



# 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)  
17-08-03

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

Name of applicant <b>NEIL PRAZNIK</b>	Title <b>OWNER</b>
Name of organization	Telephone number <b>(330) 310-6204</b>
Address (number and street, city, state, and ZIP code) <b>2745 FIRST ST #1703 FORT MYERS FLORIDA 33916</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>NEIL PRAZNIK (RENTAL VARIANCE WINDOWS)</b>	State project number	County <b>HOUROE</b>
Address of site (number and street, city, state, and ZIP code) <b>455 E WYLLIE FARM ROAD BLOOMINGTON INDIANA 47401</b>		
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
	IRC Sec 210.2

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

WINDOW EGRESS SEE ATTACHED

**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 *Few INCHES. Joints*

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 WINDOWS MISS THE CRITERIA ONLY ON OPENABLE.  
ALL OTHER CRITERIA MET. (2 INCHES)

**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:

**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)
	NEIL PRAZNIK	6-29-17
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)
	NEIL PRAZNIK	6-29-17



**City Of Bloomington**  
**Housing and Neighborhood Development**

CYCLE INSPECTION REPORT

7207

Owner

Praznik, Neil P.  
2745 First St. #1703  
Ft Myers, FL 33916

Agent

Updike, Lynn  
12713 Bristow Lane  
Fishers, IN 46037

Prop. Location: 455 E Wylie Farm RD  
Number of Units/Structures: 1/1  
Units/Bedrooms/Max # of Occupants: Bld 1: 1/3/3

Date Inspected: 06/07/2017  
Primary Heat Source: Gas  
Property Zoning: PUD  
Number of Stories: 2

Inspector: Jo Stong  
Foundation Type: Slab  
Attic Access: No  
Accessory Structure: None

The Monroe County Assessors records indicate that this structure was built in 1994. These are the minimum egress requirements for One and two Family Dwellings built or altered between 1990 and 1996:

Clear opening height: 24"  
Clear opening width: 18"  
Sill height: 44" above finished floor  
Openable area: 4.75 sq. ft.

These are the Existing Egress Window Measurements in all sleeping rooms (single-hung):

Height: 22 inches  
Width: 27 ¼ inches  
Sill Height: 29 inches  
**Openable Area: 4.16 sq. ft.**

The emergency egress windows do not meet the minimum requirements for a one and two family dwelling/multi-unit structure built in 1994. The relevant code is the 1990 Indiana Residential Code, Sec.210.2

For that reason, the City will not issue a rental permit until either the window is altered or replaced to meet the code requirement at the time of construction, or an egress variance is received from the Indiana Fire Prevention and Building Safety Commission. BMC-16.04.020 (b).



**City Of Bloomington**  
**Housing and Neighborhood Development**

RENTAL INSPECTION INFORMATION

Praznik, Neil P.  
2745 First St. #1703  
Ft Myers, FL 33916

RE: 455 E Wylie Farm RD

Please find the enclosed Rental Inspection Report which contains pertinent information about the Cycle Inspection that was recently conducted at the above referenced property. The inspector has listed all noted violations and recommendations on the enclosed Rental Inspection Report. **You have sixty (60) days from the date of this letter to correct the violations listed on the report.**

Once violations have been corrected, it is your responsibility to call the Housing and Neighborhood Development office within this 60 day window but no later than \_\_\_\_\_ to schedule a re-inspection. You have the right to appeal any violation of Bloomington Municipal Code Title 16 noted on the rental inspection report to the Board of Housing Quality Appeals.

This report is issued in accordance with BMC 16.10.020 and 16.10.040 of the Residential Rental Unit and Lodging Establishment Inspection Program. Residential Rental Occupancy Permits will not be issued until all interior and exterior violations have been corrected, and all fees have been paid. Bloomington Municipal Code requires that all violations of all Titles of the BMC must be in compliance before a permit will be issued. Please be advised that non-compliance by the deadlines listed in this letter may limit the permit period to a maximum of three (3) years.

If the owner's or agent's contact information has changed since your last inspection, please submit a new registration form to the HAND Department. The registration must be signed by the owner of the property, not the agent. All rental forms and documents can be found at [www.bloomington.in.gov/hand](http://www.bloomington.in.gov/hand). If you do not have access to the internet, you may contact **HAND at 812-349-3420 and forms will be provided.**

If you have any questions regarding the permit process, please call weekdays between 8:00 a.m. and 5:00 p.m., at (812) 349-3420.

Sincerely,

Housing & Neighborhood Development

Encl: Inspection Report

Xc: Updike, Lynn: 12713 Bristow Lane, Fishers, IN 46037

401 N Morton St  
Bloomington, IN 47404  
Fax (812) 349-3582

City Hall

[bloomington.in.gov](http://bloomington.in.gov)

Rental Inspection (812) 349-3420  
Neighborhood Division (812) 349-3421  
Housing Division (812) 349-3401