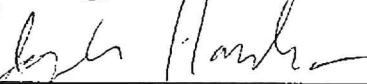
Note: Petitioner must be the owner of the building. Tenants, agents, contractors, attorneys, etc. may not sign the petition unless a Power of Attorney is submitted with the Petition for Variance Application.

Peter Andreakos

Print name of owner

being duly sworn, I state as petitioner that I have read the foregoing

petition, that I believe it to be true, and I have significant ownership rights in the subject building or project.

Signature of owner 	Subscribed and sworn to before me this date: 02/26/2015
Notary public 	My commission expires: December 22, 2018

NOTE: ONLY VARIANCES FOR COMMERCIAL CODES ARE REQUIRED TO BE NOTARIZED.

City of Madison Fire Department Position Statement

Owner: Peter Andreakos - Eyeopia	Project Name: Eyeopia Bathroom addition in basement	Contact: Jeremy Cynkar - Destree Design Architects
Address: 2134 Atwood Ave Madison, WI 53704	Building Location: 1719 Monroe Street	Address: 222 W Washington Ave Suite 310 Madison, WI 53703
Owner Phone: 608-316-7999 Email: drpeter@eyeopia.com	Building Occupancy or Use: Merchantile	Phone: 608-268-1499 Email: jeremy@destreearchitects.com

Rule Being Petitioned: IBC 1208.2 Minimum Ceiling Height

I have read the application for variance and recommend: (check appropriate box)

Approval Conditional Approval Denial No Comment

- This is an existing occupied space. The basement is office and storage space accessed by employees only.
- Scope of work is to add a single bathroom in the basement.
- A new direct exterior exit from the basement is being provided to replace an unenclosed existing stair.

Name of Fire Chief or Designee (type or print)

Bill Sullivan, Fire Protection Engineer

Telephone Number
608-261-9658

City of Madison Fire Department

Signature of Fire Chief or Designee

Date Signed
June 4, 2015

