

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)

APPLICANT INFORMATION (Person who would be in violation if variance is not grante Name of applicant	d; usually this is the owner)
Christopher Blue Name of organization	General Manager Telephone number
Ellison Distributing Inc	(812) 683-4353
Address (number and street, city, state, and ZIP code)	(012) 000-4333
1401 Industrial Park Drive, Huntingburg, IN 47542	
2. PERSON SUBMITTING APPLICATION ON BEHALF OF THE APPLICANT (If not submitted	ed 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
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
Temp Bldg	
Address of site (number and street, city, state, and ZIP code)	
Same as above Type of project	
New ☐ Addition ☐ Alteration ☐ Change of occupancy	□ Evicting
	☐ Existing
 REQUIRED ADDITIONAL INFORMATION The following required information has been included with this application (check as applicable): 	
One (1) set of plans or drawings and supporting data that describe the area affected by the	• • •
Written documentation showing that the local fire official has received a copy of the variance	e application.
Written documentation showing that the local building official has received a copy of the var	riance 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.)	
Violation issued by:	
☐ Local Building Department ☐ State Fire and Building Code Enforcement Se	ction

7. DESCRIPTION OF REQUESTED VARIANCE		
Name of code or standard and edition involved	Specific code section	
675 IAC 12-6-3(A)		
Nature of non-compliance (include a description of spaces, equipment, etc. in No plan was filed, no foundations, electric or water were inst keep out of the weather, which is causing extra expenses an building is made from (4) 40' Steel Shipping Containers (empty)	alled, and no occupancy. The use is for temp id that the equipment can not be stored in cur	rent building. The temporary
8. DEMONSTRATION THAT PUBLIC HEALTH, SAFETY, AND W Select one of the following statements:	ELFARE WILL BE PROTECTED	
Non-compliance with the rule will not be adverse to the public h	nealth, safety or welfare; or	
Applicant will undertake alternative actions in lieu of compliance public health, safety, or welfare. Explain why alternative action		ce will not be adverse to
Facts demonstrating that the above selected statement is true:		
9. DEMONSTRATION OF UNDUE HARDSHIP OR HISTORICALL Select at least one of the following statements:	Y SIGNIFICANT STRUCTURE	
	I difficulty) because of physical limitations of the cons	etruction site or its utility services
Imposition of the rule would result in an undue hardship (unusua. Imposition of the rule would result in an undue hardship (unusua.		
Imposition of the rule would result in an undue hardship (unusua.		
Imposition of the rule would result in an under nardship (anasaa.		
Facts demonstrating that the above selected statement is true:	country of a motoriously significant part of the business	
Temporary roof was installed over (4) 40' Steel Shipping Cothat are used for specifically for shipping containers) to allow weight is 8355 lbs., current weight would average 12,500lbs extra expenses to our eq., declining business has not allowe constructed of trusses on 4' centers with a 3:12 pitch. Each Bracket that is welded to the steel container. These container	temporary coverage for a piece of our equip each. Reasoning for the temp coverage was d us to budget costs of a building to house th truss is bolted down to the top containers witl	ment. Each container tare s due to the elements causing is equipment. Roof is
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	Date of signature (month, day, year)
	Christopher Blue	04/04/2017
Signature of design professional (if applicable)	Please print name	Date of signature (month, day, year)
11. STATEMENT OF AWARENESS (If the application is submit	ted on the applicant's behalf, the applicant mus	t sign the following statement.)
I hereby certify under penalty of perjury that I am aware of this r	request for variance and that this application is b	peing submitted on my behalf.
Signature of applicant	Please print name	Date of signature (month, day, year)



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	Name of the facil	ity	1		County
BU27016	ELLISON DISTRI	BUTING , INC			DUBOIS
Address of Property		**************************************	Name of the Contact		Telephone Number
1401 INDUSTRIAL PARK	DR HUNTINGBURG	47542	CHRISTOPHER BLUE		(812) 683-4353
Email					Inspection Date
cblue@ellisondistributing	g.com				01/05/2017
Inspection Category		Inspection Type		Inspection Status:	
UNFILED CONSTRUCTIO	N DESIGN RELE	INITIAL	•	VIOLATION	
Name of the Inspector	CARL DEEL	Phone: 3174173698			
Email: cdeel@dhs.in.gov					

Violations

VIO- LATION NUMBER	RULE OR INDIANA CODE SECTION VIOLATED	DESCRIPTION OF VIOLATION	DATE BY WHICH VIOLATION MUST BE CORRECTED
1	675 IAC 12-6-3(a)	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. Construction of a class 1 structure without the required Construction Design Release.	

Inspection Notes:

Owner has constructed a class 1 structure using 2 shipping containers stacked on each side for the exterior supporting walls and added trusses on top roof system. Building will be used for one to two years for storage of a crane.

Facility Id Received By Name Signature and Date
BU27016

1/12/17







