



# 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/](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)

16-12-16

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

Name of applicant	Title
Roberta Burdick	Owner
Name of organization	Telephone number
	(240) 463-5360
Address (number and street, city, state, and ZIP code)	
9108 Charred Oak Dr, Bethesda, MD 20817	

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

Name of applicant	Title
Mike Avila	Property Manager
Name of organization	Telephone number
Signature Realty Services	(812) 219-4829
Address (number and street, city, state, and ZIP code)	
1631 S Andrew Circle, Bloomington, IN 47401	

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

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

### 4. PROJECT IDENTIFICATION

Name of project	State project number	County
1331 S Winfield Rd windows		Monroe
Address of site (number and street, city, state, and ZIP code)		
1331 S Winfield Rd, Bloomington, IN 47401		
Type of project		
<input 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 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 1984 Indiana Residential Code	Specific code section R-211.2
--	----------------------------------

Nature of non-compliance (Include a description of spaces, equipment, etc. involved as necessary.)  
House was allowed to be built with windows that did not meet code. Now the owner is applying for an occupancy permit to rent the property and the owner must apply for a variance to cover this oversight.

**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:  
The house was built in 1990 and no occupant has ever suffered due to violation while living there. Local govt also seems to agree that this non-compliance will not have an adverse affect or they would not have let it been built this way in the first place.

**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.

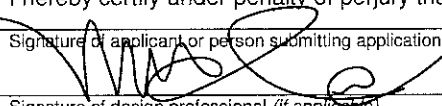
Imposition of the rule would result in an undue hardship (unusual difficulty) because of excessive costs of additional or altered construction elements.

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:  
I do not have an estimate to replace all the windows so their sizes meet code, but requiring the current owner to remedy the violations seems hugely punitive considering the finances of such an undertaking -- dismantling the house, adjusting window frames & load bearing framing, replaacing all windows, reconstructing house, etc.

**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 Michael Avila	Date of signature (month, day, year) 11/18/2016
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	Please print name	Date of signature (month, day, year)
------------------------	-------------------	--------------------------------------