



# APPLICATION FOR VARIANCE

State Form 44400 (R5 / 10-10)

Approved by State Board of Accounts, 2008

INDIANA DEPARTMENT OF HOMELAND SECURITY  
 CODE SERVICES SECTION  
 402 West Washington Street, Room W246  
 Indianapolis, IN 46204-2739  
[http://www.in.gov/dhs/fire/fp\\_bs\\_comm\\_code/](http://www.in.gov/dhs/fire/fp_bs_comm_code/)



**INSTRUCTION:** Please refer to the attached four (4) page instructions.  
 Attach additional pages as needed to complete this application.

Variance number (Assigned by department)

### 1. APPLICANT INFORMATION (Person who would be in violation if variance is not granted; usually this is the owner)

Name of the applicant Mr. Scott A. Travis	Title Senior Development Executive
Name of organization NOS Innovation Partners, LLC	Telephone number ( 317 ) 554-6795
Address (number and street, city, state, and ZIP code) 941 N. Meridian Street, Indianapolis, IN 46204	

### 2. PERSON SUBMITTING APPLICATION ON BEHALF OF THE APPLICANT (If not submitted by the applicant)

Name of person on behalf of the applicant Mr. Ralph D. Gerdes, AIA	Title General Manager
Name of organization Ralph Gerdes Consultants, LLC	Telephone number ( 317 ) 787-3750
Address (number and street, city, state, and ZIP code) 5510 South East Street, Suite E, Indianapolis, IN 46227	

### 3. DESIGN PROFESSIONAL OF RECORD (If applicable)

Name of design professional Mr. Kelly Davis, AIA	License number 10900103
Name of organization OZ Architecture	Telephone number ( 303 ) 861-5704
Address (number and street, city, state, and ZIP code) 3003 Larimer Street, Denver, CO 80205	

### 4. PROJECT IDENTIFICATION

Name of project CityWay Building 9 MOB	State project number Unfiled	County Marion
Site address (number and street, city, state, and ZIP code) Southwest Corner Alabama Street and South Street, Indianapolis, IN 46204		
Type of project: <input checked="" type="checkbox"/> New <input type="checkbox"/> Addition <input type="checkbox"/> Alteration <input type="checkbox"/> Change of occupancy <input type="checkbox"/> Existing		

### 5. REQUIRED ADDITIONAL INFORMATION

The following required information has been included with this application (check as applicable):

- A check made payable to the Indiana Department of Homeland Security for the appropriate amount. (see instructions)
- One (1) set of plans or drawings and supporting data that describe the area affected by the requested variance and any proposed alternatives.
- Written documentation showing that the local fire official has received a copy of the variance application.
- Written documentation showing that the local building official has received a copy of the variance application.

### 6. VIOLATION INFORMATION

Has the Plan Review Section of the Division of Fire & Building Safety issued a Correction Order?  
 Yes (if yes, attach a copy of the Correction Order)             No

Has a violation been issued?     Yes (if yes, attach a copy of the Violation and answer the following)             No

Violation issued by:     Local Building Department             State Fire and Building Code Enforcement Section  
 Local Fire Department

## 7. DESCRIPTION OF REQUESTED VARIANCE

Name of code or standard and edition involved Indiana Building Code - 2014	Specific code section 706.1.1
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Nature of non-compliance (include a description of spaces, equipment, etc. involved as necessary)

This project was not filed prior to December 1, 2014, as expected redo of the variance is due to new code. A 2 hour fire wall on a property line separating two buildings and companies of similar use/purpose (health and fitness) will have several communicating openings through the wall on both the first and second floors with the adjacent building (YMCA). The openings, on this building, will be a combination of unprotected openings, glazed store front type door/wall, and rated doors. Code does not allow any openings in a wall on a property line.

## 8. DEMONSTRATION THAT PUBLIC HEALTH, SAFETY, AND WELFARE WILL BE PROTECTED

Select one of the following statements:

- Non-compliance with the rule will not be adverse to the public health, safety or welfare; or
- Applicant will undertake alternative actions in lieu of compliance with the rule to ensure that granting of the variance will not be adverse to public health, safety, or welfare. Explain why alternative actions would be adequate (*be specific*).

Facts demonstrating that the above selected statement is true:

1. The building will be protected throughout by an automatic fire sprinkler system per NFPA 13.
2. Close spaced sprinklers will be placed on both sides of each opening location at no more than 6'-0" on center, and no more than 12" from the surface of the glazing, along with at least a 12" deep draft curtain or bulkhead placed at opening, per NFPA 13.
3. The man doors into the stair enclosure will be 1 1/2 hour rated, along with the close spaced sprinklers.
4. NFPA 80A, Protection of Building from Exterior Fire Exposures, 2007 edition, Section 5.6.3 states that where the exposing building is protected with a sprinkler system no exposure hazard should be considered to exist. Likewise, 5.6.4 states when an exposed building is protected then the hazard is substantially reduced.
5. Previous variance 14-10-10 was approved.

## 9. DEMONSTRATION OF UNDUE HARDSHIP OR HISTORICALLY SIGNIFICANT STRUCTURE

Select at least one of the following statements:

- Imposition of the rule would result in an undue hardship (*unusual difficulty*) because of physical limitations of the construction site or its utility services.
- Imposition of the rule would result in an undue hardship (*unusual difficulty*) because of major operational problems in the use of the building or structure.
- Imposition of the rule would result in an undue hardship (*unusual difficulty*) because of excessive costs of additional or altered construction elements.
- Imposition of the rule would prevent the preservation of an architecturally or a historically significant part of the building or structure.

Facts demonstrating that the above selected statement is true:

The owner's undue hardship is that there are two different companies in the adjacent building that share the same mission and purpose (health and fitness) who want to share each other's facilities. The buildings are separated by a fire wall on the property line which is not allowed to have any openings.

## 10. STATEMENT OF ACCURACY

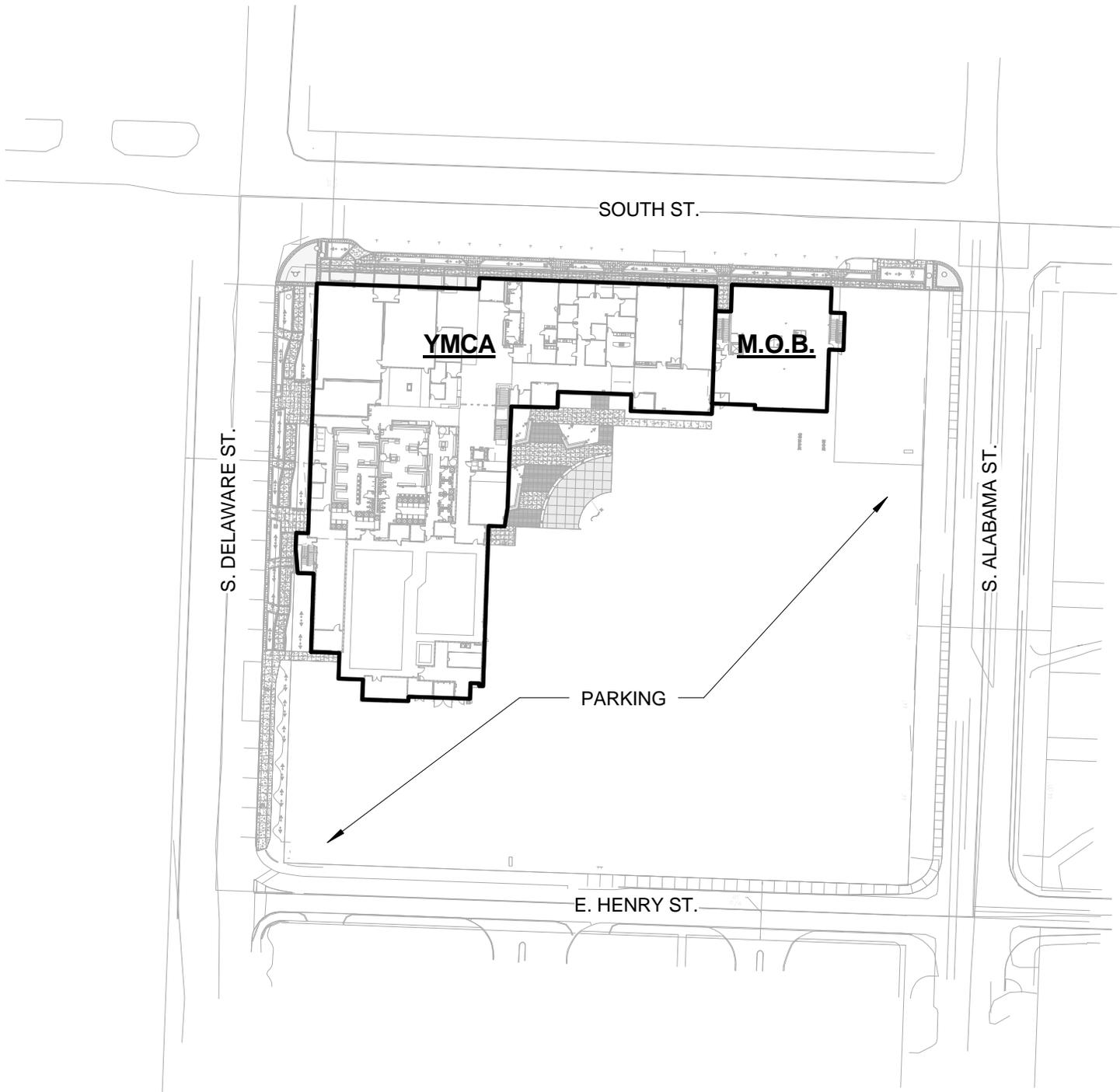
I hereby certify under penalty of perjury that the information contained in this application is accurate.

Signature of applicant or person submitting application	Please print name Ralph D. Gerdes, AIA	Date of signature (month, day, year)
Signature of design professional (if applicable)	Please print name Kelly Davis, AIA	Date of signature (month, day, year)

## 11. STATEMENT OF AWARENESS (If the application is submitted on the applicant's behalf, the applicant must sign the following statement)

I hereby certify under penalty of perjury that I am aware of this request for variance and that this application is being submitted on my behalf.

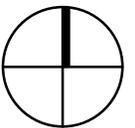
Signature of applicant	Please print name Scott A. Travis	Date of signature (month, day, year)
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1

# VARIANCE SITE PLAN

1" = 100'-0"

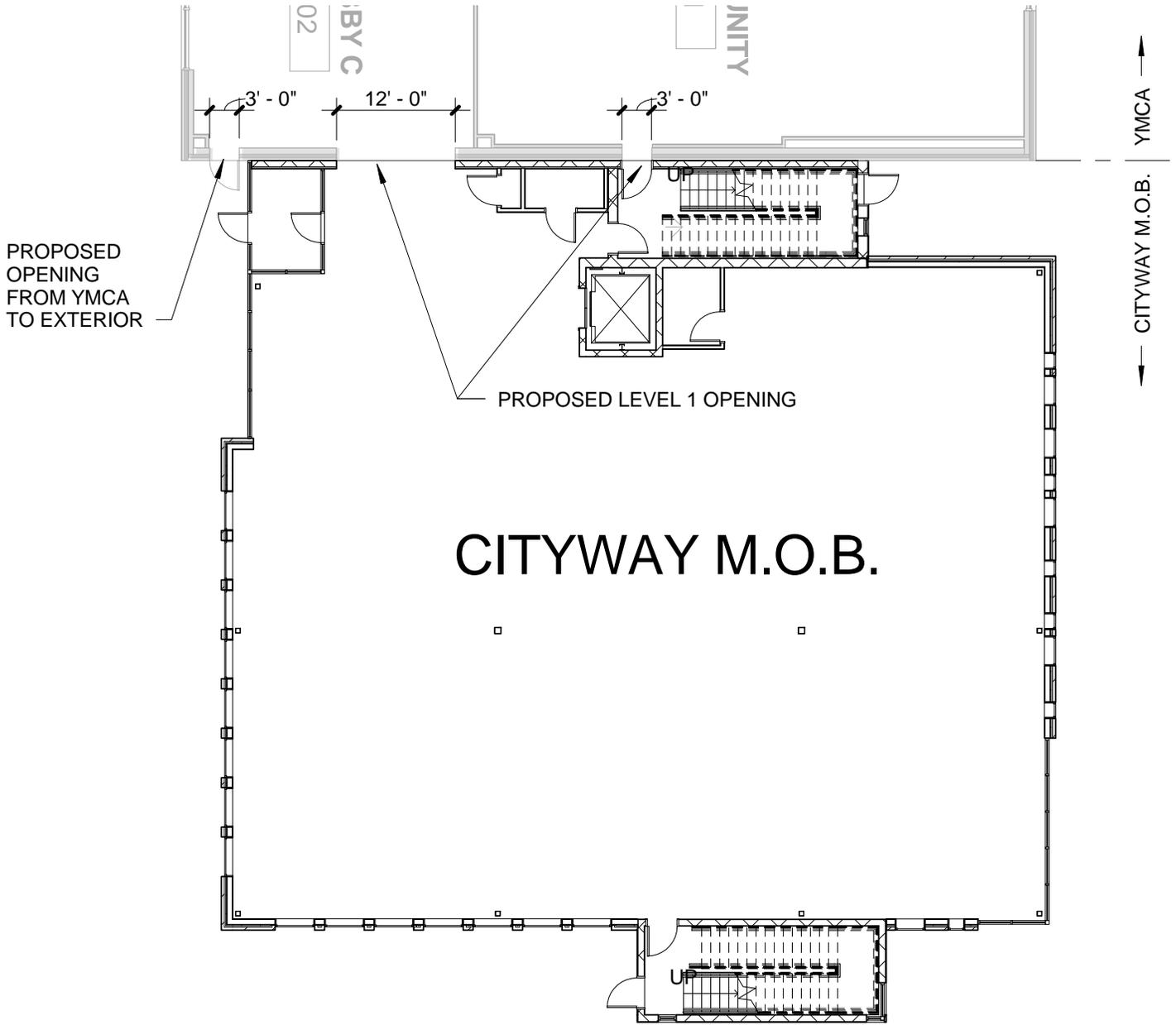


## CITYWAY BUILDING 9 M.O.B.

PROJ. NO. 112077.00  
DATE: 09/04/14  
ISSUED FOR: VARIANCE EXHIBIT

SCALE: 1" = 100'-0"

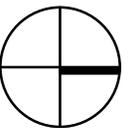
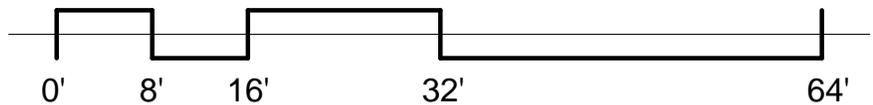
DWG. NO. SK-VAR-1



1

# VARIANCE - LEVEL 1 FLOOR PLAN

1/16" = 1'-0"



## CITYWAY BUILDING 9 M.O.B.

PROJ. NO. 112077.00  
 DATE: 09/04/14  
 ISSUED FOR: VARIANCE EXHIBIT

SCALE: 1/16" = 1'-0"

DWG. NO. SK-VAR-2

