



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/pe_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)

15-03-1

1. APPLICANT INFORMATION (Person who would be in violation if variance is not granted; usually this is the owner)		
Name of applicant Randy Parman	Title Vice President, Northern Business Unit	
Name of organization Helena Chemical Company	Telephone number (515) 309-3500	
Address (number and street, city, state, and ZIP code) 4546 Corporate Dr, Suite 170, West Des Moines, Iowa 50266-5939		
2. PERSON SUBMITTING APPLICATION ON BEHALF OF THE APPLICANT (If not submitted by the applicant)		
Name of applicant Mikel Williamson	Title Estimating Manager/Sr. Project Manager	
Name of organization Curry Construction	Telephone number (217) 962-0120	
Address (number and street, city, state, and ZIP code) 1209 N Rt 45, Mattoon, IL 61938		
3. DESIGN PROFESSIONAL OF RECORD (If applicable)		
Name of design professional Cale D Jacobs	License number 11300149	
Name of organization CJ Engineering	Telephone number ()	
Address (number and street, city, state, and ZIP code) 6807 Catamaran Drive, Huntsville, OH 43324		
4. PROJECT IDENTIFICATION		
Name of project Bluffton Indiana Warehouse	State project number 373664	County Wells
Address of site (number and street, city, state, and ZIP code) 2875 W 300 N, Bluffton, IN 46714		
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):		
<input checked="" type="checkbox"/> A check made payable to the Indiana Department of Homeland Security for the appropriate amount. (see instructions)		
<input checked="" type="checkbox"/> One (1) set of plans or drawings and supporting data that describe the area affected by the requested variance and any proposed alternatives.		
<input type="checkbox"/> Written documentation showing that the local fire official has received a copy of the variance application.		
<input type="checkbox"/> 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?		
<input type="checkbox"/> Yes (if yes, attach a copy of the Correction Order.) <input checked="" type="checkbox"/> No		
Has a violation been issued?		
<input type="checkbox"/> Yes (if yes, attach a copy of the Violation and answer the following.) <input checked="" type="checkbox"/> No		
Violation issued by:		
<input type="checkbox"/> Local Building Department <input type="checkbox"/> State Fire and Building Code Enforcement Section <input type="checkbox"/> Local Fire Department		

7. DESCRIPTION OF REQUESTED VARIANCE

Name of code or standard and edition involved IBC	Specific code section 307.1.1, 307.6 and Tables 307.1 (2) and 503 and Ch 7
Nature of non-compliance (include a description of spaces, equipment, etc. involved as necessary.) Facility is classified as an H occupancy due to the presence of Toxic Chemicals. We would like to request a variance from the requirement of a fire suppression system throughout the building.	

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:
Non-Compliance not being adverse

1. Due to the physical location of the facility, and the proximity to public spaces we will not be affecting public health, safety or welfare.

Alternative Action Plans

1. The new building is currently designed for secondary spill containment in the form of curbing exceeding the requirements of the IBC.

2. The new building will be provided with appropriate fire extinguishers.

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:
Physical Limitations

Currently there is no water service to the building site that is able to sufficiently provide the needs of a new fire protection system.

1. One option would be a water holding tank that would require a new fire pump to feed the system.

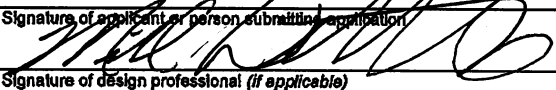
2. The other option would be to excavate a storm retention pond which would serve as the site fire suppression system. This would require the use of a new fire pump and pump house along with the new pond and system.

Excessive Cost

Due to the excessive cost of either of the above options along with the restriction of the existing water service to the site, this project would not be able to move forward if the fire suppression system is required.

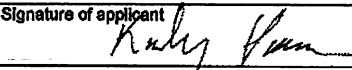
10. STATEMENT OF ACCURACY

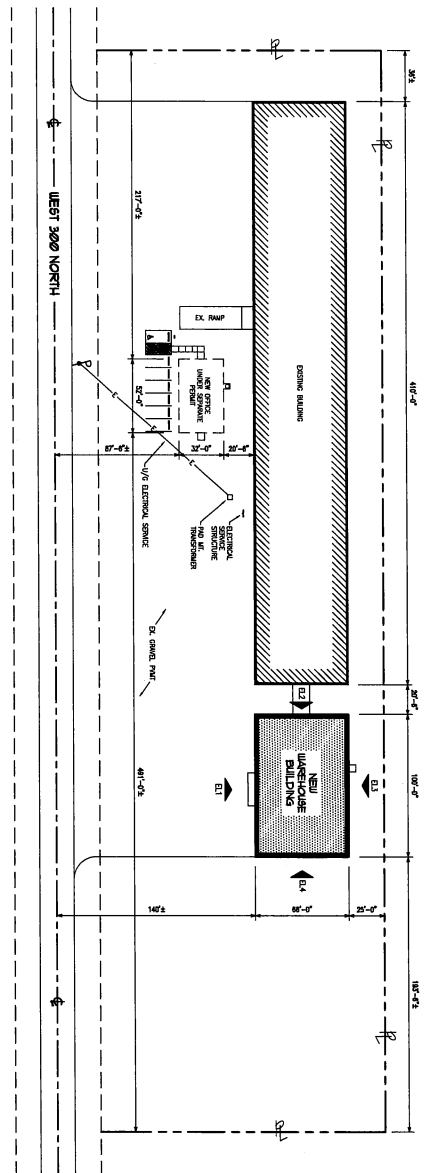
I hereby certify under penalty of perjury that the information contained in this application is accurate.

Signature of applicant or person submitting application 	Please print name Mike Williamson	Date of signature (month, day, year) 1-9-15
Signature of design professional (if applicable)	Please print name	Date of signature (month, day, year)

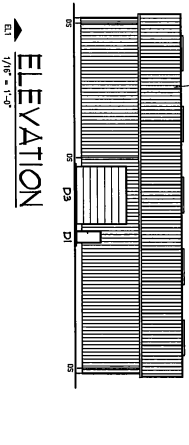
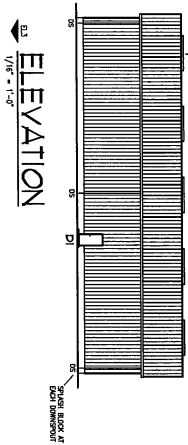
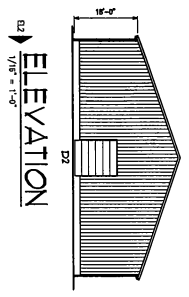
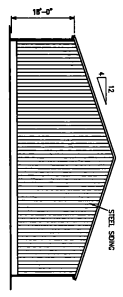
11. STATEMENT OF AWARENESS (If the application is submitted on the applicant's behalf, the applicant must sign the following statement.)

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 Randy Parman	Date of signature (month, day, year) 1-9-15
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SITE PLAN
1" = 40'-0"



SCOPE OF DETAILS
TO SHOW A NEW WAREHOUSE BUILDING

CODE DATA
BUILDING CODE - 2008 MINNA BUILDING CODE
USE ZONING S-1, INDUSTRIAL
CONSTRUCTION TYPE, VI
FLOOR FINISH, 1/2" GYPSUM BOARD
ACTUAL HEIGHT, 1 STORY, 24'-0" (MINIMUM)
BASE ALLOWANCE AREA PER WALL, 2011, 5000 SF
ACTUAL AREA, 2000 SF
APPROX. PERCENT OF AREA
APPROX. PERCENT OF AREA
APPROX. PERCENT OF AREA
APPROX. PERCENT OF AREA

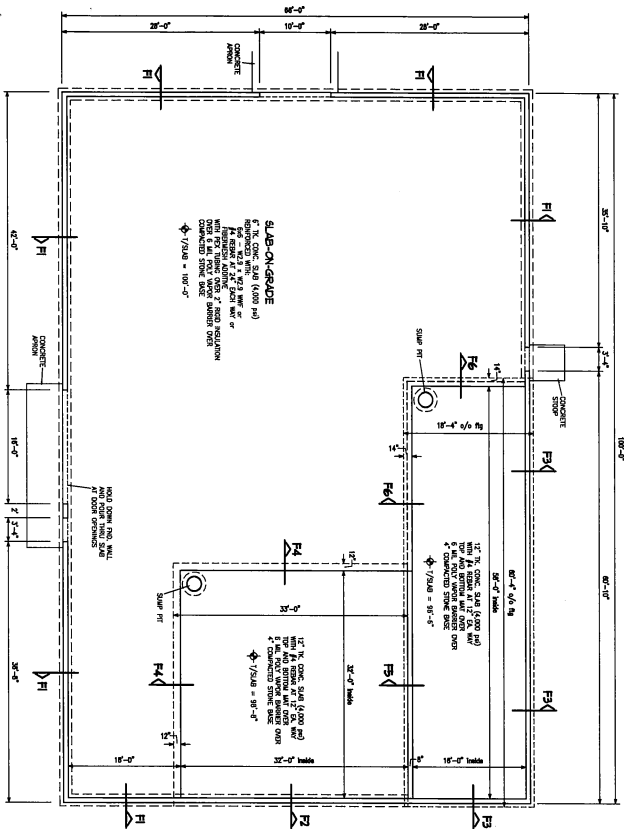
DESIGN LOADS

DESIGN CODE - 2008 MINNA BUILDING CODE
SOIL BEARING CAPACITY - 2500 PSF (ASSUMED)
ROOF - 12 LB / SF
FLOOR - 12 LB / SF
WIND - 15 MPH
SEISMIC DESIGN CATEGORY - B
SEISMIC DESIGN SPECTRUM - B
SEISMIC DESIGN OUTDOOR - B
SITE CLASS - B

SHEET INDEX

1	FOUNDATION PLAN & DETAILS
2	EXTERIOR ELEVATIONS
3	INTERIOR ELEVATIONS
4	MECHANICAL PLAN
5	ELECTRICAL PLAN
6	PLUMBING PLAN
7	GENERAL NOTES

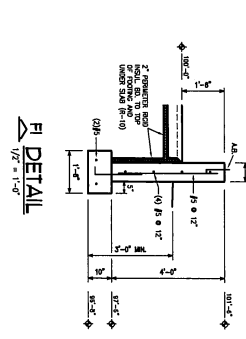
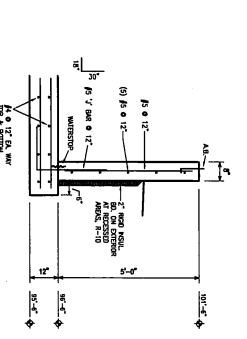
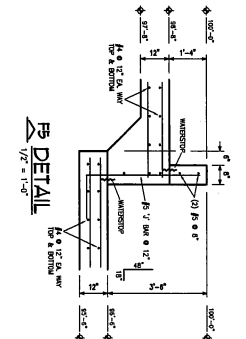
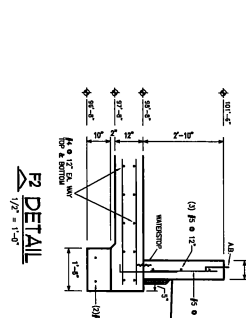
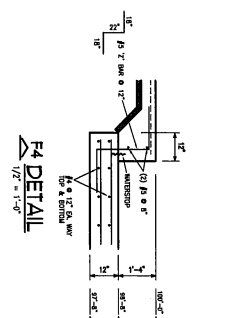
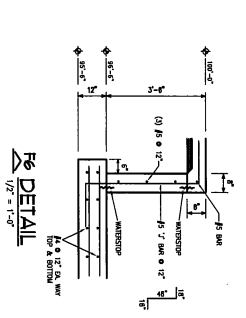
<p>NEW STORAGE BUILDING FOR HELENA CHEMICAL COMPANY W. 300 N. - BLUFFTON, IN 46714 WELLS COUNTY</p>	<p>CJ ENGINEERING 6807 Catamaran Drive, Huntsville, Ohio 43324 (937) 539-8820 Fax (937) 843-3447 cjengineering@embarqmail.com</p>		<p>Revision _____ Date _____</p> <p>Drawn _____</p> <p>Checked _____</p> <p>Date 8/20/14</p> <p>Project Name NEW STORAGE BUILDING</p> <p>Project Data SITE PLAN</p> <p>Project Number 1</p>
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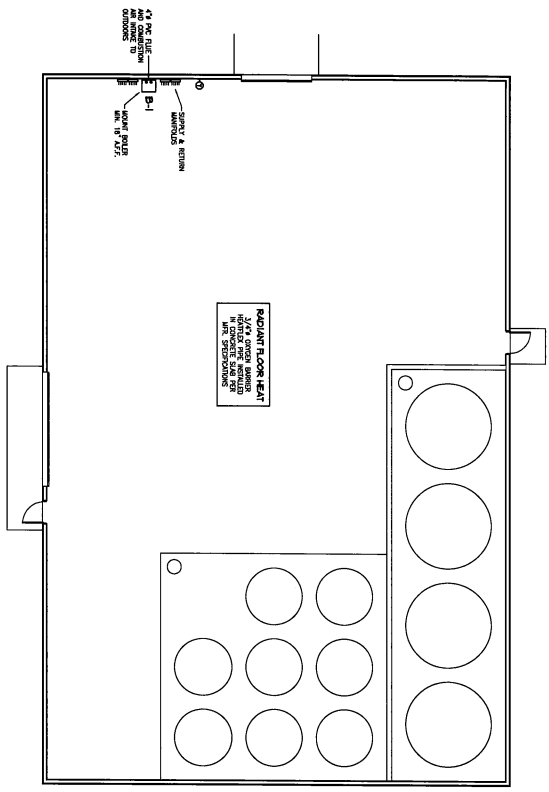
FOUNDATION PLAN



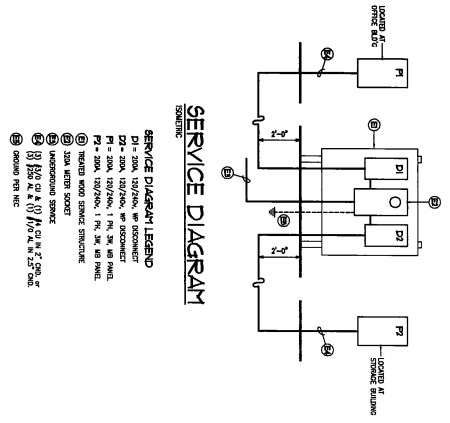
- FOUNDATION NOTES:**
1. FOUNDATION SHALL BE CONSTRUCTED ACCORDING TO ALL APPLICABLE CODES AND REGULATIONS.
 2. CONCRETE SHALL BE PLACED IN ONE LIFT UNLESS OTHERWISE NOTED.
 3. ALL CONCRETE SHALL BE PLACED IN ONE LIFT UNLESS OTHERWISE NOTED.
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 20. ALL CONCRETE SHALL BE PLACED IN ONE LIFT UNLESS OTHERWISE NOTED.



	<p>NEW STORAGE BUILDING FOR HELENA CHEMICAL COMPANY W. 300 N. - BLUFFTON, IN 46714 WELLS COUNTY</p>	<p>CJE ENGINEERING 6807 Catamaran Drive, Huntsville, Ohio 43324 (937) 539-8620 Fax (937) 843-3447 cjenineering@earthlink.net</p>	
<p>Sheet 2</p>	<p>Foundation Plan & Details</p>	<p>Date 8/20/14</p>	<p>Revision Date</p>



MECHANICAL PLAN
1/8" = 1'-0"



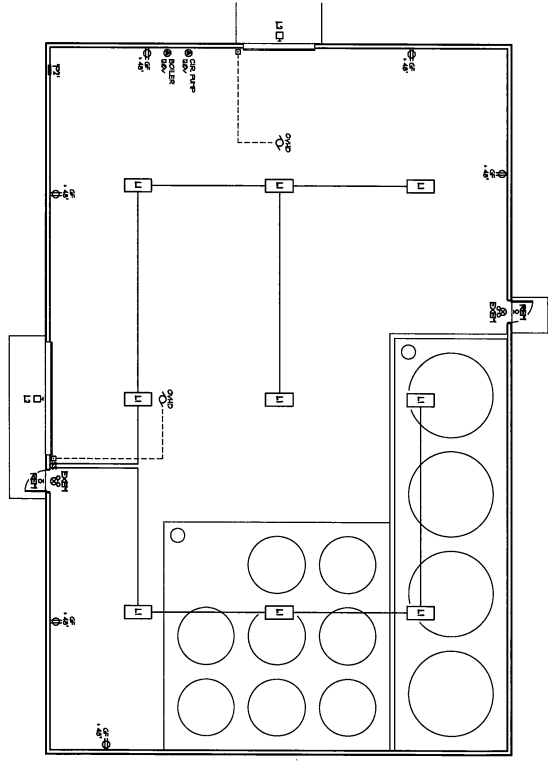
SERVICE DIAGRAM
SCHEMATIC

- SERVICE DIAGRAM LEGEND**
- D1 = 500A, 120/240V, W/ DISCONNECT
 - D2 = 500A, 120/240V, W/ DISCONNECT
 - F1 = 500A, 120/240V, 1 PH, 3W, 48 INCH
 - F2 = 500A, 120/240V, 1 PH, 3W, 48 INCH
 - ① THROUGH ROOM SERVICE STRUCTURE
 - ② DATA RACK SOURCE
 - ③ 200A MAIN SOURCE
 - ④ 300A MAIN SOURCE
 - ⑤ 1/2" DIA. W/ 1/4" DIA. W/ 1/4" DIA. W/ 1/4" DIA.
 - ⑥ 3/4" DIA. W/ 1/2" DIA. W/ 1/2" DIA.
 - ⑦ 1" DIA. W/ 3/4" DIA. W/ 3/4" DIA.
 - ⑧ 1 1/2" DIA. W/ 1 1/4" DIA. W/ 1 1/4" DIA.
 - ⑨ 2" DIA. W/ 1 1/2" DIA. W/ 1 1/2" DIA.

- MECHANICAL EQUIPMENT LEGEND**
- B-1 FINISHED FLOOR
 - 120 VOLT MAIN SERVICE, 200 AMP SERVICE
 - 300A MAIN SERVICE, 120V, 3W, 48 INCH
 - 200A MAIN SERVICE
- MECHANICAL NOTES**
- IT IS THE RESPONSIBILITY OF THE CONTRACTOR TO OBTAIN ALL PERMITS AND APPROVALS FROM THE LOCAL BUILDING DEPARTMENT AND ALL NECESSARY INSURANCE COVERAGE. THE CONTRACTOR SHALL BE RESPONSIBLE FOR THE PROTECTION OF ALL EXISTING UTILITIES AND STRUCTURES. THE CONTRACTOR SHALL BE RESPONSIBLE FOR THE PROTECTION OF ALL EXISTING UTILITIES AND STRUCTURES. THE CONTRACTOR SHALL BE RESPONSIBLE FOR THE PROTECTION OF ALL EXISTING UTILITIES AND STRUCTURES.

- LIGHTING FIXTURE SCHEDULE**
1. TYPE AND FINISH AS NOTED
 2. TYPE AND FINISH AS NOTED
 3. TYPE AND FINISH AS NOTED
 4. TYPE AND FINISH AS NOTED
 5. TYPE AND FINISH AS NOTED
 6. TYPE AND FINISH AS NOTED
 7. TYPE AND FINISH AS NOTED
 8. TYPE AND FINISH AS NOTED
 9. TYPE AND FINISH AS NOTED
 10. TYPE AND FINISH AS NOTED
- POWER FIXTURE LEGEND**
- ① SERVICE RECEPTACLE - 120V, 20 AMP
 - ② SERVICE RECEPTACLE - 120V, 20 AMP
 - ③ SERVICE RECEPTACLE - 120V, 20 AMP
 - ④ SERVICE RECEPTACLE - 120V, 20 AMP
 - ⑤ SERVICE RECEPTACLE - 120V, 20 AMP
 - ⑥ SERVICE RECEPTACLE - 120V, 20 AMP
 - ⑦ SERVICE RECEPTACLE - 120V, 20 AMP
 - ⑧ SERVICE RECEPTACLE - 120V, 20 AMP
 - ⑨ SERVICE RECEPTACLE - 120V, 20 AMP
 - ⑩ SERVICE RECEPTACLE - 120V, 20 AMP

- GENERAL ELECTRICAL NOTES**
1. ALL ELECTRICAL WORK SHALL BE IN ACCORDANCE WITH THE LATEST EDITION OF THE NEC.
 2. ALL ELECTRICAL WORK SHALL BE IN ACCORDANCE WITH THE LATEST EDITION OF THE NEC.
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 10. ALL ELECTRICAL WORK SHALL BE IN ACCORDANCE WITH THE LATEST EDITION OF THE NEC.



ELECTRICAL PLAN
1/8" = 1'-0"

<p>Sheet</p> <p>5</p>	<p>NEW STORAGE BUILDING</p> <p>FOR</p> <p>HELENA CHEMICAL COMPANY</p> <p>CR 300 N. - XXXXXXXX, IN</p> <p>WELLS COUNTY</p>	<p>CJ ENGINEERING</p> <p>6807 Catamaran Drive, Huntsville, Ohio 43324</p> <p>(937) 539-8820 Fax (937) 843-3447</p> <p>cjengineering@earthlink.com</p>	
<p>Revised</p> <p>_____</p> <p>_____</p> <p>_____</p> <p>_____</p> <p>_____</p> <p>_____</p> <p>_____</p> <p>_____</p> <p>_____</p> <p>_____</p>	<p>Date</p> <p>8/20/14</p> <p>Drawn</p> <p>_____</p> <p>Checked</p> <p>_____</p> <p>Approved</p> <p>_____</p>	<p>Discipline</p> <p>MECHANICAL</p> <p>ELECTRICAL</p>	



MICHAEL R. PENCE, Governor
STATE OF INDIANA

INDIANA DEPARTMENT OF HOMELAND SECURITY
302 West Washington Street
Indianapolis, IN 46204

Plan Review Division
317-232-1421

January 9, 2015

James Stoffel, Operations Manager
Helena Chemical
3073 S Main Street
Liberty Center, IN 46766

SENT VIA EMAIL

RE: **SBC Project No 373664** - Application for Construction Design Release
Helena Chemical - New Warehouse
2875 W 300N
Bluffton, IN 46714 – WELLS COUNTY

Dear Applicant:

We have not received a response to our correction order dated October 22, 2014 for your project. In accordance with 675 Indiana Administrative Code 12-6-12(b), you are hereby notified that your application to the Building Law Compliance Officer for a Construction Design Release – SF 37318 (R5/1-12) on the above referenced project is subject to denial. If this application is denied, any further consideration of the project may only be done under a new application for design release under section 5 of this rule, including a new application, plans and payment of appropriate fees.

Please submit appropriate corrections within ten (10) calendar days of the date of this letter.

If you have any questions, please contact me.

Sincerely,

Bonnie Robison
Plan Review Section Chief
brobison@dhs.in.gov

cc: Cale D. Jacobs – CJ Engineering
Damon Adams – IDHS DFBS Plan Review
Kevin Whitesel – IDHS DFBS Code Enforcement



An Equal Opportunity Employer

Would you like to reduce your turnaround time?

ELECTRONICALLY FILE YOUR PROJECT WITH STATE OF INDIANA at <http://www.in.gov/dhs/2650.htm>.

This on-line filing is through a secure site, you can use it to submit your project information, pay the fees and upload your project plans.

Use Internet Browser to View this report, other browsers are not compatible to view this report



REQUEST FOR ADDITIONAL INFORMATION

**DEPARTMENT OF HOMELAND SECURITY
PLAN REVIEW DIVISION
402 West Washington Street
Room E245
Indianapolis, IN 46204**

Project Number 373664	Receipt No. 675328	RFI Date 09/15/2014
Construction type	Occupancy classification	
Scope of release requested		
Type of release requested		
Project Name Helena Chemical - New Warehouse		
Street address 2875 W 300N		
City Bluffton	County WELLS	

REPORT PRINTED ON: 09/15/2014

936239

To: Owner / Architect / Engineer	FAX: 9378433447
CJ Engineering Cale D. Jacobs PE11300149 6807 Catamaran Drive Huntsville OH 43324 cjengineering@embarqmail.com	

We are holding the above referenced project from further review and release for the reasons indicated below: **(NFPA 13 and 13R (2010 Edition) will be effective starting September 27th, 2012)**

- 1 4G0607AX : Complete proposed storage details (commodity class, storage arrangement, height, etc.) shall be provided for this proposed project in accordance with 675 IAC 12-6-7(g)(20).

- 2 4G0607AZ1 : Complete information for all materials used or stored shall be provided. The information shall include the material safety data sheets, container size(s) and storage arrangement in accordance with 675 IAC 12-6-7(g)(20).

- 3 4G0607B2 : Project specific plans and specifications for the proposed tank installations shall be submitted in accordance with 675 IAC 12-6-7(g)(20), GAR.

RETURN THIS SHEET along with a minimum of 1 set of the corrected plans as soon as possible to the Code Review Official in order for us to continue processing your plans. If corrected plans and specifications are not received within 30 days of this request the application will be subject to denial by the Branch Director, Code Enforcement and Plan Review in accordance with Section 12, GAR 675 IAC 12-6-12 (b). IMMEDIATE ATTENTION AND RESPONSE IS REQUIRED.

Any questions concerning this matter should be addressed to the Code Review Official.

Code Review Official DAMON ADAMS damonadams@dhs.in.gov
Telephone Number (317)234-8771



APPLICATION FOR CONSTRUCTION DESIGN RELEASE

State Form 37318 (R15 / 1-12)

Approved by State Board of Accounts, 2012

INDIANA DEPARTMENT OF HOMELAND SECURITY
DIVISION OF FIRE AND BUILDING SAFETY
PLAN REVIEW BRANCH
302 West Washington Street, Room E245
Indianapolis IN 46204
www.in.gov/dhs/2372.htm



INSTRUCTIONS: Please type or print clearly. If multiple design professionals are involved in the certification process, submit an additional page 1 with the appropriate information.

Type of application										
<input checked="" type="checkbox"/> Standard		<input type="checkbox"/> Partial		<input checked="" type="checkbox"/> Foundation Request						
PROJECT LOCATION (Must Be Complete and Accurate)										
Name of project New Office			Closest intersecting street or road 300 west 300 north							
Address (site location, number and street) 2875 west 300 north			Suite or floor		Direction FROM intersection TO project <input type="checkbox"/> North <input type="checkbox"/> South <input checked="" type="checkbox"/> East <input type="checkbox"/> West					
City Bluffton	County Wells		Is project within city limits? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Is building State owned? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No					
OWNER'S CERTIFICATE (Must Be Executed)										
As owner of the project for which this application is being filed, I hereby certify:										
1. the description of use and information contained on this application are correct;										
2. the project will be constructed in accordance with the released documents and applicable rules of the Fire Prevention and Building Safety Commission; and										
3. any changes to the released documents will be filed with the Indiana Department of Homeland Security, Division of fire and Building Safety, Plan Review Branch.										
Authorized signature James Stoffel			Date (month, day, year) 8-25-14							
Name (typed or printed) James Stoffel			Title Operations Manager							
Telephone number (260) 694-6926		Fax number (260) 694-6320		E-mail address stoffel.j@helenachemical.com						
Name of owner or business Helena Chemical Company			Facility use Office use							
Address (number and street, city, state, and ZIP code) 3073 South Main Street Liberty Center, IN. 46766										
Foundation Requested - I agree to take full responsibility for removing and replacing any construction found, by plan examination or by inspection, to be in violation of the building codes. I further agree not to proceed with above grade construction until the complete building plans and specifications have been reviewed and released by the Indiana Department of Home Land Security, Division of Fire and Building Safety, Plan Review Branch.										
DESIGN PROFESSIONAL CERTIFICATE										
(Must Be Executed for all new buildings or additions exceeding 30,000 Gross Cubic feet or any alteration affecting Structural Safety)										
As the design professional for the project for which this application, plans and specifications are being filed, I hereby certify:										
1. I am qualified and competent to design such buildings, structures, and systems and have attached a copy of my current registration card;										
2. the plans and specifications filed in conjunction with this application were created by me and / or by my persons under my immediate personal supervision and will comply with all applicable building laws and rules of the Commission;										
3. the project data contained on this application are correct and correspond with the plans and specifications to be filed in conjunction with this application;										
4. the design professional identified below will inspect the construction covered by this application at appropriate intervals to determine general compliance with the released documents and applicable rules of the Commission and will cause all noted deviations from released documents and code violations to be corrected or notify the owner and authorities having jurisdiction of all specific deviations and code violations; and										
5. I affirm under penalty of perjury that the representations contained herein are true and I further understand that providing false information constitutes an act of perjury, which is a Class D Felony punishable by a prison term and a fine of up to \$10,000.										
Responsibility is for the following systems:										
<input checked="" type="checkbox"/> Site		<input checked="" type="checkbox"/> Electrical		<input type="checkbox"/> Fire Suppression		<input checked="" type="checkbox"/> Foundation				
<input type="checkbox"/> Plumbing		<input type="checkbox"/> All of the above		<input checked="" type="checkbox"/> Structural		<input checked="" type="checkbox"/> Architectural		<input checked="" type="checkbox"/> Mechanical		
<input type="checkbox"/> Other										
Signature Cale D. Jacobs			Date (month, day, year) 9-2-14							
Name (typed or printed) CALE D. JACOBS			Indiana registration number PE11300149							
Telephone number (937) 539-8820		Fax number (937) 843-3447		E-mail address CJENGINEERING@EMBARMAIL.COM						
Name of firm (if applicable) CJ ENGINEERING										
Address (number and street, city, state, and ZIP code) 6807 CATAMARAN DR HUNTSVILLE, OH 43324										
Designated inspecting design professional CALE D. JACOBS			Indiana registration number PE 11300149		Telephone number (937) 539-8820					
STANDARD FILING FEE										
PROCESSING	PARTIAL	FOUNDATION	INSPECTION	LATE FILING	TOTAL					

PROJECT DATA

Part of State Form 37318 (R15 / 1-12)

FOR OFFICE USE ONLY	
SBC project number	Filing date (month, day, year)

INSTRUCTIONS: This page must be completed by the submitter.
Please answer all pertinent questions and use a separate sheet if additional space is required.

DOCUMENTS REQUIRED FOR FILING

1. One Application for Construction Design Release (*original signatures*), together with correct filing fees. (*See fee schedule.*)
2. One complete set of plans and specifications. This set will be returned to the applicant for use at the job site. Additional collated sets may be submitted and returned if stamped sets are needed for other purposes. Please limit the weight of each submitted package to 30 pounds.
 - A. Site plan showing dimensioned location of building to all property lines and to all existing buildings on the property, as well as width of any streets or easements bordering the property.
 - B. Foundation and basement plans and details.
 - C. Dimensioned floor plans for all floors.
 - D. Fire and life safety plan showing graphically or by legend the location and rating of building elements such as area separation walls, smoke barriers, fire-resistive corridor walls, stair enclosures, shaft enclosures and horizontal exits.
 - E. Wall elevations of all exterior walls including adjacent ground elevation.
 - F. Sections and details of walls, floors and roof, showing dimensions, materials, and heat transfer factors (*R-Values*).
 - G. Structural plans and elevations showing size and location of all members, truss designs showing all connection details, and all stress calculations, if specifically requested.
 - H. Room finish schedule showing finishes for walls, ceilings and floors in all rooms, stairways and corridors.
 - I. Door schedule showing material, size, thickness and fire-resistive rating for all doors.
 - J. Construction specifications (*may be on plans for small projects*).
 - K. Electrical plans, diagrams, details of service entrance, and power or lighting information required for energy conservation.
 - L. Plumbing plans showing location of fixtures, risers, drains and piping isometrics.
 - M. Mechanical plans showing location and size of ductwork, equipment, fire dampers and smoke dampers and equipment schedules showing capacity.

PROJECT DESCRIPTION (<i>Must Be Complete</i>)		FLOOR AREAS	ESTIMATED COSTS
Scope of work <input checked="" type="checkbox"/> New building <input type="checkbox"/> Addition <input type="checkbox"/> Remodeling		Total existing (<i>If applicable</i>) Square Feet	
Is this construction the result of fire or natural disaster? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Sewer <input type="checkbox"/> Existing <input type="checkbox"/> Proposed <input type="checkbox"/> Public <input type="checkbox"/> Private <input checked="" type="checkbox"/> None	Addition (<i>If applicable</i>) Square Feet	Addition (<i>If applicable</i>) \$
Fire suppression system in building <input type="checkbox"/> Full <input type="checkbox"/> Partial <input checked="" type="checkbox"/> None	Detailed suppression system plans / specs <input type="checkbox"/> Provided <input type="checkbox"/> To follow	Remodeled (<i>If applicable</i>) Square Feet	Remodeling (<i>If applicable</i>) \$
If partial, specify where*	Located in flood plain (<i>check county plan commission</i>) <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Total building area square feet 6,600 SF	Total project cost \$ 203,000.00
Building construction type and occupancy classification VB / S-1	Building height (<i>Stories</i>) 1	Number of buildings this submittal (<i>Describe if necessary</i>) * 1	Volume cubic feet (<i>Fee category E only</i>)
Indiana rehabilitation standard (<i>Chapter 34</i>) used? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Evaluation documents provided? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Use of conversion rule (<i>Rule 13</i>) proposed? <input type="checkbox"/> Yes <input type="checkbox"/> No	
Does project include: (<i>Check if Yes</i>) <input type="checkbox"/> High pile storage <input type="checkbox"/> Boiler or pressure vessel <input type="checkbox"/> Hazardous or flammable materials storage <input type="checkbox"/> Elevator or lift <input type="checkbox"/> Combustible fibers storage <input type="checkbox"/> Fireworks storage <input type="checkbox"/> Explosives storage			
Describe proposed use of facility IN DETAIL, including types of flammable or combustible materials stored or handled <p style="text-align: center; font-size: 24px;">Warehouse</p>			
Describe previous or current use of facility IN DETAIL (<i>If existing facility</i>). 			
General comments			
Number of persons employed (<i>Maximum per shift</i>) 0		Number of persons (<i>public</i>) 0	

GENERAL INFORMATION			
Has other work at this location ever been filed? <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Unknown		Does project include use of a master plan design release or a factory built modular or mobile structure? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
What year and month	Previous SBC project number	Name of manufacturer	Master plan / modular number
Has construction started? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	If Yes, has a notice of violation or investigation been issued? <input type="checkbox"/> Yes <input type="checkbox"/> No	If No, probable construction starting date? (<i>month, day, year</i>) 9/15/2014	