

ADDENDUM #1

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**Broward County Housing Authority  
Solicitation Number: RFP 20-288**

**JANITORIAL SERVICES AT GRIFFIN GARDENS  
APARTMENTS, HIGHLANDS GARDENS APARTMENTS, AND  
HEADWAY CORPORATE OFFICES**

DATE: August 25, 2020

**TO ALL PROSPECTIVE PROPOSERS**

There is no change in the proposal due date.

**PLEASE NOTE THE FOLLOWING CHANGE/CLARIFICATIONS:**

**QUESTIONS/CLARIFICATIONS:**

Fee Information – Exhibit E has been revised, please use the attached revised exhibit when submitting your proposal.

Exhibit N, which begins on page 10, includes the floor plans for each building and has been added to the solicitation.

Page 29 notation regarding exhibit has been changed as follows:

“PLEASE SEE EXHIBITS A, B, E G, H, J, K, L, M and N”

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This Addendum Form should be returned with your Bid on the established due date.

All other terms, conditions and specifications remain unchanged for RFP 20-288.

NAME OF COMPANY:

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**BROWARD COUNTY HOUSING AUTHORITY  
SOLICITATION NUMBER RFP 15-214  
REQUEST FOR PROPOSAL  
JANITORIAL SERVICES AT GRIFFIN GARDENS, HIGHLAND GARDENS AND HEADWAY OFFICES**

**FEE INFORMATION – EXHIBIT E - GRIFFIN GARDENS**

A. Instructions: Please indicate the total bid price for the scope of work detailed below:

Item No.	Specifications	Frequency	Weekday or Date	Month or Date
1	<b>Sweep and mop the following areas:</b>			
	Kitchen area	2 x week	Tue / Thurs	All
	Laundry Room	5 x week	M/T/W/T/F	All
	Hallways – All levels (4 Floors) – floors swept to remove dust and dirt; mop water should be changed each floor.	5 x week	M/T/W/T/F	All
	Wellness Center	2 x week	M/W	All
	Exercise Room	5 x week	M/T/W/T/F	All
	Entrance, Lobby area	5 x week	M/T/W/T/F	All
	General Office areas	5 x week	M/T/W/T/F	All
	Community Room	5 x week	M/T/W/T/F	All
	Computer Center	5 x week	M/T/W/T/F	All
	Stairwells (All)	2 x month	Wednesday	1 <sup>st</sup> and 3 <sup>rd</sup> Wednesday each month
	<b>Clean the tile grout in the following areas: lobby, community room, laundry room and bathrooms</b>	<b>Quarterly</b>		
	The 1 <sup>st</sup> , 2 <sup>nd</sup> 3 <sup>rd</sup> and 4 <sup>th</sup> floor hallways	Quarter 1	Quarterly	January
	The 1 <sup>st</sup> , 2 <sup>nd</sup> 3 <sup>rd</sup> and 4 <sup>th</sup> floor hallways	Quarter 2	Quarterly	April
	The 1 <sup>st</sup> , 2 <sup>nd</sup> 3 <sup>rd</sup> and 4 <sup>th</sup> floor hallways	Quarter 3	Quarterly	July
	The 1 <sup>st</sup> , 2 <sup>nd</sup> 3 <sup>rd</sup> and 4 <sup>th</sup> floor hallways	Quarter 4	Quarterly	October

Item	Specifications	Frequency	Weekday or Date	Month or Date
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No.				
2	<b>Sweep and mop with germicidal disinfectant all tile and concrete floors</b>			
	Trash Room areas (chute room)	5 x week	M/T/W/T/F	All
	Elevators (2)	5 x week	M/T/W/T/F	All
	Restrooms (2)	5 x week	M/T/W/T/F	All
	Clean, disinfect and shine chute doors	5 x week	M/T/W/T/F	All
3	Strip and seal all tiled floors listed in Items 1 and 2: (see details above)	4 x year	Piecemeal approach	Last /Friday of Jan/Apr/Jul/Oct
4	Empty all waste receptacles, deposit in outside / container dumpster	5 x week	M/T/W/T/F	All
5	Clean drinking fountains with approved cleaner	5 x week	M/T/W/T/F	All
6	Clean kitchen/community room countertops/table with approved cleaner	3 x week	M/W/F	All
7	Clean all furniture on all levels with approved cleaner: table tops, table bottoms and chairs	2 x month	N/A	1 <sup>st</sup> Tuesday and 3 <sup>rd</sup> Tuesday of each month
8	Clean door trims, light switches and kick-plates in office, community and computer rooms. Wipe down, clean and shine elevator walls and stainless-steel door panels with approved cleaner, clean and shine chute doors on all floors. Wipe and disinfect hallway and stairway doors with approved cleaner.	3 x week	M/W/F	All
9	Clean glass doors and glass partitions	5 x week	M/T/W/T/F	All
10	Wipe all doors: all exit doors, all 1 <sup>st</sup> floor office doors, common area doors, community room, trash rooms and hallway doors	2 x week	Tues/Thurs	All
11	Dust all high ledges including picture frames, light fixtures and window sills	1 x month	N/A	1 <sup>st</sup> Tuesday each month
12	Dust all ceiling vents and returns	2 x month	N/A	1 <sup>st</sup> and 3 <sup>rd</sup> week each month
13	Dust all ceiling fans; dust and wash vertical Venetian blinds	1 x month	N/A	Monthly
14	Dust and vacuum behind all laundry room machines	3 x month	N/A	All
15	Dust office furniture/Copier	1 x week	Monday	Weekly
Item No.	Specifications	Frequency	Weekday or Date	Month or Date

16	Clean and disinfect all wash basins, toilet bowls, urinals with a germicidal cleaner. Place disinfectant urinal block in each urinal as needed.	5 x week	M/T/W/T/F	All
17	Fill toilet paper and paper towel receptacles and soap dispensers	5 x week	M/T/W/T/F	All
18	Clean all mirrors	2 x week	Tues/Thurs	All
19	Wash and disinfect restroom walls with a germicidal disinfectant / cleaner	1 x week	N/A	All
20	Wash and disinfect hand rails	3 x week	M/W/F	All
21	Wash and disinfect screens	1 x week	Monthly	All
22	Clean and disinfect floor area inside of dumpster storage room with pine sol or equivalent type of disinfectant	2 x week	M/F	All
23	Pressure clean trash room floors	4 x year	quarterly	Jan/Apr/Jul/Oct
24	Clean all glass panels on doors at wall area, lobby, computer, exercise and community rooms.	2 x week	Mon/Wed	All
25	Pressure wash front and back entrance ways	1 x month	M	1 <sup>st</sup> Monday of each
26	Sanitize all common area knobs, buttons, etc.	5 x week	M/T/W/T/F	All
	<b>Emergency Cleaning Service:</b> (per item 5.4. page 8) Not to Exceed (NTE) \$1,000.00 Total per Year	Each Occurrence	\$ _____ <b>Cost Per Hour</b>	<u>NTE / \$1,000.00 / Per Year</u>

**Total Cost: \$ \_\_\_\_\_ / Per Month      \$ \_\_\_\_\_ / Per Year      \$ \_\_\_\_\_ / Two Years**

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The undersigned certifies that he/she has the ability to sign and bind the firm or company to the services to be performed within the fees proposed.

Signature	
Title	
Date Signed	
Printed Name	
Firm or Company	



**BROWARD COUNTY HOUSING AUTHORITY**  
**SOLICITATION NUMBER RFP-15-214**  
**REQUEST FOR PROPOSAL**  
**JANITORIAL SERVICES AT GRIFFIN GARDENS, HIGHLAND GARDENS AND HEADWAY OFFICES**

FEE INFORMATION – EXHIBIT E- **HIGHLAND GARDENS**

A. Instructions: Please indicate the total bid price for the scope of work detailed below:

Item No.	Specifications	Frequency	Weekday or Date	Month or Date
1	<b>Sweep and mop the following areas:</b>			
	Kitchen area	2 x week	Tue / Thurs	All
	Laundry Room	5 x week	M/T/W/T/F	All
	Hallways – All levels (3 Floors) – floors swept to remove dust and dirt; mop water should be changed per hallway and corridor areas.	5 x week	M/T/W/T/F	All
	Wellness Center	2 x week	M/W	All
	Clean Exercise equipment in Community Room	5 x week	M/T/W/T/F	All
	Entrance, Lobby area	5 x week	M/T/W/T/F	All
	General Office areas	5 x week	M/T/W/T/F	All
	Community Room	5 x week	M/T/W/T/F	All
	Computer Center	5 x week	M/T/W/T/F	All
	All Stairwells	2 x month	Wednesday	1 <sup>st</sup> and 3 <sup>rd</sup> Wednesday each month
	<b>Clean the tile grout in the following areas: lobby, community room, laundry room and bathrooms</b>	<b>Quarterly</b>		
	The 1 <sup>st</sup> , 2 <sup>nd</sup> and 3 <sup>rd</sup> floor hallways	Quarter	Quarterly	January
	The 1 <sup>st</sup> , 2 <sup>nd</sup> and 3 <sup>rd</sup> floor hallways	Quarter	Quarterly	May
	The 1 <sup>st</sup> , 2 <sup>nd</sup> and 3 <sup>rd</sup> floor hallways	Quarter	Quarterly	September
Item No.	Specifications	Frequency	Weekday or Date	Month or Date

2	<b>Sweep and mop with germicidal disinfectant all tile and concrete floors</b>			
	Trash Room areas (chute room)	5 x week	M/T/W/T/F	All
	Elevators (2)	5 x week	M/T/W/T/F	All
	Restrooms (2)	5 x week	M/T/W/T/F	All
	Clean, disinfect and shine chute doors	5 x week	M/T/W/T/F	All
3	Strip and seal all tiled floors listed in Items 1 and 2: (see details above)- Highland Gardens has 9 wings and 3 floors	4 x year	Piecemeal approach	Last /Friday of Jan/Apr/Jul/Oct
4	Empty all waste receptacles, deposit in outside / container dumpster	5 x week	M/T/W/T/F	All
5	Clean drinking fountains with approved cleaner	5 x week	M/T/W/T/F	All
6	Clean kitchen/community room countertops/table with approved cleaner	3 x week	M/W/F	All
7	Clean all furniture on all levels with approved cleaner: table tops, table bottoms and chairs	2 x month	N/A	1 <sup>st</sup> Tuesday and 3 <sup>rd</sup> Tuesday of each month
8	Clean door trims, light switches and kick-plates in office, community and computer rooms. Wipe down, clean and shine elevator walls and stainless-steel door panels with approved cleaner, clean and shine chute doors on all floors. Wipe and disinfect hallway and stairway doors with approved cleaner.	3 x week	M/W/F	All
9	Clean glass doors and glass partitions	5 x week	M/T/W/T/F	all
10	Wipe all doors: all exit doors, all 1 <sup>st</sup> floor office doors, common area doors, community room, trash rooms and hallway doors	2 x week	Tues/Thurs	All
11	Dust all high ledges including picture frames, light fixtures and window sills	2 x month	N/A	1 <sup>st</sup> and 3 <sup>rd</sup> week each month
12	Dust all ceiling vents and returns	2 x month		1 <sup>st</sup> and 3 <sup>rd</sup> week each month
13	Dust and wash vertical Venetian blinds	1 x month	N/A	Monthly
14	Dust and vacuum behind all laundry room machines	3 x month	N/A	All
15	Dust Office furniture/Copier	1 x week	Monday	Weekly
<b>Item No.</b>	<b>Specifications</b>	<b>Frequency</b>	<b>Weekday or Date</b>	<b>Month or Date</b>

16	Clean and disinfect all wash basins, toilet bowls, urinals with a germicidal cleaner. Place disinfectant urinal block in each urinal as needed	5 x week	M/T/W/T/F	All
17	Fill toilet paper and paper towel receptacles and soap dispensers	5 x week	M/T/W/T/F	All
18	Clean all mirrors	2 x week	Tues/Thurs	All
19	Wash and disinfect restroom walls with a germicidal disinfectant / cleaner	1 x week	N/A	All
20	Wash and disinfect hand rails	3 x week	M/W/F	All
21	Wash and disinfect screens	1 x week	N/A	All
22	Clean and disinfect floor area inside of dumpster storage room with pine sol or equivalent type of disinfectant	2 x week	M/F	All
23	Pressure clean trash room floors	4 x year	Quarterly	Jan/Apr/Jul/Oct
24	Clean all glass panels on doors at wall area, lobby, computer, exercise and community rooms. Wipe mailboxes with disinfectant or approved cleaner	2 x week	Mon/Wed	All
25	Pressure wash front and back entrance ways	1 x month	Monday	1 <sup>st</sup> Monday each month
26	Sanitize all common area knobs, buttons, etc.	5 x week	M/T/W/T/F	All
	<b>Emergency Cleaning Service:</b> (per item 5.4. page 8) Not to Exceed (NTE) \$1,000.00 Total per Year	Each Occurrence	\$ _____ <b>Cost Per Hour</b>	<u>NTE / \$1,000.00 / Per Year</u>

**Total Cost: \$ \_\_\_\_\_ / Per Month**

**\$ \_\_\_\_\_ / Per Year**

**\$ \_\_\_\_\_ / Two Years**

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The undersigned certifies that he/she has the ability to sign and bind the firm or company to the services to be performed within the fees proposed.

Signature	
Title	
Date Signed	
Printed Name	
Firm or Company	

**BROWARD COUNTY HOUSING AUTHORITY  
SOLICITATION NUMBER RFP 20-288  
REQUEST FOR PROPOSAL**

**JANITORIAL SERVICES AT GRIFFIN GARDENS APARTMENTS, HIGHLAND GARDENS APARTMENTS AND  
HEADWAY CORPORATE OFFICES**

FEE INFORMATION – EXHIBIT E – <b><u>HEADWAY CORPORATE OFFICES</u></b>
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A. Instructions: Please indicate the total bid price for the scope of work detailed below:

Item No.	Specifications	Frequency	Weekday or Date	Month or Date
1	Empty all waste receptacles, clean and re-line (as needed)	5 x week	M/T/W/T/F	All
2	Note: Only those items that are in the wastebaskets or are marked as trash are to be disposed of	5 x week	M/T/W/T/F	All
3	Remove rubber bands, paper clips, staples and any other debris from hallway floors, stairways, elevator floors, lobby floors, kitchen/lunchrooms floors, meeting rooms and copy rooms	5 x week	M/T/W/T/F	All
4	Vacuum all carpeted spaces thoroughly (common areas)	5 x week	M/T/W/T/F	All
5	Vacuum private offices thoroughly	1 x week	Friday	All
6	Vacuum all floor mats	5 x week	M/T/W/T/F	All
7	<b>Sweep, mop, and clean the following areas:</b>	5 x week	M/T/W/T/F	All
7A	Kitchens (3) in building	5 x week	M/T/W/T/F	All
7B	Hallways – both floors	5 x week	M/T/W/T/F	All
7C	Lobby	5 x week	M/T/W/T/F	All
7D	Elevator	5 x week	M/T/W/T/F	All
7E	Copy Rooms (3)	5 x week	M/T/W/T/F	All
7F	Mailroom	5 x week	M/T/W/T/F	All
7G	Stairwells (North and South)	5 x week	M/T/W/T/F	All

7H	Restrooms (4) – (apply germicidal disinfectant where appropriate) – thoroughly clean, wash, and sanitize toilets, urinals, sinks, faucets, partitions, and mirrors, fill toilet paper and paper towel receptacles, soap dispensers and seat covers	5 x week	M/T/W/T/F	All
7I	Elevators – (apply germicidal disinfectant where appropriate)	5 x week	M/T/W/T/F	All
8	Strip seal and wax all linoleum floors with non-slip wax and buff	4 x year	Friday	Last Friday of Jan/Apr/Jul/Oct
9	Strip seal and wax all tile floors with non-slip wax and buff	4 x year	Friday	Last Friday of Jan/Apr/Jul/Oct
10	Clean drinking fountains (2) with an approved cleaner	5 x week	M/T/W/T/F	All
11	Clean with approved cleaner, kitchen (3) countertops, cabinets, table tops, chairs, coffee pots, microwaves inside and out, refrigerators outside only.	2 x week	T/Th	Tuesday/Thursday
12	Clean lobby chairs with approved cleaner	2 x week	T/Th	Tuesday/Thursday
13	Clean door trims, light switches and kick-plates throughout building	1 x week	Friday	Friday
14	Wipe down, clean and shine elevator walls and stainless-steel door panels with approved cleaner	1 x week	Friday	Friday
15	Clean all hallway doors, stairwell doors and office doors	1 x month	Monday	1 <sup>st</sup> Monday of each month
16	Clean inside and outside lobby glass doors, receptionist glass window and lobby interior door windows	5 x week	M/T/W/T/F	All
17	Dust top of cabinets, conference tables, work tables, picture frames, light fixtures and window sills	1 x month	Tuesday	1 <sup>st</sup> Tuesday of each month
18	Dust and clean ceiling vents, wall vents and a/c vents	1 x month	Tuesday	1 <sup>st</sup> Tuesday of each month
19	Dust vertical venetian blinds	4 x year	Monday	Last Friday of Jan/Apr/Jul/Oct
20	Wash vertical venetian blinds	1 x year	Monday	1 <sup>st</sup> Monday in April
21	Wash and disinfect hand rails in stairwells	5 x week	M/T/W/T/F	All
22	Remove all noticeable finger marks or spots on doors and walls	2 x week	M/F	Monday/Friday
23	Remove cobwebs throughout the building	1 x month	Monday	1 <sup>st</sup> Monday of each month
24	Empty and re-line garbage (daily) and re-cycling containers in all kitchens	5 x week	M/T/W/T/F	All
25	Empty and clean ashtrays in exterior trash receptacles	5 x week	M/T/W/T/F	All
26	Empty and re-line all exterior trash receptacles	5 x week	M/T/W/T/F	All
27	Haul garbage and recycling to designated dumpsters	5 x week	M/T/W/T/F	All
28	Open florescent ceiling lights to remove dead bugs; dust and clean	2 x year	Friday	1 <sup>st</sup> Friday of Jan/Jul
29	Turn off lights throughout building when done cleaning each area	5 x week	M/T/W/T/F	All

30	Descalc water fountains, toilet bowls and urinals	1 x month	Friday	1 <sup>st</sup> Friday of each month
31	Arm security system	5 x week	M/T/W/T/F	All
32	Sanitize all common area flat surfaces, knobs, buttons, in/out elevator, etc.	5 x week	M/T/W/T/F	All
33	<b>Emergency Cleaning Service:</b> (per item 5.4. page 8) Not to Exceed (NTE) \$1,000.00 Total per Year	Each Occurrence	\$ _____ <b>Cost Per Hour</b>	<u>NTE / \$1,000.00</u> / Per Year

**Total Cost:**     \$ \_\_\_\_\_ / **Per Year**                      \$ \_\_\_\_\_ / **Two Years**

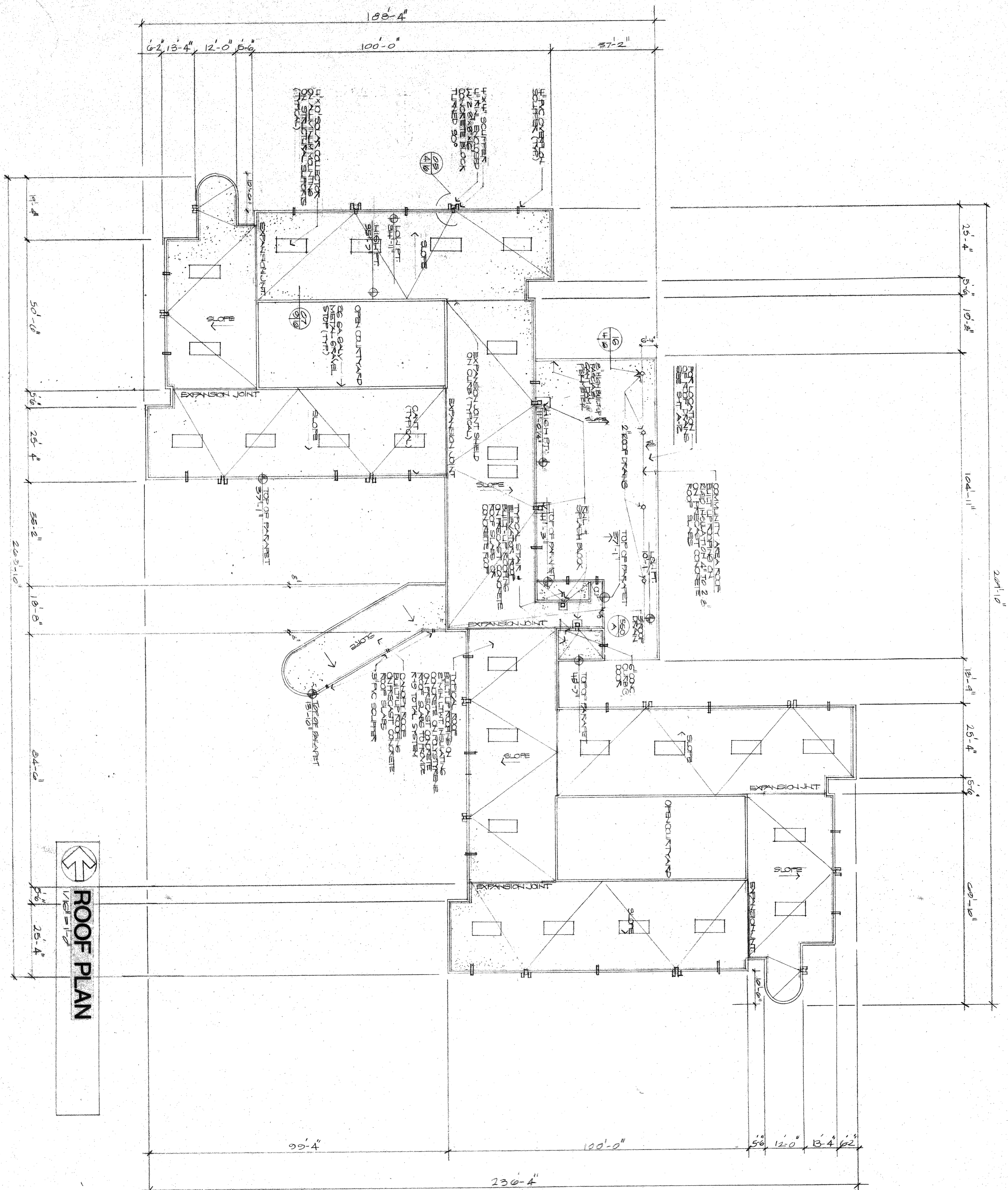
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The undersigned certifies that he/she has the ability to sign and bind the firm or company to the services to be performed within the fees proposed.

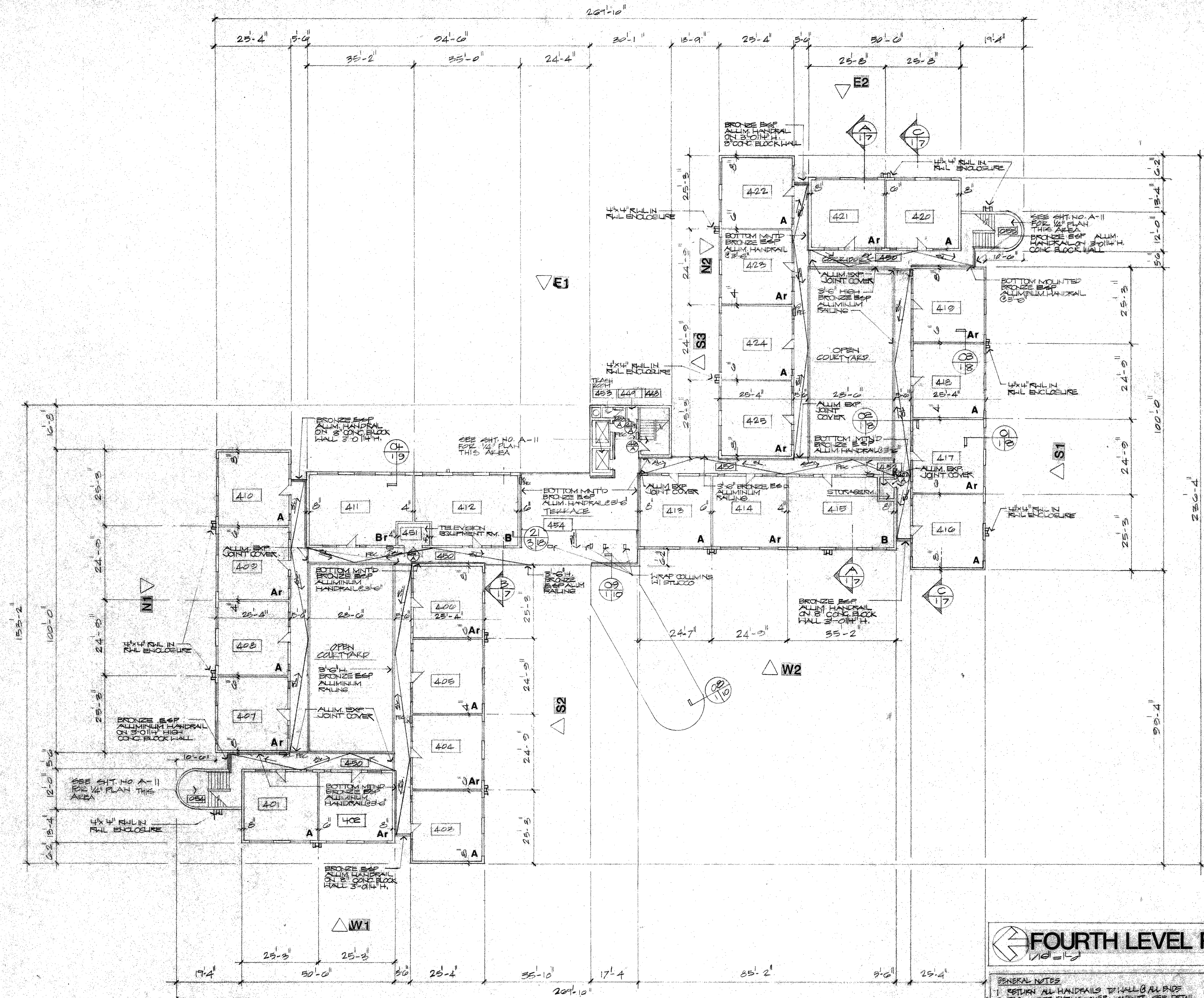
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EXHIBIT N



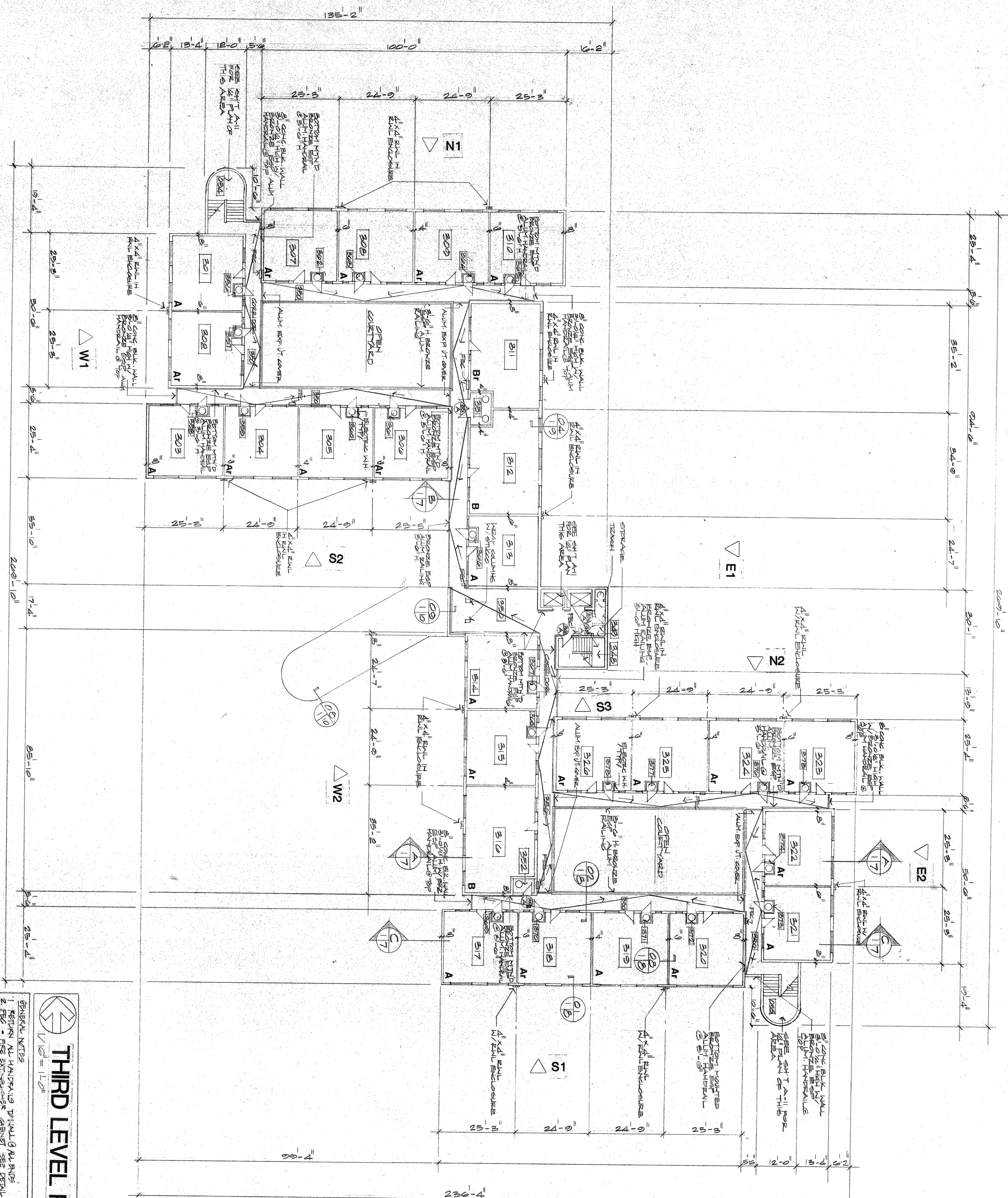




## FOURTH LEVEL PLAN

- GENERAL NOTES**
1. RETURN ALL HANDRAILS TO WALL @ ALL ENDS
  2. F.E.D. - FIRE EXTINGUISHER CABINET SEE DETAIL SHEET
  3. F.R.C. - FIRE RATED WALL FIRE EXTINGUISHER CABINET WRAP REAR OF CABINET W/ 2 LAYER 3/8\"/>





# THIRD LEVEL PLAN

[illegible]

**Michael A. Shiff and Associates, Incorporated** / 1061 W. Oakland Park Blvd. / Suite 2-C / Oakland Park, Fla. 33311 / (305) 563-1000 / **Architecture / Land Planning / Municipal Planning**

HOUSING FOR THE ELDERLY  
Project FL-79-6

I hereby certify that this plan, specification, or report was prepared by me or under my direct supervision and that I am a duly Registered ARCHITECT under the laws of the State of FLORIDA.

Date 2 JAN 81 Reg. No. 5331

ISSUED FOR BIDDING	DATE
DATE	

## REVISIONS

All ideas, designs, arrangements, plans, and specifications indicated or represented by this drawing and owned by and the property of Michael A. Shiff and Associates Incorporated, were created, evolved and developed for use on, and in connection with, the specific project. All ideas, designs, arrangements, plans and specifications shall be used by or for the project, and no reproduction or use whatsoever, in whole or in part, without the permission of Michael A. Shiff and Associates Incorporated. Visual contact with these plans or drawings shall constitute exclusive evidence of acceptance of these restrictions. Written permission shall be required for reproduction or use of these drawings for any other dimensions on drawings shall be required. The undersigned hereby certifies that he or she is, and is responsible for, all dimensions and conditions on the job. This office must be notified in writing of any change in dimensions or conditions on the job. If a change is required, shop details and drawings must be submitted to this office for approval before proceeding with fabrication of any work.

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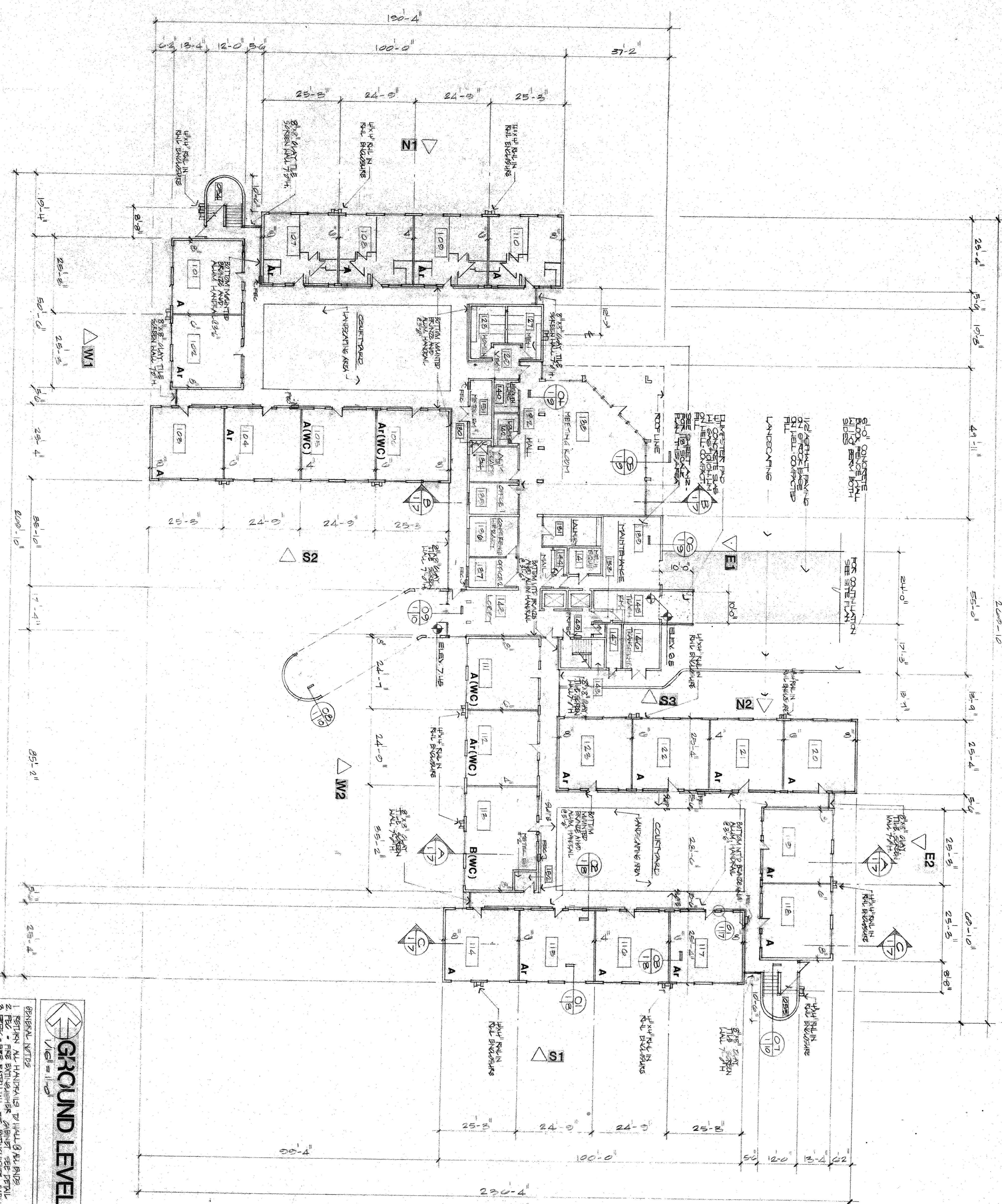
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# GROUND LEVEL PLAN

- GENERAL NOTES
1. REFER TO HANDMADE TO WALL & ALL RISES
  2. FILL - FINE EXTERIOR FINISH SEE DETAIL SHEET
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Michael A. Shiff and Associates, Incorporated / 1061 W. Oakland Park Blvd. / Suite 2-C / Oakland Park, Fla. 33311 / (305) 563-1000 / Architecture / Land Planning / Municipal Planning

## HOUSING FOR THE ELDERLY Project FL-79-6

I hereby certify that this plan, specification or report was prepared by me or under my direct supervision and that I am a duly Registered Architect under the laws of the State of Florida.

Date: DEC 20 Reg. No. 5981

ISSUED FOR BIDDING DATE

DATE

REVISIONS

All ideas, designs, arrangements, plans, and specifications indicated or represented by this drawing are owned by, and the property of, Michael A. Shiff and Associates Incorporated, and were created, evolved and developed for use on, and in connection with, the specified project. None of these ideas, designs, arrangements, plans and specifications shall be used by or disclosed to any person, firm or corporation for any purpose whatsoever without the written permission of Michael A. Shiff and Associates Incorporated. Visual contact with these plans or specifications shall constitute conclusive evidence of acceptance of these restrictions. Written permission on drawings shall have precedence over scaled dimensions. Contractors shall verify, and be responsible for, all dimensions and conditions on the job. This office must be notified of any variations from dimensions and conditions shown by these drawings, where required, shop details and drawings, must be submitted to this office for approval before proceeding with fabrication of any work.

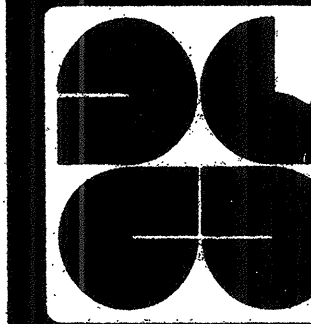
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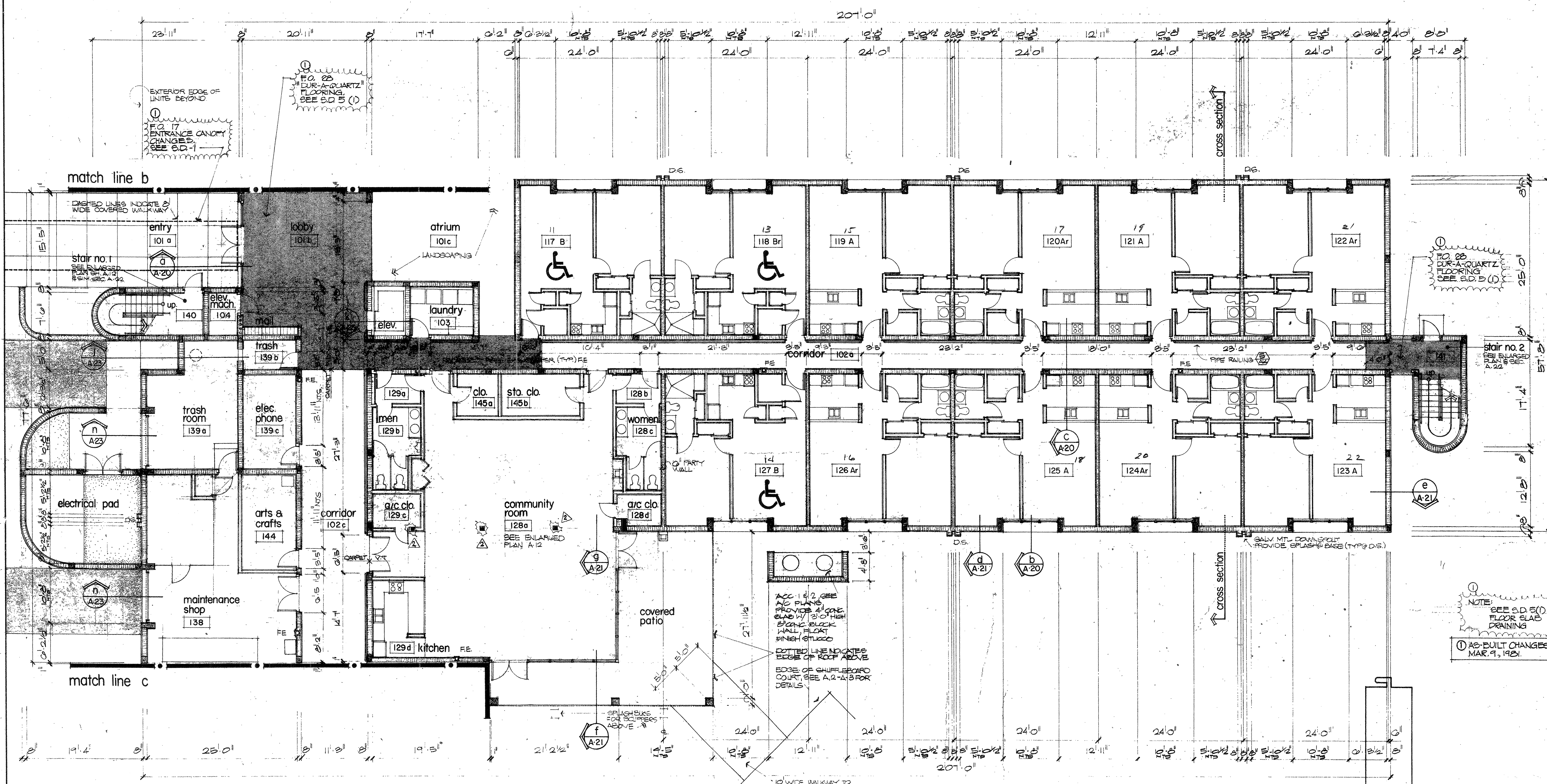






HIGHLANDS GARDENS  
MULTI-FAMILY HOUSING PROJECT FL-79 4, BROWARD COUNTY, FLORIDA  
THE BABCOCK COMPANY, 5915 PONCE DE LEON BLVD, CORAL GABLES, FL

comm. no. 694  
date: 7-13-79  
revisions:  
A 8-13-79  
B 9-10-79 REVISED  
sheet no. A-4  
OF 23



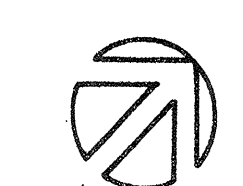
partial first floor plan  
wing a  
1/8"

general notes:

- GENERAL NOTES INDICATED HERE REFER TO ALL FLOOR PLANS, FIRST THROUGH THIRD VING A, B, AND C, TYPICAL.
- REFER TO ENLARGED PLANS OF FOLLOWING AREAS: LOBBIES, STAIRS, ELEVATOR TOWERS, LAUNDRY ROOM, COMMUNITY ROOM, ELEC. RM., ELEV. MACHINE ROOM, TRASH RM., UNIT PLANS, MAINTENANCE OFFICES, FOR DETAILED DIMENSIONS, NOTES AND ALL DOOR MARKS. SEE SHEETS A-12, B-13, C-14, D-15.
- ALL UNIT PARTY WALLS TO BE SOUND INSULATED W/ 2" MIN. FIBERGLASS SOUND BATT STC RATING SHALL BE A MIN. STC 45.
- ALL EXTERIOR UNIT & PUBLIC CONC. BLOCK CEILS SHALL BE INSULATED W/ "ZONOLITE" LOOSE FILL INSULATION (TYPICAL).

materials legend:

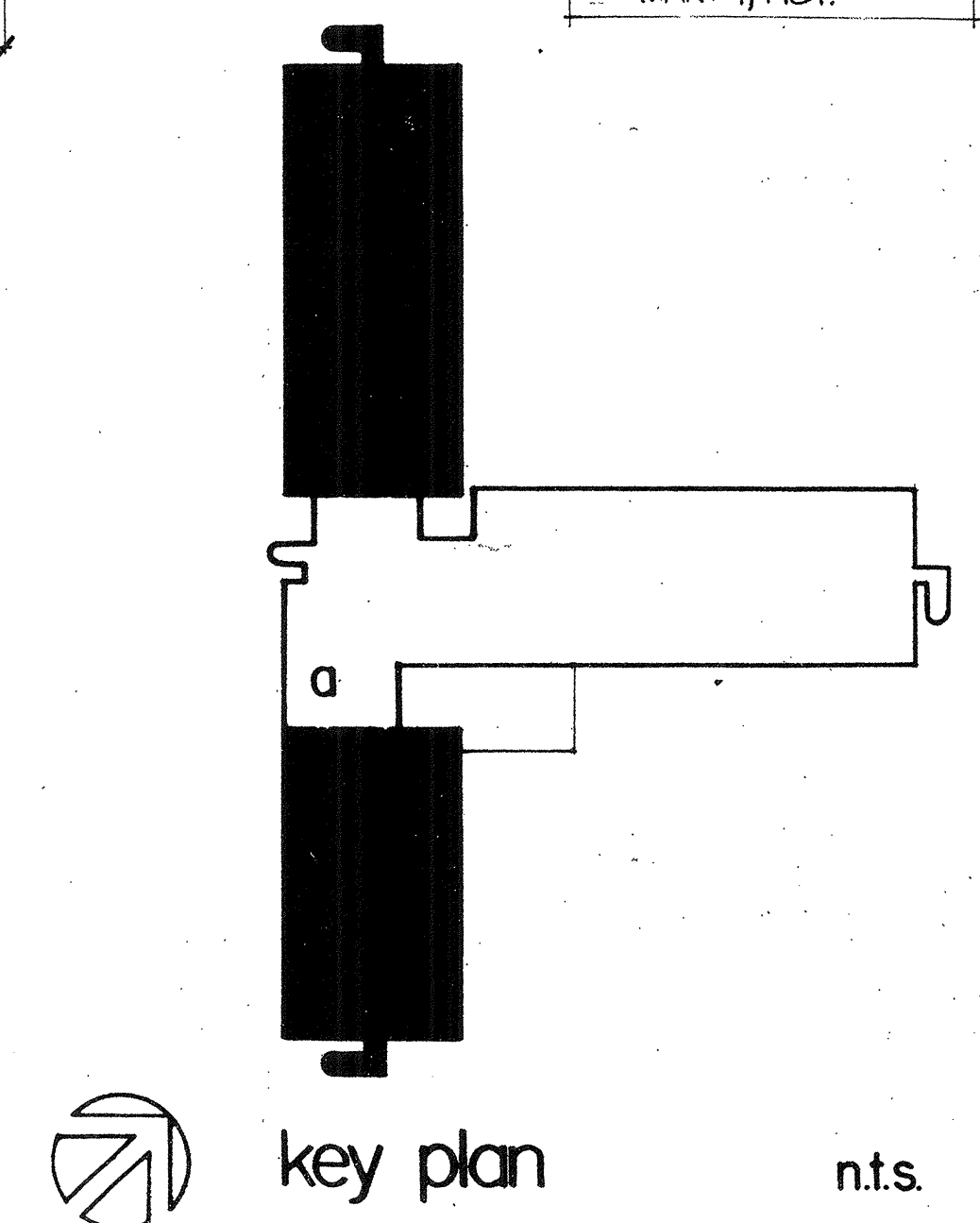
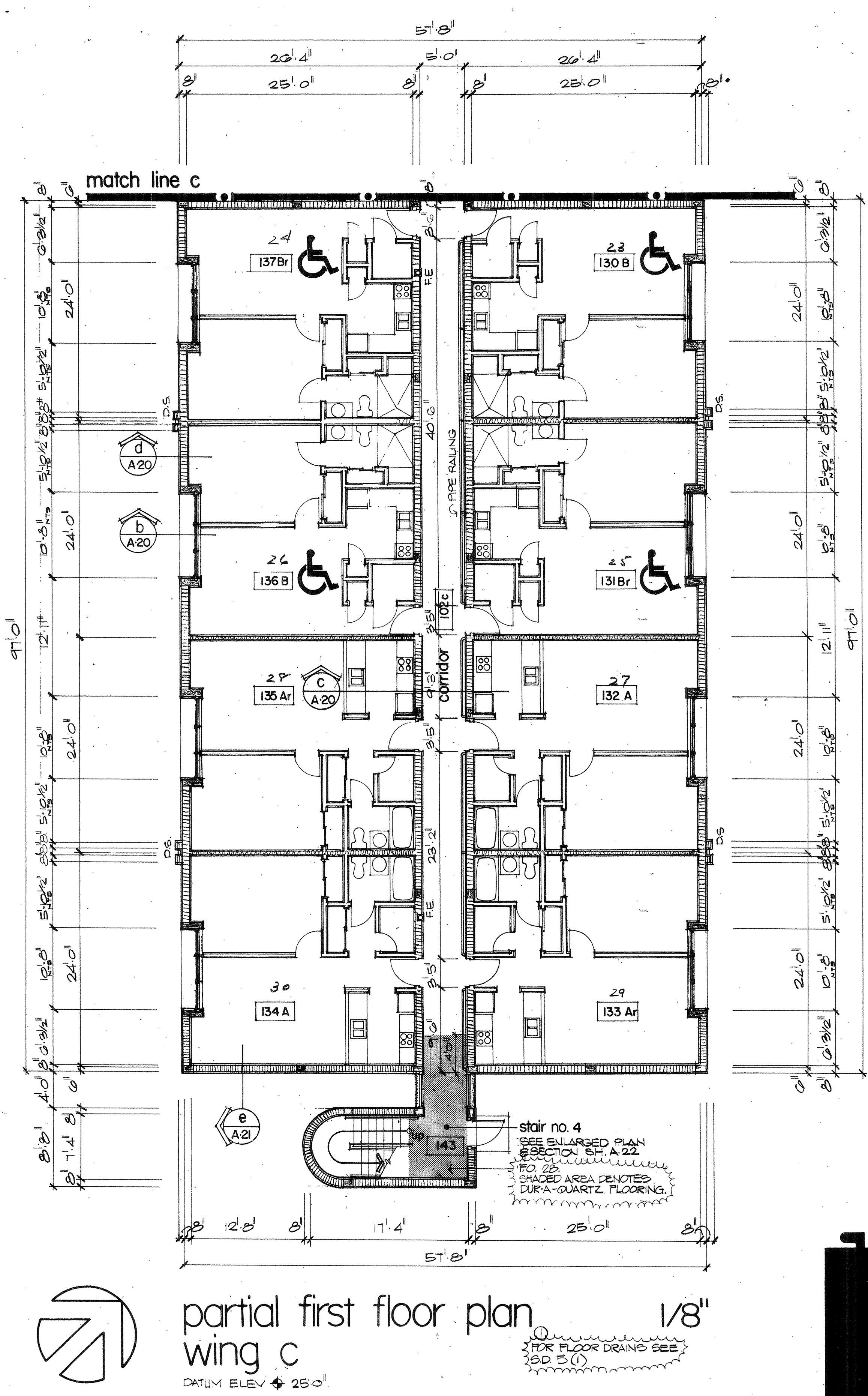
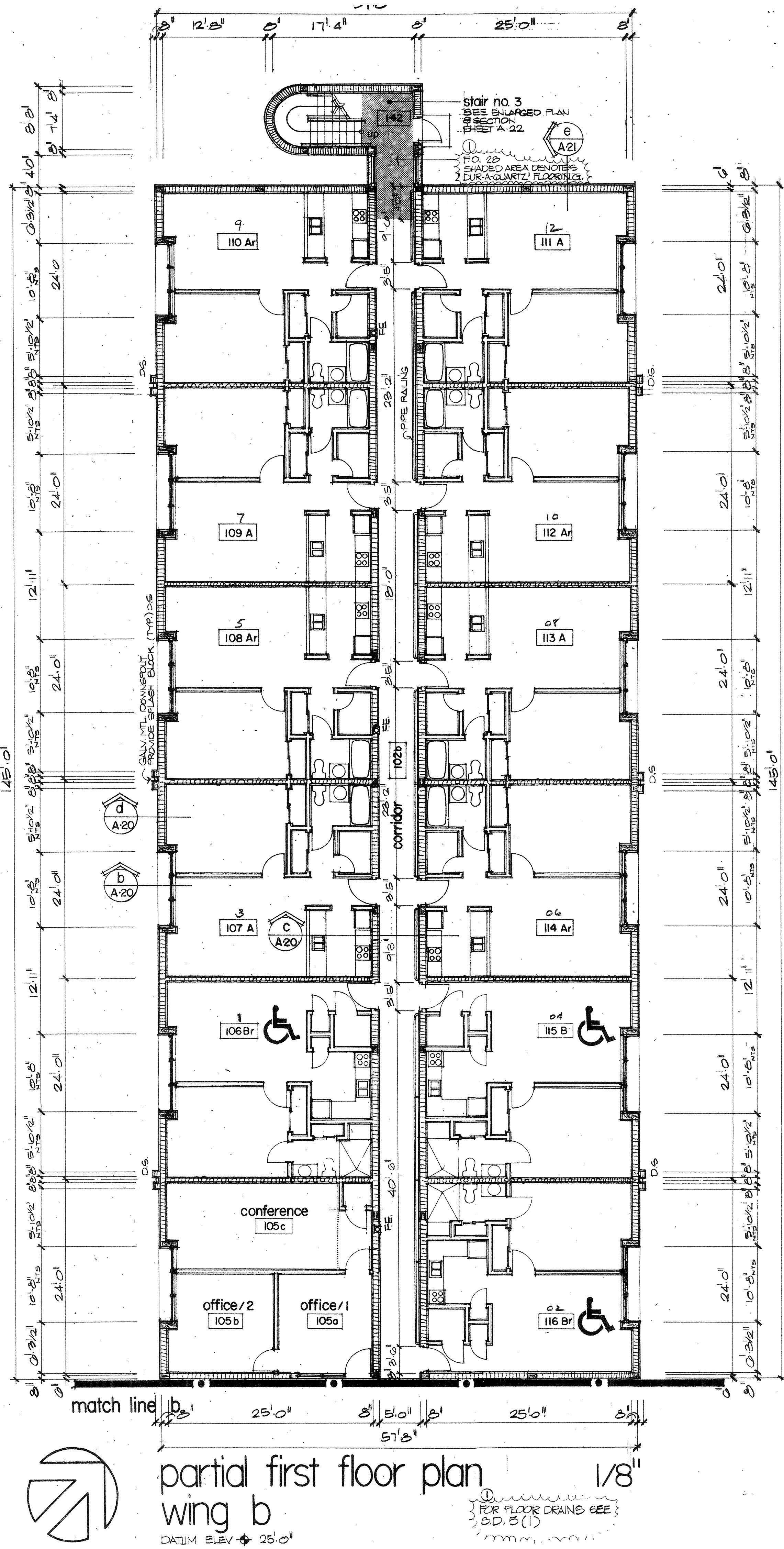
- 2" CONC. BLOCK, SEE FINISH ON SCHEDULE
- 3/4" METAL STUDS, 24" OC. W/ 1/2" DRYWALL EA. SIDE U.O.N.
- 3/4" METAL STUDS, 10" OC. W/ 5/8" TYPE 'X' DRYWALL EA. SIDE W/ 2" SOUND INSULATING BLANKETS U.O.N.



key plan

n.t.s.





① AS BUILT CHANGES  
MAR. 9, 1981.

**architects: baldwin+sackman**  
3298 mary st. no. 2 coconut grove, florida • 446 6491

**HIGHLANDS GARDENS**  
MULTI-FAMILY HOUSING PROJECT FL. 79 4, BROWARD COUNTY, FLORIDA  
THE BABCOCK COMPANY, 5915 PONCE DE LEON BLVD, CORAL GABLES, FL

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revisions:  
A 8.13.79 REV. C.M.  
A 10.79 REV. C.M.

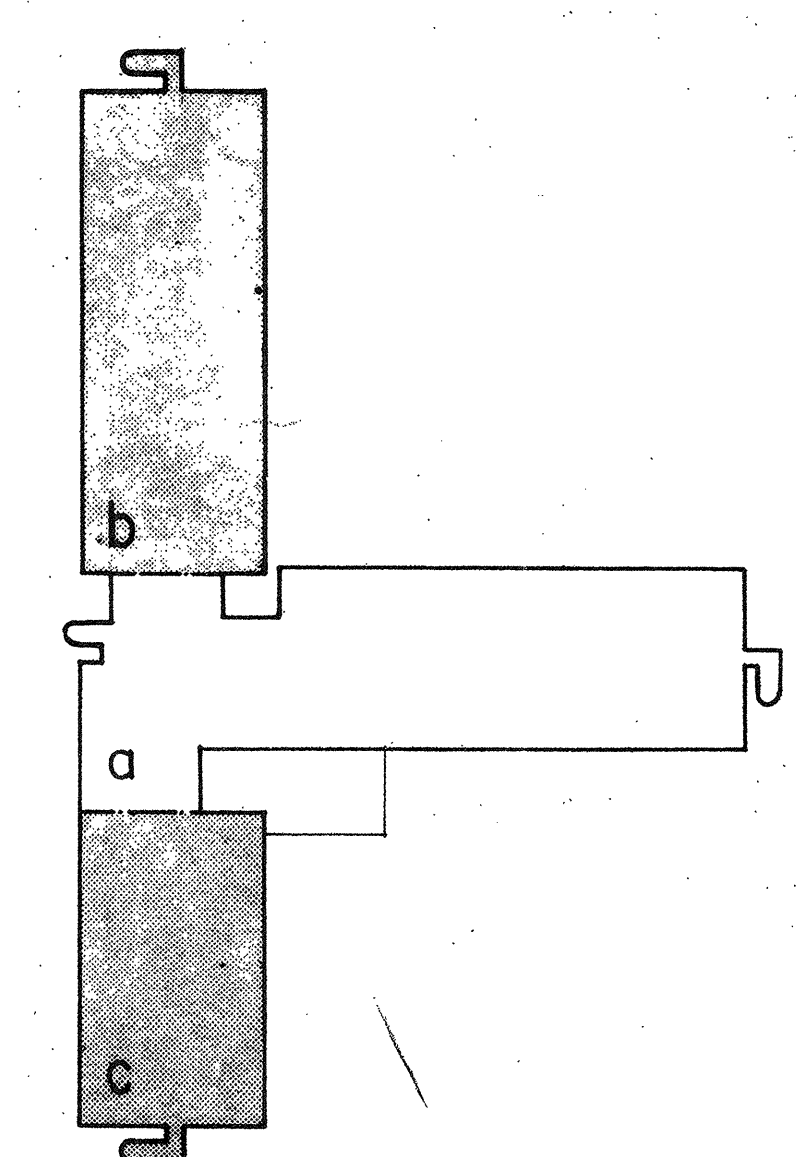
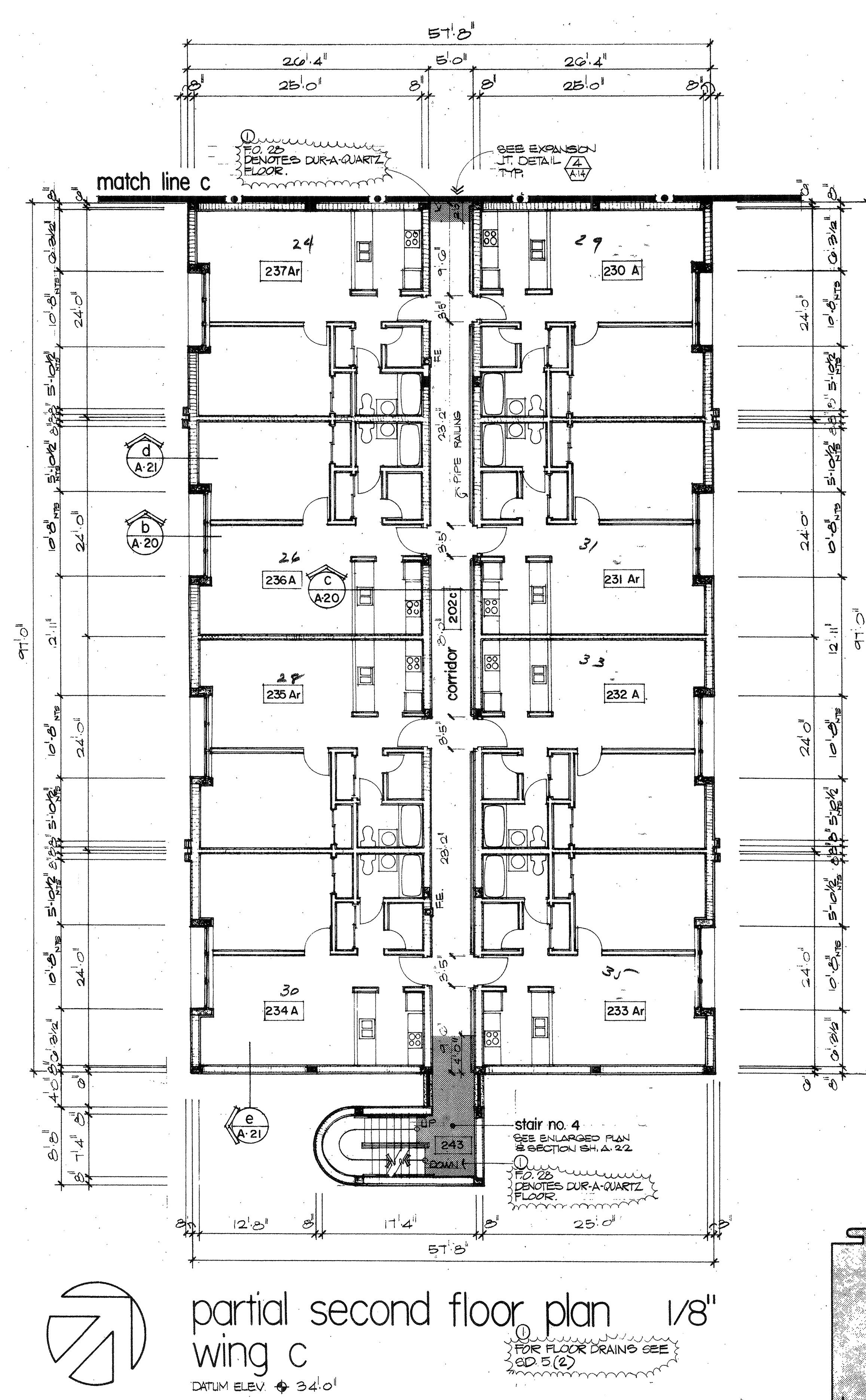
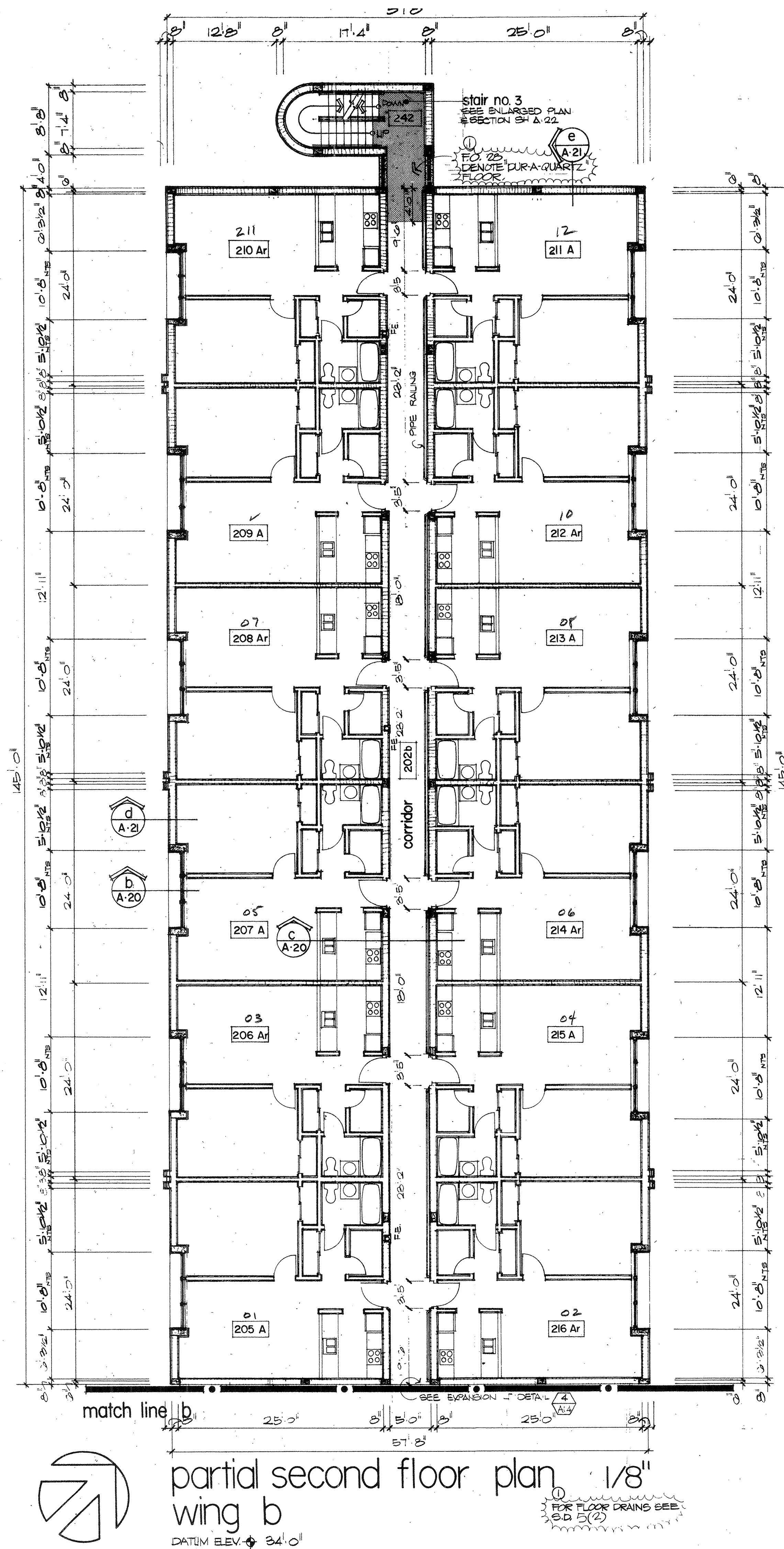
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OF 23



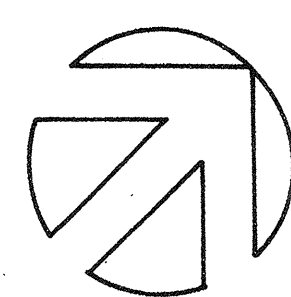


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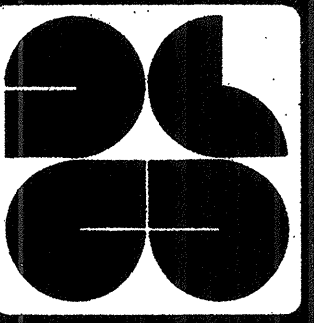
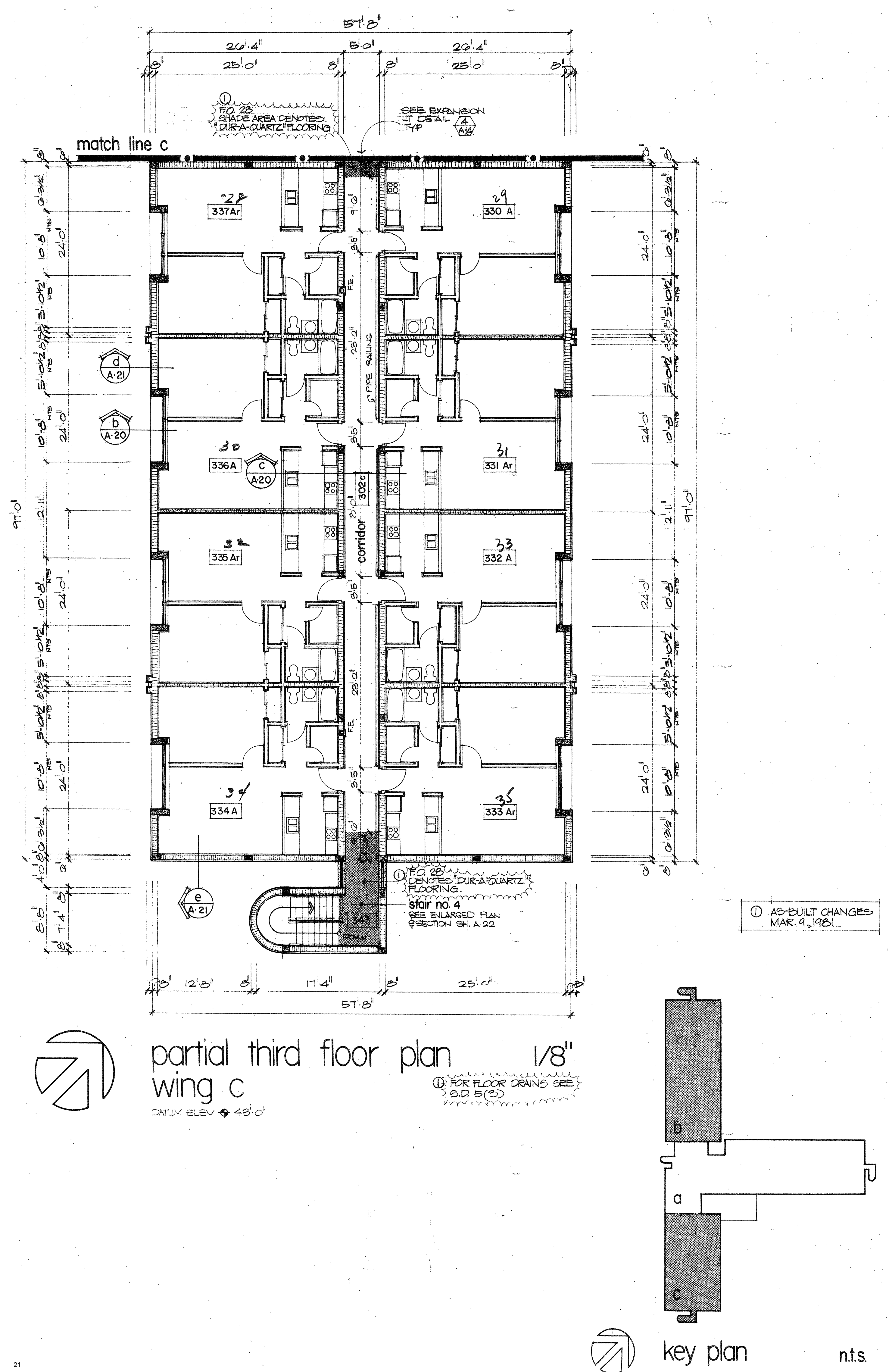
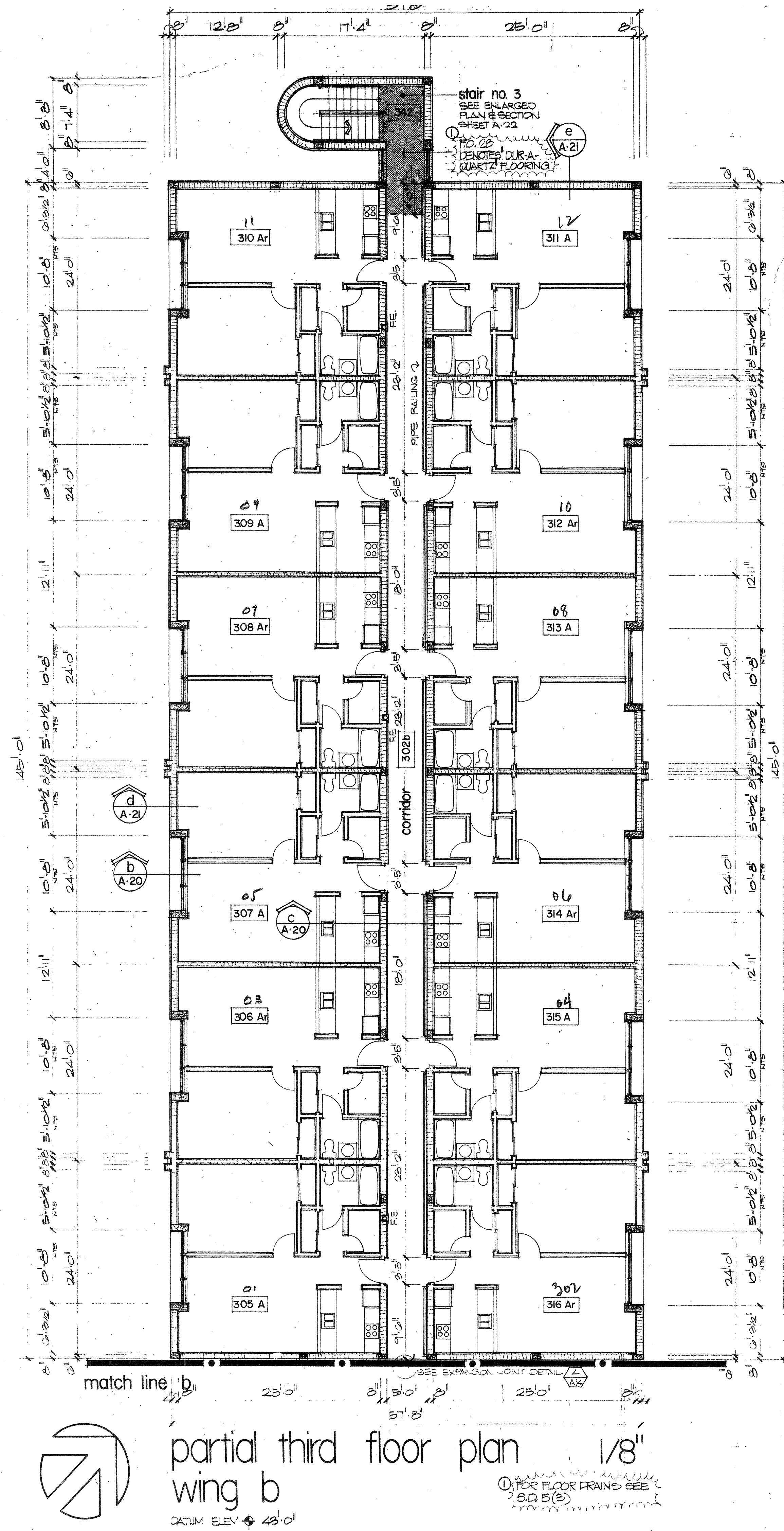




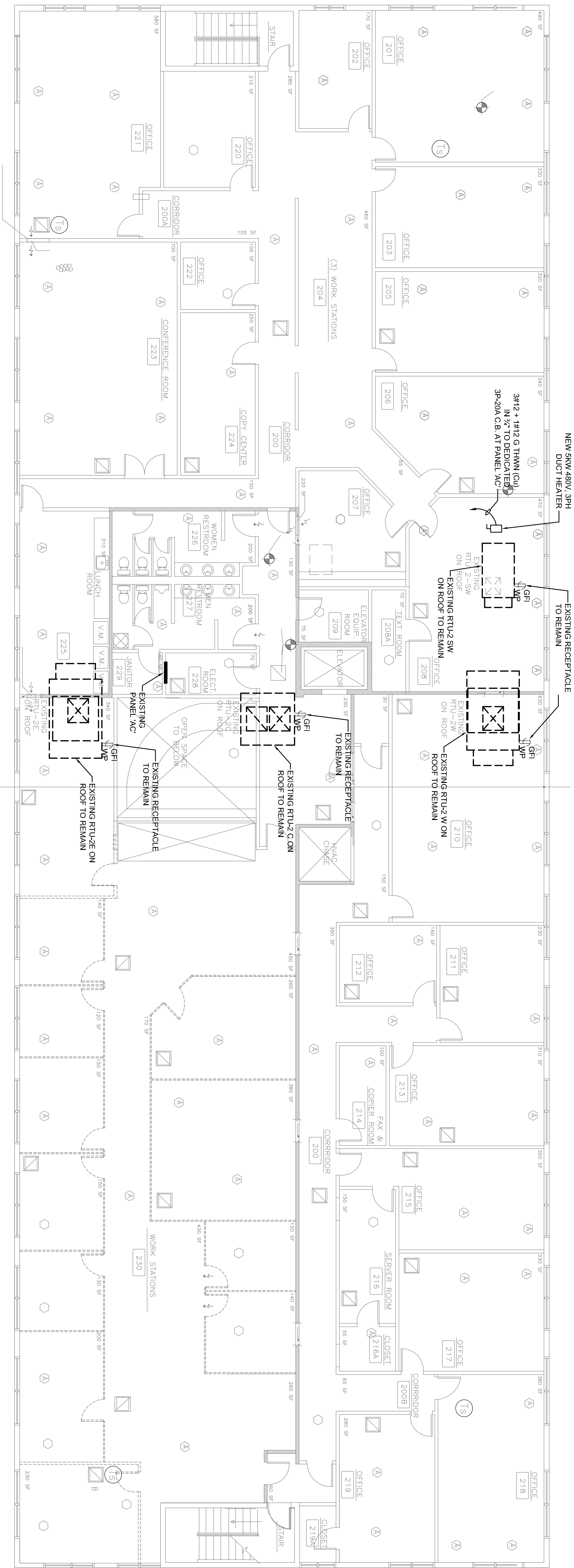
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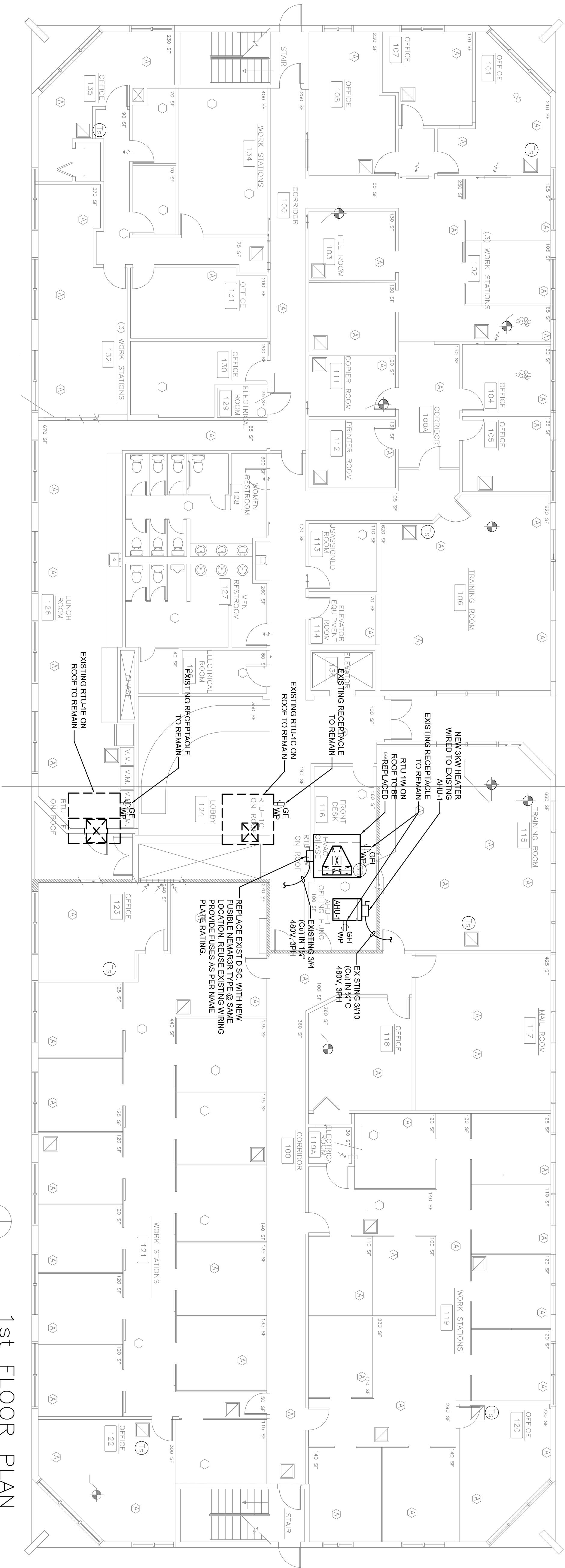




2nd FLOOR PLAN

NORTH

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



1st FLOOR PLAN

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

NORTH

