



**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)

18-05-04

**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)	
295 Harrison Court, Danville Indiana 46122	

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

Name of applicant	Title
Jon Aiello	Chief Operating Officer
Name of organization	Telephone number
J&K FFFI 3, LLC.	(317) 490-3853
Address (number and street, city, state, and ZIP code)	
315 US Highway 31 South Greenwood, Indiana 46142	

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

Name of design professional	License number
Tom Allen	AR00032852
Name of organization	Telephone number
Susan May Allen Architects	(812) 597-4393
Address (number and street, city, state, and ZIP code)	
8759 Lick Creek Rd Morgantown, Indiana 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 46075		
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

IMC 403

Specific code section

Roof Top Mechanical access

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

Original approved plans submitted to both State & City reflected a basic railing around HVAC rooftop Units. We have since been advised we need full Platform and ladder & Railing system estimated to cost in Excess of \$30,000. This was an existing building and some HVAC was existing and one was added. The design of the roof did not change from existing & the Starbucks & gas station that are adjacent have no railing or platform around their rooftop units. Requiring us to add this now, would possibly force us into closure as we cannot afford to add something to this existing business that clearly was not a requirement when the adjacent tenants did their build out.

**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:

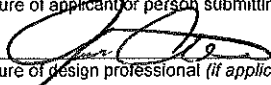
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- Imposition of the rule would prevent the preservation of an architecturally or a historically significant part of the building or structure.

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

Jon Aiello

Date of signature (month, day, year)

02/27/2018

Signature of design professional (if applicable)

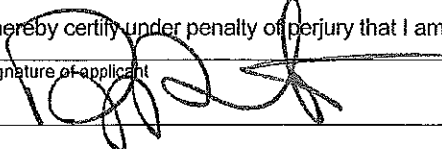
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Date of signature (month, day, year)

**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

Roger Distler

Date of signature (month, day, year)

02/27/2018

11:50

Permit #: 2016-904

The Town of Zionsville, Indiana  
Notice of Inspection

TYPE: Final (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 Lane Height and Reach Requirement  
ANISE 117.1

OK for temp Copo

Temp Copo expires 6/1/17

[Signature] 2/23/17  
Building Inspector      Date

**Do Not Remove This Notice**

## Hayes, Blake

---

**From:** Mike Lathrop <MLathrop@zionsville-in.gov>  
**Sent:** Tuesday, April 24, 2018 11:24 AM  
**To:** Hayes, Blake  
**Cc:** jaiello.coo@gmail.com; Joshua Frost; Adam Holman  
**Subject:** Variance Number/ID 18-05-04 - Fazolis

\*\*\*\* This is an EXTERNAL email. Exercise caution. DO NOT open attachments or click links from unknown senders or unexpected email. \*\*\*\*

---

Good morning Blake- Please accept this email as acknowledgement of the variance filed as 18-05-04.

Thank you.

*Michael Lathrop  
Building Inspector  
Department of Planning & Economic Development  
Town of Zionsville  
1100 West Oak Street  
Zionsville, Indiana 46077*

*Direct: 317-873-8248  
mlathrop@zionsville-in.gov*



**Hayes, Blake**

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**From:** Joshua Frost <JFrost@zionsville-in.gov>  
**Sent:** Tuesday, April 24, 2018 12:55 PM  
**To:** Mike Lathrop  
**Cc:** Hayes, Blake; jaiello.coo@gmail.com; Adam Holman  
**Subject:** Re: Variance Number/ID 18-05-04 - Fazolis

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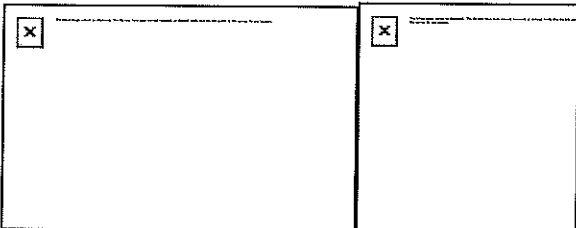
---


I have received the variance notice, too. Please accept this email as acknowledgment.

Sincerely,

Joshua Frost  
Fire Marshal,  
Deputy Chief of Fire Prevention  
Zionsville Fire Department Headquarters  
1100 W. Oak St.  
Zionsville IN 46077

317-873-5358 Office  
317-733-3020 Direct  
317-733-3022 Fax



 Please consider the environment before printing this email.

This message is confidential, intended only for the named recipients and may contain privileged communication intended solely for the receipt, use, benefit, and information of the intended recipient on this email. If you are not the intended recipients, you are notified that the dissemination, distribution or copying of this message is strictly prohibited and may result in legal liability on your behalf. If you receive this message in error, or are not the named recipients, please notify the sender at either the email address or telephone number above and delete this email from your computer. Thank you.

On Apr 24, 2018, at 11:23 AM, Mike Lathrop <MLathrop@zionsville-in.gov> wrote:

Good morning Blake- Please accept this email as acknowledgement of the variance filed as 18-05-04.

Thank you.

*Michael Lathrop*  
*Building Inspector*

# INSTRUCTIONS FOR APPLICATION FOR VARIANCE

Part of State Form 44400 (R7 / 10-13)

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CODE SERVICES SECTION  
302 West Washington Street, Room W248  
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[http://www.in.gov/dhs/fire/fp\\_bs\\_comm\\_code/](http://www.in.gov/dhs/fire/fp_bs_comm_code/)

## INSTRUCTIONS:

A variance application, accompanied by the required fee and all other required documents, shall be submitted to request a variance from a particular section of a fire, building or other code or standard adopted by the Fire Prevention and Building Safety Commission. See Indiana Code 22-13-2-11 and 675 IAC 12-5.

A separate variance application is required for each unrelated code provision\* for which a variance is being requested.

## A. VARIANCE APPLICATION

The following information is required:

1. **Applicant Information:** The applicant is the person who would be in violation of a rule of the commission if he or she maintained the conditions sought to be legalized by a variance and did not obtain the variance. This person is usually the owner of the premises in question. If the applicant is a corporation, a governmental body, or any other type of legal organization, include the name of this legal organization, as well as the name and telephone number of the organization's contact person.
2. **Person Submitting Application on Behalf of the Applicant:** The name, address and telephone number of the person submitting the application, if the applicant is not the person who is submitting the application. If the person is a corporation, a governmental body, or any other type of legal organization, include the name of this legal organization, as well as the name and telephone number of the organization's contact person.
3. **Design Professional of Record:** The name, license number, address and telephone number of the design professional for the project (if there is one). A design professional is defined as registered architect or professional engineer registered under Indiana Code 25-4 or Indiana Code 25-31, respectively. If applicable, provide the name of the organization for which the design professional works.
4. **Project Identification:**
  - (a) **Project Name:** A name that will allow the Department to readily identify the project.
  - (b) The State project number, if the variance involves a project for which plans and design specifications have been filed for a construction design release under 675 IAC 12-6.
  - (c) The address of the premises for which the variance is being sought.
  - (d) The county of the premises for which the variance is being sought.
  - (e) The type of the project. Indicate whether the variance is being sought for new construction, an addition or alteration to an existing structure, a change of occupancy of an existing structure, or an existing structure that is none of the above.
5. **Required Additional Information:** To apply for a variance, the following shall be submitted with the application:
  - A. A \$276 check made payable to the **Indiana Department of Homeland Security** for the application filing fee (\$138) and the processing fee (\$138) for a single code provision, together with an additional fee of \$69 for each additional unrelated code provision\*, where applicable.
  - B. One (1) set of plans or drawings and supporting data that describe the area affected by the requested variance and any proposed alternatives.
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\* An "unrelated code provision" is a provision of an adopted code or standard that covers subject matter that is not contingent upon or directly affecting the requirements of a different code provision for which a variance is being sought by the same applicant at the same time.
6. **Violation Information:**
  - (a) Indicate if the request for a variance is a result of correction order issued by the Plan Review Section of the Division of Fire and Building Safety. If so, include a copy of this correction order.
  - (b) Indicate if the request for a variance is a result of a Notice of Violation/Order. If so, indicate the entity that issued the Notice of Violation/Order and include a copy of this Notice of Violation/Order.
7. **Description of Requested Variance:**
  - A. Include the name of the Code or Standard, as well as the edition. (For example, *Indiana Building Code, 2003 Edition*)
  - B. Include the specific code section for which the variance is being requested. (For example, *Section 1005.2.3*)
  - C. Describe why the variance is needed (*what conditions exist that constitute a violation*).



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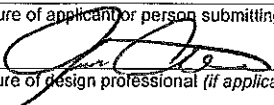
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I hereby certify under penalty of perjury that the information contained in this application is accurate.

Signature of applicant or person submitting application



Please print name

Jon Aiello

Date of signature (month, day, year)

02/27/2018

Signature of design professional (if applicable)

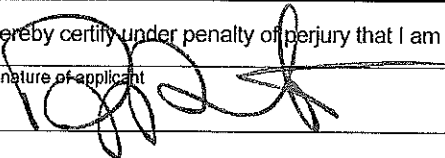
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I hereby certify under penalty of perjury that I am aware of this request for variance and that this application is being submitted on my behalf.

Signature of applicant



Please print name

Roger Distler

Date of signature (month, day, year)

02/27/2018



11:30

Permit #: 2016-904

The Town of Zionsville, Indiana  
Notice of Inspection

TYPE: Final (Rein)  
(Requested Inspection)

Contact Power Co: Date \_\_\_\_\_  
REMCMC 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 Stem Height and Reach Requirement  
ANISE 117.1

OK for Temp Copo

Temp Copo Expires 6/1/17

\_\_\_\_\_  
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\_\_\_\_\_  
\_\_\_\_\_

[Signature] 2/23/17  
Building Inspector Date

**Do Not Remove This Notice**

White Copy - Town

Yellow Copy - Inspector

Pink Copy - Site (1-03)

[Handwritten mark]

## Hayes, Blake

---

**From:** Mike Lathrop <MLathrop@zionsville-in.gov>  
**Sent:** Tuesday, April 24, 2018 11:24 AM  
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**Cc:** jaiello.coo@gmail.com; Joshua Frost; Adam Holman  
**Subject:** Variance Number/ID 18-05-04 - Fazolis

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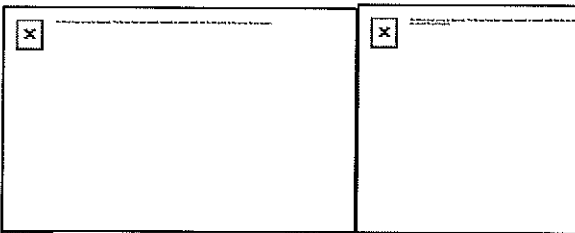
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Deputy Chief of Fire Prevention  
Zionsville Fire Department Headquarters  
1100 W. Oak St.  
Zionsville IN 46077

317-873-5358 Office  
317-733-3020 Direct  
317-733-3022 Fax



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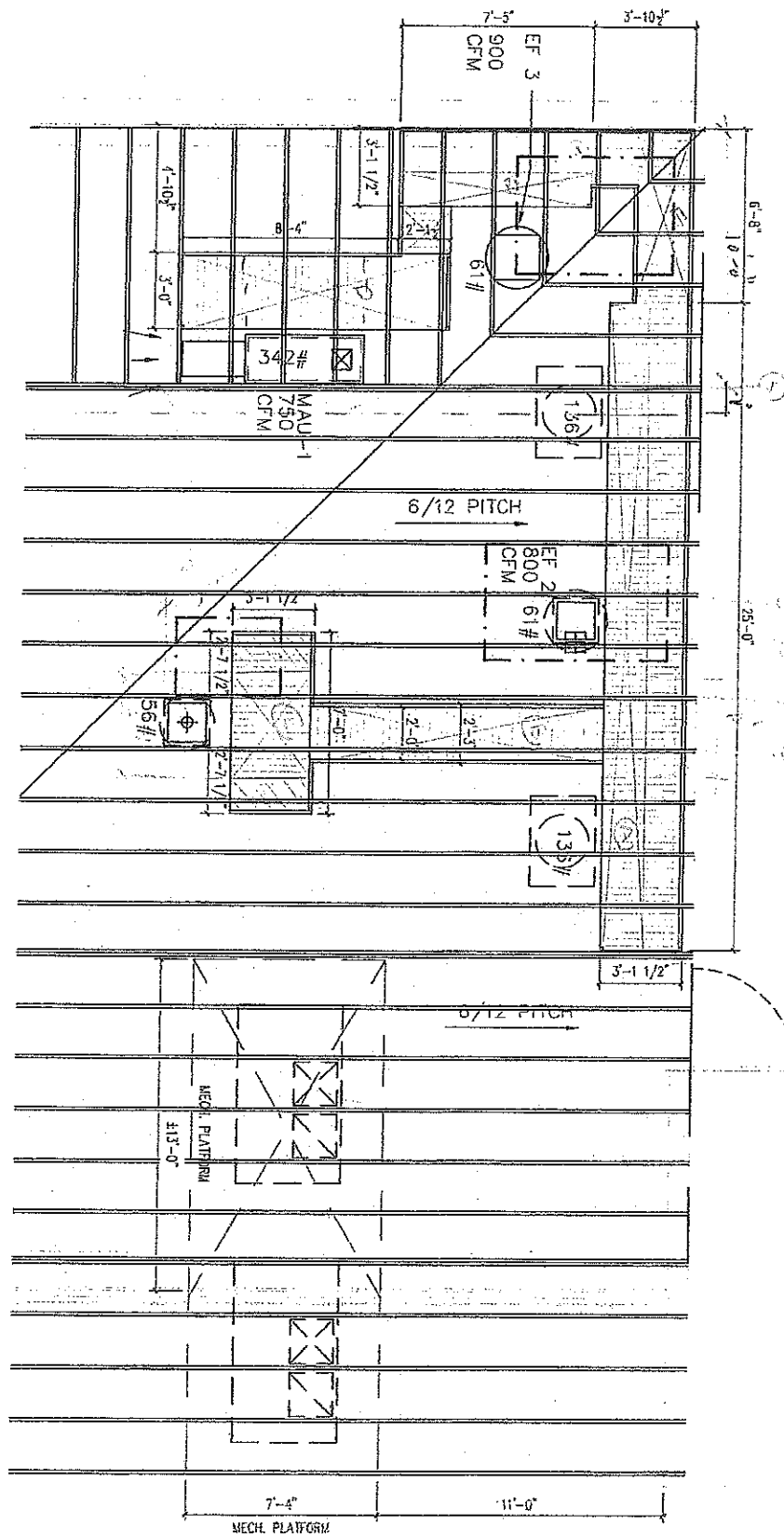
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  - A. Include the name of the Code or Standard, as well as the edition. (For example, *Indiana Building Code, 2003 Edition*)
  - B. Include the specific code section for which the variance is being requested. (For example, *Section 1005.2.3*)
  - C. Describe why the variance is needed (*what conditions exist that constitute a violation*).



TELL - 200/150  
 TEL - 100/150  
 TEL - 100/150  
 TEL - 100/150

② TRUSS ③ & ④ - WIDTH = 4'-0"  
 CATWALK AREA - 12.5 S.F.  $\times$  6#/S.F. = 75#  
 E.F. #2 - 61#  
 HOOD - 32# / 3 TRUSSES = 108# 108#  
 HOOD - 156# / 2 TRUSSES = 78# 78#  
 CEILING - 1.5#/S.F.  $\times$  4'  $\times$  20'-4" = 126# 126#  
 444# TOTAL  
 $444# / (4' \times 20'-4") = 5.46# / S.F.$  DEAD LOAD  
 TOTAL ALLOWANCE IS 10.55# / S.F.  
 PASSES

③ TRUSS - GIRDER (DOUBLE TRUSS) - WIDTH 11'-0"  
 TOTAL LOAD WIDTH 11'-0"  
 T.C. DL - 10.5#  $\times$  11'-0" = 115.5# / L.F.  
 MACH UNIT - 342# / 6' = 57# / L.F.  
 CATWALK AREA D -  
 18.25  $\times$  6# / S.F. =  
 112.5# / 6'-0" = 18# / L.F. 18# / L.F.  
 75# / L.F.  
 GIRDER TRUSS WILL  
 ALLOW 115.5# / L.F. FOR T.C. DEAD LOAD  
 PASSES