



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)

16-09-07

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

Name of applicant <i>Gina Burton</i>	Title <i>Owner</i>
Name of organization <i>The Barn</i>	Telephone number <i>(812) 653-1157</i>
Address (number and street, city, state, and ZIP code) <i>3768 N Co Rd 925W West Baden, IN 47469</i>	

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

Name of applicant	Title
Name of organization	Telephone number ()
Address (number and street, city, state, and ZIP code)	

3. DESIGN PROFESSIONAL OF RECORD (If applicable)

Name of design professional <i>NA</i>	License number
Name of organization	Telephone number ()
Address (number and street, city, state, and ZIP code)	

4. PROJECT IDENTIFICATION

Name of project <i>The Barn</i>	State project number	County
Address of site (number and street, city, state, and ZIP code) <i>9729 N Co Rd 240 N West Baden, IN 47469</i>		
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	Specific code section
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Nature of non-compliance (Include a description of spaces, equipment, etc., involved as necessary.)
An extension till 12/31/16 to finish up scheduled weddings (5-6). Sept. 17th, Oct ~~15th~~, 8th and 15th, Dec 2, 2016

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:

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:
\$60,000.00 to update building, and to do major enlargement of building \$150,000.-

10. STATEMENT OF ACCURACY

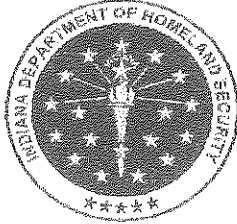
I hereby certify under penalty of perjury that the information contained in this application is accurate.

Signature of applicant or person submitting application <i>Olivia Burton</i>	Please print name <i>Olivia Burton</i>	Date of signature (month, day, year) <i>8/5/16</i>
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>Olivia Burton</i>	Please print name <i>Olivia Burton</i>	Date of signature (month, day, year) <i>8/5/16</i>
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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 BU20419	Name of the Facility THE BARN	County ORANGE
Address of Property 9727 W COUNTY ROAD 240 N WEST BADEN SPRINGS IN 47401	Name of the Contact DAVID BURTON	Telephone Number (317) 277-8915
Email david.burton@layne.com		Inspection Date 08/17/2018
Inspection Category UNFILED CONSTRUCTION DESIGN RELE	Inspection Type INITIAL	Inspection Status: VIOLATION
Name of the Inspector RYAN WEINBERGER		Phone: 317-277-6650
Email: rweinberger@dhs.in.gov		

Violations

VIOLATION NUMBER	RULE OR INDIANA CODE SECTION VIOLATED	DESCRIPTION OF VIOLATION	DATE BY WHICH VIOLATION MUST BE CORRECTED
1	675 IAC 12-6-3(9)	<p>No construction shall be done on a Class 1 structure until a design release has been issued by the division unless the construction is of a type specifically exempted from the design release requirements by section 4 of this rule. Design releases may be issued by the division.</p> <p><u>The building constructed on site is being used as a Class 1 structure, however, a Construction Design Release has not been obtained through the Division of Fire and Building Safety.</u></p>	08/17/2018
2	IC 22-44-3-5	<p>Operation without permit or special event endorsement; infraction Sec. 5. (a) This section applies to the following:</p> <p>(1) Each person who has control over the performance of an amusement or entertainment described in IC 22-44-3-3.</p> <p>(2) Each person who has control over a regulated place of entertainment.</p> <p>(b) A person described in subsection (a) commits a Class C infraction if:</p> <p>(1) a regulated place of amusement or entertainment is used for an amusement or entertainment described in IC 22-44-3-3; and</p> <p>(2) no regulated place of amusement or entertainment permit or special event endorsement issued under this chapter covers the conditions of the regulated place of amusement or entertainment that affect fire and explosion safety.</p> <p><u>The facility is being rented out for weddings and having music, however, the required Amusement and Entertainment permit has not been obtained.</u></p>	

Inspection Notes:

An initial inspection was completed after becoming aware of the facility. David advised the structure was originally constructed and used for family events, and within the last few years has been open for public weddings. I discussed the Construction Design Release and A&E listing requirements and David advised he has a design professional that he will begin working with to bring the facility into compliance.



APPLICATION FOR AMUSEMENT ENTERTAINMENT PERMIT

State Form 42235 (R9 / 10-12)

Approved by State Board of Accounts, 2012

Return completed form to:

DEPARTMENT OF HOMELAND SECURITY
DIVISION OF FIRE AND BUILDING SAFETY
FIRE AND BUILDING CODE ENFORCEMENT
302 West Washington Street, Room E241
Indianapolis, Indiana 46204
Telephone: (317) 232-2222
Fax: (317) 233-0307

- INSTRUCTIONS:
1. If non-exempt, include appropriate fee with this application.
 2. If claiming exempt status, include a valid 501c letter with this application.
 3. Include an updated plan.

FACILITY INFORMATION	
Type of facility	<input type="checkbox"/> Theater <input type="checkbox"/> Dance Hall <input type="checkbox"/> Night Club <input type="checkbox"/> Cabaret <input type="checkbox"/> Special Event <input type="checkbox"/> Haunted House <input checked="" type="checkbox"/> Assembly Hall <input type="checkbox"/> Roller Rink <input type="checkbox"/> Lodge Hall <input type="checkbox"/> Carnival / Fair <input type="checkbox"/> Gymnasium <input type="checkbox"/> Other (specify) _____
Name of facility	County
The Barn	
Address of facility (number and street, city, state, and ZIP code)	
9727 West County Road 240 North W. Baden, IN 47469	
Specific room or floor number	Description of facility
One	Barn / one floor / all open
Closest intersecting street or road	Direction from intersection
Hwy 150 & 240 North	<input type="checkbox"/> North <input type="checkbox"/> South <input type="checkbox"/> East <input checked="" type="checkbox"/> West

APPLICANT INFORMATION		
Type of applicant	Name of applicant	Telephone number
<input checked="" type="checkbox"/> Owner <input type="checkbox"/> Operator <input type="checkbox"/> Lessee	Gina Burton	(812) 653-1157
Address of applicant (number and street, city, state, and ZIP code)		
3708 North County Road 925 West W. Baden, IN 47469		
Name of person to contact for inspection	E-mail address	
Gina	gburton@bluemarble.net	
Address of contact person (number and street, city, state, and ZIP code)		Telephone number
Same as above		(812) 653-1157

ANNUAL PERMIT INFORMATION			
Type of permit request (this event will be going on all year, daily, nightly, or weekends)	Dates and hours of event	Occupant load	For renewal, please provide
<input checked="" type="checkbox"/> Annual-Event Endorsement	year around	144	AE # _____
Description of activities / event (Please use additional sheet to list events if needed.)			

SPECIAL ENDORSEMENT INFORMATION			
Type of permit request (one time event additional to annual)	Dates and hours of event	Occupant load	AE # _____
<input type="checkbox"/> Special Event Endorsement			you are applying under. (must first have an Annual Permit)
Name of event and description of activities. Use separate sheet if needed.			

EVENT DETAILS	
Is there going to be (check appropriate box):	
<input type="checkbox"/> Stage: <input type="checkbox"/> Temporary <input type="checkbox"/> Outdoor <input type="checkbox"/> Canopy <input checked="" type="checkbox"/> Tent <input type="checkbox"/> Outdoor stage equipment	

APPLICATION CERTIFICATION	
I, or we, <u>Gina Burton</u> , hereby certify, under penalty of perjury, that the information contained in this application is true and accurate to the best of my(our) knowledge and belief and that the operation of the place of amusement or entertainment or events described above will conform in every respect and at all times with the laws, rules, and regulations of the Fire Prevention and Building Safety Commission and will not be used for other purposes except as herein stated.	
Signature	Date (month, day, year)
<u>Gina Burton</u>	8/6/16

PERMIT FEES	
Fees are based on occupancy load, effective September 30, 2006.	
1 - 99 persons	\$99.00
100 - 499 persons	\$134.00
500 - 999 persons	\$168.00
1,000 - 4,999 persons	\$203.00
5,000 - 9,999 persons	\$237.00
10,000 persons or more	\$272.00
Special Event Endorsement	\$99.00

FOR OFFICE USE ONLY					
Permit number	Fee identification number	Type of permit	Fee amount	Type of payment	Year of permit
			\$		

The Barn
9727 W County Road 240 N
West Baden Springs IN 47469

Facility Id: BU26119

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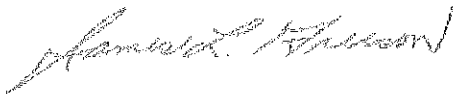
If at the time of re-inspection, the corrections have not been made, the section may pursue other legal options, which may include a "\$250.00 Per Day Fine" for the outstanding violations until verification of violation corrections can be made. If corrections are not made and fines are not paid, the section will pursue its other enforcement options.

On occasion, we will perform an inspection on a building that requires our actions to be more immediate in nature. The degree of threat to life and public safety will dictate the action(s) we take. This immediate action may include the requirement for a fire watch when the building is occupied, or for a more dangerous situation, an immediate building closure and evacuation.

Again, this process is to insure that code violations are corrected in a timely manner to protect life and ensure building safety. Our goal will always be to work with our customers to achieve compliance with the Indiana fire safety and building laws.

If you have questions about our inspections or processes please contact my office at 317-232-2222 or email myself at jgrosson@dhs.in.gov or David Smith, dsmith@dhs.in.gov, Section Chief for Code Enforcement.

Sincerely yours,



James L. Grosson
Indiana State Fire Marshal



James L. Greeson,
Indiana State Fire Marshal
Division of Fire and Building Safety-State Fire Marshal's Office

05/17/2016

The Barn
9727 W County Road 240 N
West Baden Springs IN 47469

Facility Id: BU26119

The intent of this letter is to provide a policy overview of the Division of Fire and Building Safety Code Enforcement Section's inspection process.

It is the Section's obligation to consistently seek compliance with Indiana's fire safety and building laws. This is done to ensure that life and building safety is achieved and maintained throughout the State of Indiana. If you have received an inspection and violations are observed during the inspection, the violations will be documented on an "Inspection Report Order". The violations will be explained to you while the Inspector is on site, and any questions you have will be addressed. A reasonable amount of time will be given for violations to be corrected if any are noted. It is important for corrections to be made within the given timeframe. If corrections are nearing completion and additional time is needed, please contact your Inspector to discuss the possibility of additional time. It is our intent to work with you to see that corrections are made in a reasonable time frame. If a re-inspection reveals that corrective actions have not been completed, the Section's policy is to seek compliance using other legal options. It will always be among our highest priorities to make certain violations are corrected to ensure life and building safety.

The following are examples of various inspection processes and outcomes:

An initial inspection is performed. No violations are noted. A completed "Fire and Building Code Enforcement Inspection Report Order" will be issued by the Inspector.

An initial inspection is performed. Violations are noted during the inspection. A timeframe for corrections and a re-inspection date is noted on the order. The re-inspection reveals violations have been corrected. A completed "Fire and Building Code Enforcement Inspection Report Order" will be issued.

Facility Id

Received By Name

Signature and Date

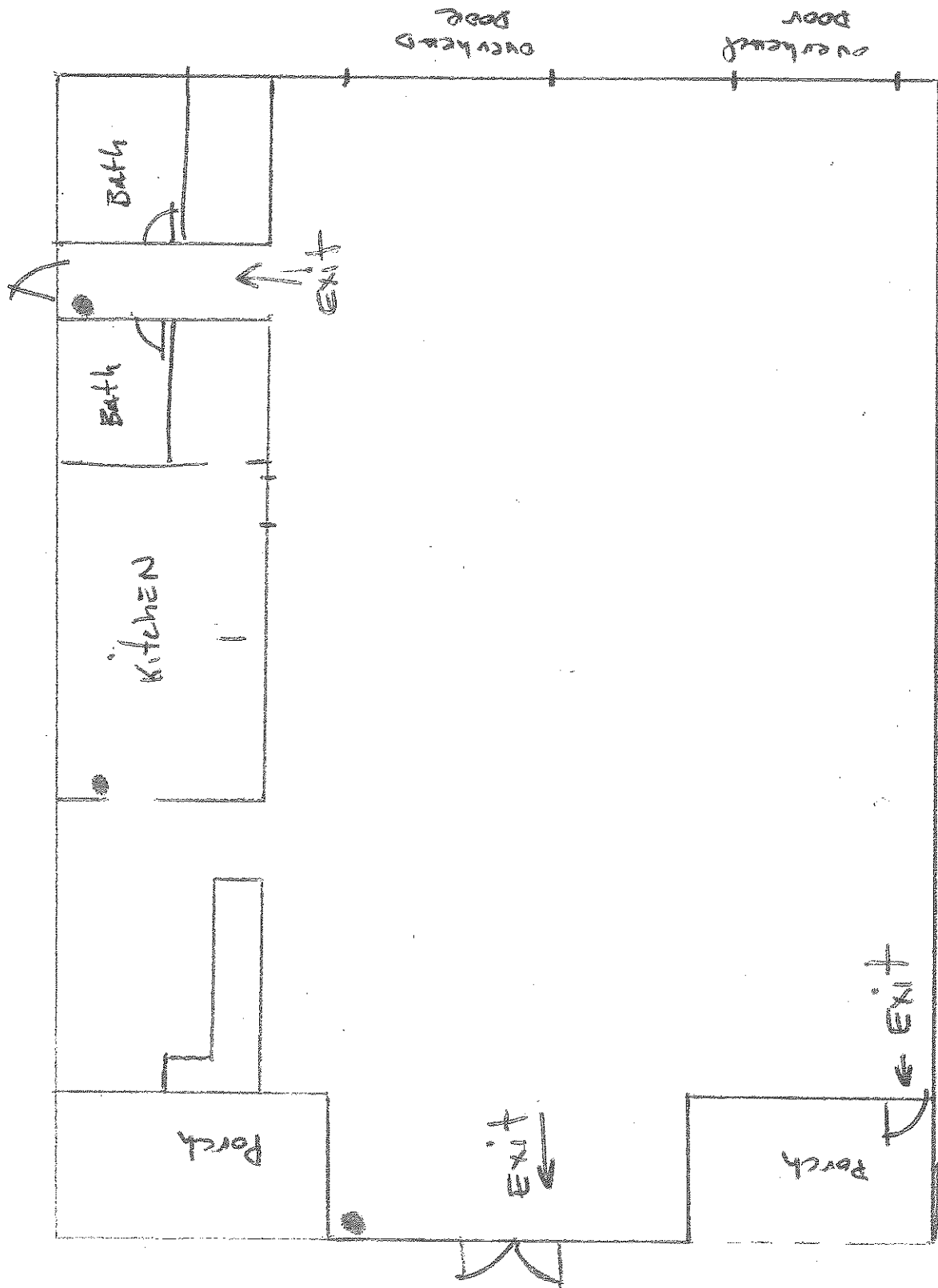
BU26119

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 502 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 502 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.



EMERGENCY PHONE NUMBERS

FIRE 911

936-7174

POLICE 911 / 723-2417 / 936-9811

AMBULANCE 911 723-2811

MEDICAL 911 936-2811