



# 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)

17-03-02

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

Name of applicant <b>Alex Hoffman-----AEHoffman@dow.com</b>	Title <b>Technology Demonstration Leader</b>
Name of organization <b>Dow AgroSciences</b>	Telephone number <b>(317-) 340-0580</b>
Address (number and street, city, state, and ZIP code) <b>9330 Zionsville Road, Indianapolis, IN 46268</b>	

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

### 4. PROJECT IDENTIFICATION

Name of project <b>Dow AgroSciences Show Farm Tents</b>	State project number	County <b>Boone</b>
Address of site (number and street, city, state, and ZIP code) <b>5088 E. CR 850 N, Kirklin, IN 46050</b>		
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 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 <b>2014 Addition Indiana Fire Code</b>	Specific code section <b>3103.5</b>
Nature of non-compliance (Include a description of spaces, equipment, etc. involved as necessary.) A 40'x80' tent will be in place for longer than 30 days No Sides (6/5/2017 thru 8/31/2017) A 30'x30' tent will be in place for longer than 30 days No Sides (6/5/2017 thru 8/31/2017) A 20'x20' tent will be in place for longer than 30 days No Sides (6/5/2017 thru 8/31/2017)	

**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:  
Each tent will have no attached walls and will be open on all sides at all times, including while persons are present.

**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 Dow AgroSciences Show Farm is open to the public from 7/7/2017 to 8/25/2017. While the public is visiting, the tents provide relief from the sun and weather events. The Dow AgroSciences Show Farm is open for employees from 6/5/2017 to 8/25/2017. While employees are at the Show Farm, the tents provide relief from the sun and weather events. The tents are also used for meetings and presentations with customers and employees from 7/7/2017 to 8/25/2017

**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>Alex Hoffman</i>	Please print name <b>Alex Hoffman</b>	Date of signature (month, day, year) <b>1/27/2017</b>
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>Dennis M. Fausset</i>	Please print name <del>Don Fausset</del> <b>Dennis Fausset</b>	Date of signature (month, day, year) <b>1-30-17</b>
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DMF 1-30-17

# **Dow AggroSciences Show Farm**

## **Maps for Variance Request**

Show Farm Site 30 Acres



Dow AgroSciences

N





Fire Official

I, Bret Merriman, of SHERIDAN FIRE DEPT

Hereby certify that I have received a copy of the variance application for the 2017 Dow AgroSciences Show Farm—tents.

Bret Merriman

sherfire@logical123.net

Signed Bret Merriman FC

Date 1-31-2017



Building Official

I, NEAL "SKIP" HART, of BOONE COUNTY

Hereby certify that I have received a copy of the variance application for the 2017 Dow AgroSciences Show Farm—tents.

Skip Hart

NHART@co.boone.in.us

Signed Neal J Hart

Date 1/31/2017

~~For Scanning~~

**Indiana Department of Homeland Security  
Code Services Section  
302 West Washington Street  
Room W246  
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**Phone#317-232-1402**

*Variance application*