



APPLICATION FOR VARIANCE

State Form 44400 (R7 / 10-13)
Approved by State Board of Accounts, 2013

INDIANA DEPARTMENT OF HOMELAND SECURITY
CODE SERVICES SECTION
302 West Washington Street, Room W246
Indianapolis, IN 46204-2739
http://www.in.gov/dhs/fire/fp_bs_comm_code/



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

Variance number (Assigned by department)

16-05-05

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

Name of applicant	Title
Health and Hospital Corporation of Marion County dba Brownsburg Meadows	
Name of organization	Telephone number
American Senior Communities	(317) 788-2500
Address (number and street, city, state, and ZIP code)	
6900 S. Gray Rd. Indianapolis, IN 46237	

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

Name of applicant	Title
Linda Colpron	Executive Director
Name of organization	Telephone number
Brownsburg Meadows	(317) 852-8585
Address (number and street, city, state, and ZIP code)	
2 E. Tilden Drive Brownsburg, IN 46112	

3. DESIGN PROFESSIONAL OF RECORD (If applicable)

Name of design professional	License number
Name of organization	Telephone number
	()
Address (number and street, city, state, and ZIP code)	

4. PROJECT IDENTIFICATION

Name of project	State project number	County
Requesting Variance for 2 sets of disguised doors on memory care unit		Hendricks
Address of site (number and street, city, state, and ZIP code)		
2 E. Tiden Drive Brownsburg, IN 46112		
Type of project		
<input type="checkbox"/> New <input type="checkbox"/> Addition <input type="checkbox"/> Alteration <input type="checkbox"/> Change of occupancy <input checked="" 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 and 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

2014 Edition IFC 675 IAC 22-2.5

Specific code section

Sec. 1008.1

Nature of non-compliance (include a description of spaces, equipment, etc. involved as necessary.)

There are currently 2 sets of disguised locked doors on our memory care unit.. These doors are disguised as such to discourage residents with dementia from exit-seeking/ elopement.

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:

There are key pads located next to both sets of locked doors to unlock the doors. Once the correct code is entered, the doors unlock. Both sets of doors have release bars on them and if the bars are held for 15 seconds, the doors automatically release. Once the fire alarm sounds, both sets of locked disguised doors automatically unlock allowing for easy exit.

9. DEMONSTRATION OF UNDUH 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:

Imposition of the rule would result in an increased risk of resident safety by increasing the chance of exit-seeking/ elopement that could potentially lead to resident harm.

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 <i>Linda Colpron</i>	Please print name Linda Colpron	Date of signature (month, day, year) 3/29/16
Signature of design professional (if applicable)	Please print name	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 <i>Paxton Wiffeler</i>	Please print name Paxton Wiffeler	Date of signature (month, day, year) 3/30/16
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EXIT







FIRE AND BUILDING CODE ENFORCEMENT INSPECTION REPORT ORDER

DIVISION OF FIRE AND BUILDING SAFETY
INDIANA DEPARTMENT OF HOMELAND SECURITY
302 WEST WASHINGTON STREET, RM E241
INDIANAPOLIS, IN 46204
TELEPHONE: 317-232-2222
WEB ADDRESS: WWW.IN.GOV/DHS

Identification Number LT7964	Name of the facility BROWNSBURG MEADOWS, LLC	County HENDRICKS
Address of Property 2 EAST TILDEN BROWNSBURG IN 46112	Name of the Contact LINDA COLPRON	Telephone Number (317) 852-8585
Email lindacolpron@AmericanSrCommunities.com		Inspection Date 03/15/2016
Inspection Category HEALTHCARE FACILITY	Inspection Type ANNUAL	Inspection Status: VIOLATION
Name of the inspector DEL SCHROEDER		Phone: 3174176654
Email: dschroeder@dhs.in.gov		

Violations

VIO-LATION NUMBER	RULE OR INDIANA CODE SECTION VIOLATED	DESCRIPTION OF VIOLATION	DATE BY WHICH VIOLATION MUST BE CORRECTED
1	Sec. 1008.1 2014 Edition IFC 675 IAC 22-2.5	<p>Means of egress doors shall meet the requirements of this section. Doors serving a means of egress system shall meet the requirements of this section and Section 1020.2. Doors provided for egress purposes in numbers greater than required by this code shall meet the requirements of this section.</p> <p>Means of egress doors shall be readily distinguishable from the adjacent construction and finishes such that the doors are easily recognizable as doors. Mirrors or similar reflecting materials shall not be used on means of egress doors. Means of egress doors shall not be concealed by curtains, drapes, decorations or similar materials.</p> <p><u>Two sets of exit doors in the memory care unit were decorated to conceal their use as exit doors.</u></p>	04/15/2016

Facility Id LT7964	Received By Name	Signature and Date
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APPEAL RIGHTS

Please be advised that if you desire administrative review of this Order and **this Order was delivered by hand**, you must file a written petition for review with the Fire Prevention and Building Safety Commission at 302 West Washington Street, Rm. W246, Indianapolis, IN 46204, identifying the violations for which you seek review no later than 15 calendar days from the hand delivery date of this Order unless such date is a Saturday, Sunday, legal holiday under state statute, or day that the Department of Homeland Security's offices are closed during regular business hours, in which case the deadline would be the first calendar day thereafter that is not a Saturday, Sunday, legal holiday under state statute, or day that the Department of Homeland Security's offices are closed during regular business hours. If you do so, your petition for review will be granted and an administrative proceeding will be conducted by an administrative law judge appointed by the Fire Prevention and Building Safety Commission. If you do not file a petition for review, this Order will be **FINAL** and you **MUST** comply with its requirements.

Please be advised that if you desire administrative review of **this Order and this Order was delivered by first class U.S. mail**, you must file a written petition for review with the Fire Prevention and Building Safety Commission at 302 West Washington Street, Rm. W246, Indianapolis, IN 46204, identifying the violations for which you seek review no later than 18 calendar days from the mailing date of this Order unless such date is a Saturday, Sunday, legal holiday under state statute, or day that the Department of Homeland Security's offices are closed during regular business hours, in which case the deadline would be the first calendar day thereafter that is not a Saturday, Sunday, legal holiday under state statute, or day that the Department of Homeland Security's offices are closed during regular business hours. If you do so, your petition for review will be granted and an administrative proceeding will be conducted by an administrative law judge appointed by the Fire Prevention and Building Safety Commission. If you do not file a petition for review, this Order will be **FINAL** and you **MUST** comply with its requirements.

Please be further advised that you may request an opportunity to informally discuss this Order prior to filing a petition for review. Such informal discussion, or a request therefor, does not extend the deadline for filing a petition for review and, therefore, any request for an informal discussion should be made promptly, preferably by telephone, upon receipt of this Order.

Mail

Reply

Reply to All

Forward

Move

Delete

Junk

Close

- Deleted Items
- Drafts
- Inbox** (118)
- Junk E-Mail
- Sent Items

Click to view all folders

- Career Bldr
- HD orders
- Hours
- Inspections
- Invoices
- Jim McIntyre
- Labor Recaps
- MDS info
- Optimistic
- Trisha
- Manage Folders...

Brownsburg Meadows request for Variance

Trisha Dixon

Sent: Thursday, March 31, 2016 4:33 PM
To: Sjones@brownsburgfire.org
Cc: LINDA COLPRON

Attachments: ~OT721AI001F.pdf (549 KB) [Open as Web Page]

Hello Steve,

Brownsburg Meadows recently had their annual State Fire Marshal inspection. As a result of this inspection, one citation was issued related to the 2 sets of doors on the locked memory care being "disguised". These doors are painted as such to attempt to deter residents with dementia from possible attempts at exit-seeking/ elopement that could result in potential resident harm. The facility has completed an application for a variance with the state, but one of the requirements was to inform you of this request. I have attached a copy of our application. If you have any questions please call the facility at 317-852-8585 or feel free to come for a visit at any time.

Thank you,
 Teresa Dixon RN, BSN, AIT

Mail

Reply Reply to All Forward Move Delete Junk Close

- Deleted Items
- Drafts
- Inbox (117)
- Junk E-Mail
- Sent Items

Click to view all folders

- Career Bldr
- HD orders
- Hours
- Inspections
- Invoices
- Jim McIntyre
- Labor Recaps
- MDS info
- Optimistic
- Trisha
- Manage Folders...

Brownsburg Meadows request for Variance

Trisha Dixon

Sent: Thursday, March 31, 2016 4:27 PM
To: tbarker@brownsburg.org
Cc: LINDA COLPRON
Attachments: ~OT721AI001F.pdf (549 KB) [Open as Web Page]

Hello Todd,

Brownsburg Meadows recently had their annual State Fire Marshal inspection. As a result of this inspection, one citation was issued related to the 2 sets of doors on the locked memory care being "disguised". These doors are painted as such to attempt to deter residents with dementia from possible attempts at exit-seeking/ elopement that could result in potential resident harm. The facility has completed an application for a variance with the state, but one of the requirements was to inform you of this request. I have attached a copy of our application. If you have any questions please call the facility at 317-852-8585 or feel free to come for a visit at any time.

Thank you,
 Teresa Dixon RN, BSN, AIT