



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)

17-08-05

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

Name of applicant	Title
Roger Distler	Owner
Name of organization	Telephone number
SEE USA, LLC/SIC, Inc.	(317) 716-3108
Address (number and street, city, state, and ZIP code)	
P.O. Box 534 Cayuga, IN 47928	

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

Name of applicant	Title
RV Young	Contractor
Name of organization	Telephone number
RV Young Construction and Consulting, Inc.	(912) 547-5084
Address (number and street, city, state, and ZIP code)	
96492 Chester Road Yulee, FL	

3. DESIGN PROFESSIONAL OF RECORD (If applicable)

Name of design professional	License number
TOM ALLEN	ARO0037852
Name of organization	Telephone number
SUSAN MAY ALLEN, Architect	(812) 597-4393
Address (number and street, city, state, and ZIP code)	
8759 LICK CREEK RD MORRISTOWN IN 46160	

4. PROJECT IDENTIFICATION

Name of project	State project number	County
Fazolis	2016-804	Boone
Address of site (number and street, city, state, and ZIP code)		
6378 Crane Drive Whitestown, IN 47968		
Type of project		
<input type="checkbox"/> New <input type="checkbox"/> Addition <input checked="" 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 904/308	Specific code section ANSI 1771
Nature of non-compliance (Include a description of spaces, equipment, etc. involved as necessary.) Drive Thru Height and Reach Requirement	

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:
Ok for Temporary Certificate of Occupancy

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.

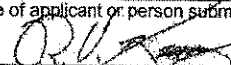

Imposition of the rule would result in an undue hardship (unusual difficulty) because of excessive costs of additional or altered construction elements.

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:

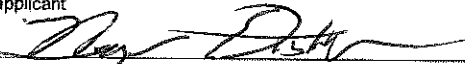
10. STATEMENT OF ACCURACY

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 R V Young	Date of signature (month, day, year) 6/15/2017
Signature of design professional (if applicable) 	Please print name Tom Allen	Date of signature (month, day, year) 6/15/2017

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 Roger Distler	Date of signature (month, day, year) 6/15/2017
---	------------------------------------	---

11:30

Permit #: 2016-904

The Town of Zionsville, Indiana
Notice of Inspection

TYPE: FidAL (Rein)
(Requested Inspection)

Contact Power Co: Date _____
REMC _____ CInergy _____

Date Called In: 2/23
Date Wanted: _____

Builder: FAZOLIS
Builder Phone: _____
Builder Fax: _____

LOCATION

Lot #: _____ Subdivision: _____
Address: 6378 Crane Dr

Approval to Proceed

Corrections & Re-inspect Required

IMC - 403 - Roof top Mechanical Access

904 / 308 - Drive from Height and Reach Requirement
ANSI 117.1

OK for temp Copo

Temp Copo Expires 6/1/17

[Signature] 2/23/17
Building Inspector Date

Do Not Remove This Notice