



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)

16-12-01

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

Name of applicant	Carson Stacy	Title	
Name of organization	Stacy's Excavating	Telephone number	(317) 650-0051
Address (number and street, city, state, and ZIP code) 28490 Ruion Rd. Arcadia IN 46030			

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		* State project number		County	Hamilton
Address of site (number and street, city, state, and ZIP code) 28490 Ruion Rd. Arcadia IN 46030					
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

LBO LFO

7. DESCRIPTION OF REQUESTED VARIANCE

Name of code or standard and edition involved Rule 13	Specific code section
Nature of non-compliance (Include a description of spaces, equipment, etc. involved as necessary.) applying for a Rule 13 Variance which states a business w/ less than 20 employees does not need a bathroom in used 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:
employees do not work on site for more than 30 min per day and there has not been a need for restroom facilities.

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:
use of noninsulated pole barn for storage of work material & machinery used in our excavating business adding a septic system & bathroom which will not be used because employees do not work @ this location would create a large burden.

10. STATEMENT OF ACCURACY

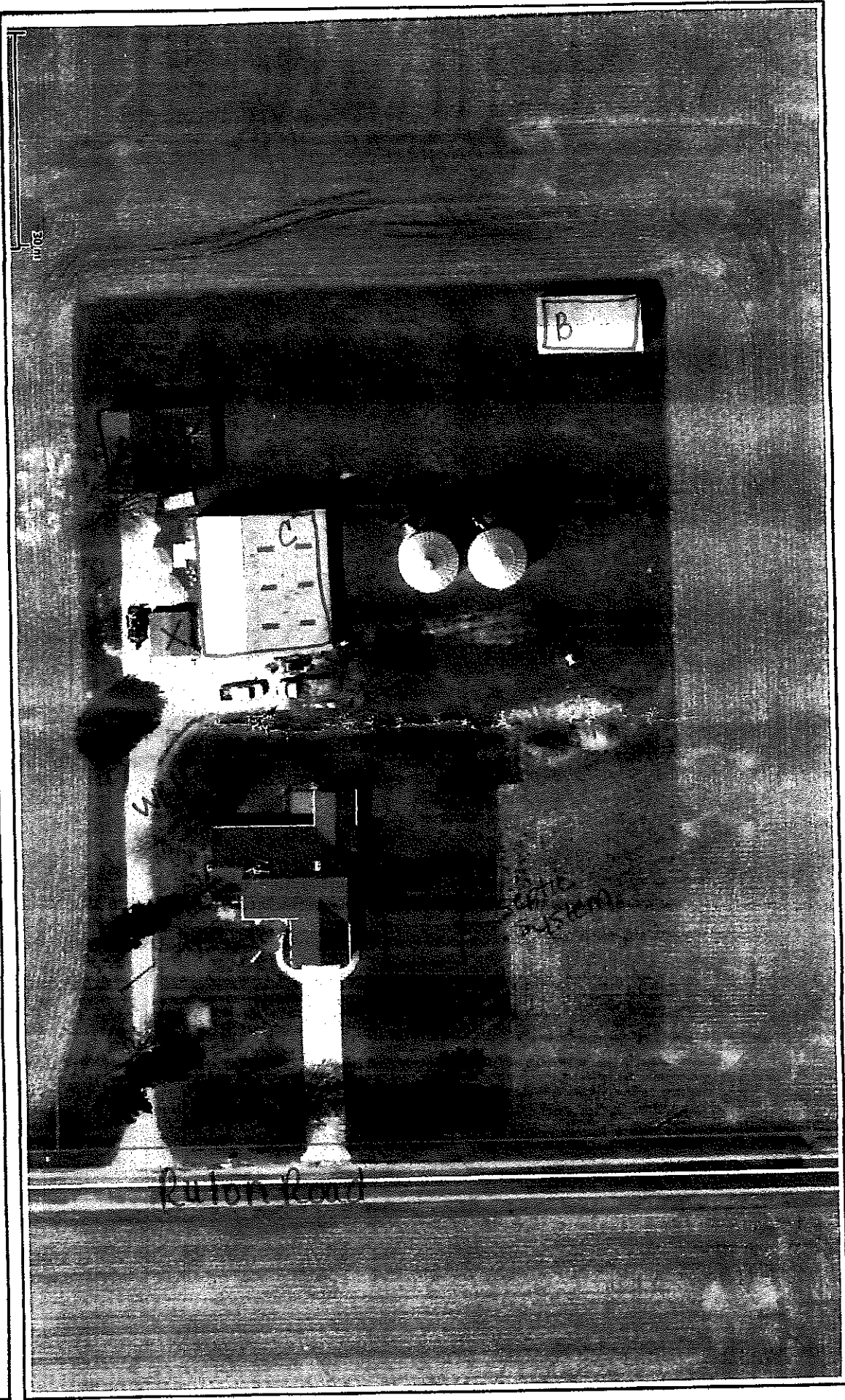
I hereby certify under penalty of perjury that the information contained in this application is accurate.

Signature of applicant or person submitting application Carson D Stacy	Please print name Carson D Stacy	Date of signature (month, day, year) 10/9/16
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.

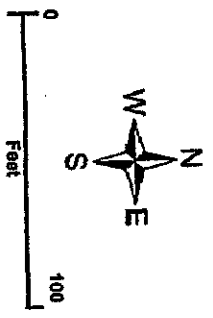
Signature of applicant	Please print name	Date of signature (month, day, year)
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Hamilton County

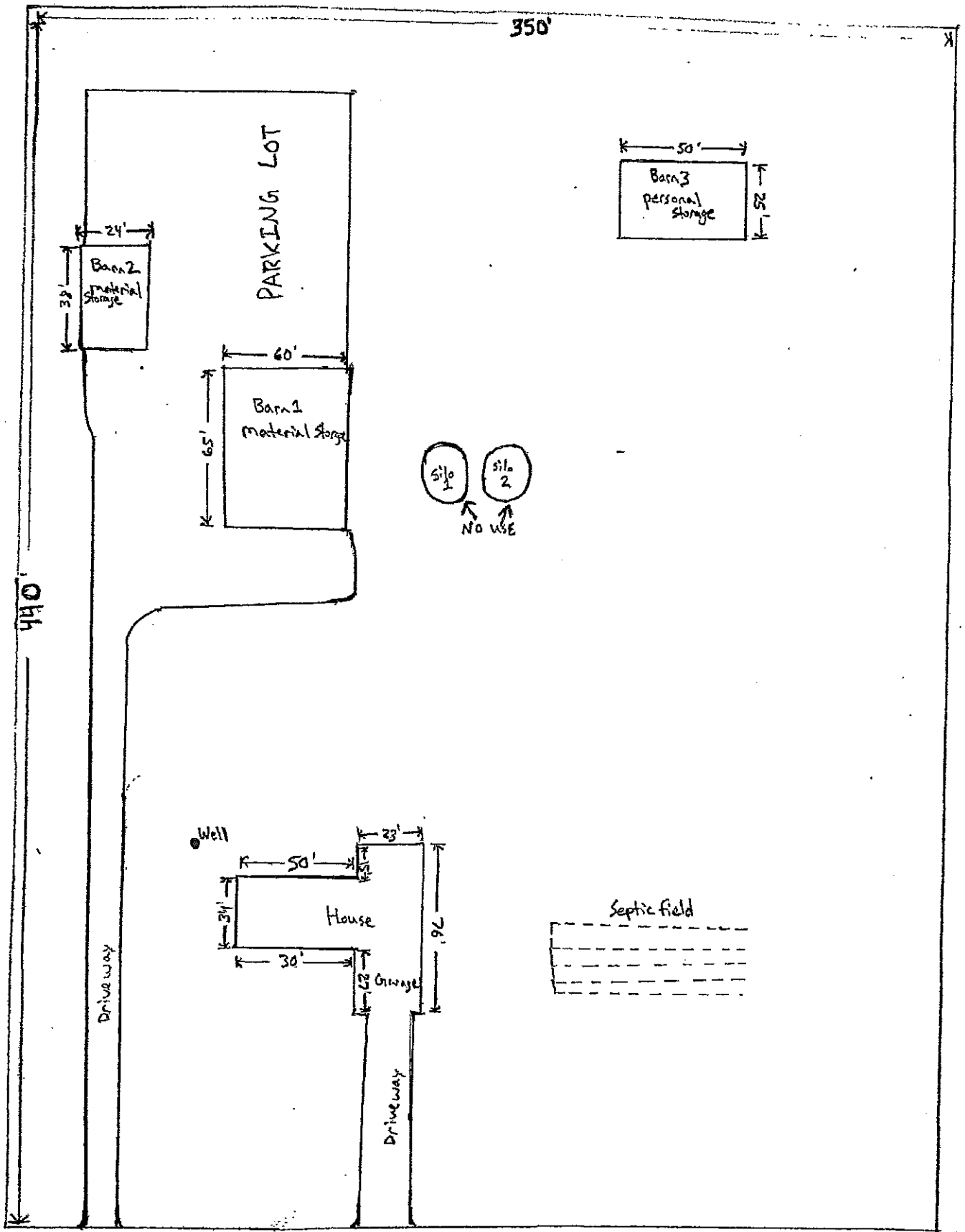
This is My Map

Printed: Mar 24, 2016

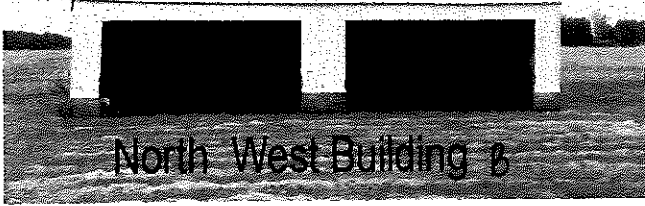


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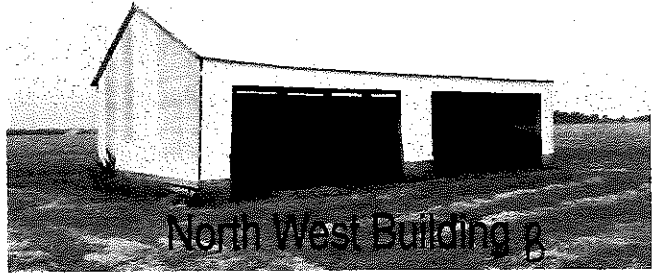
County of
Hamilton
Indiana
www.hamiltoncountyun.org



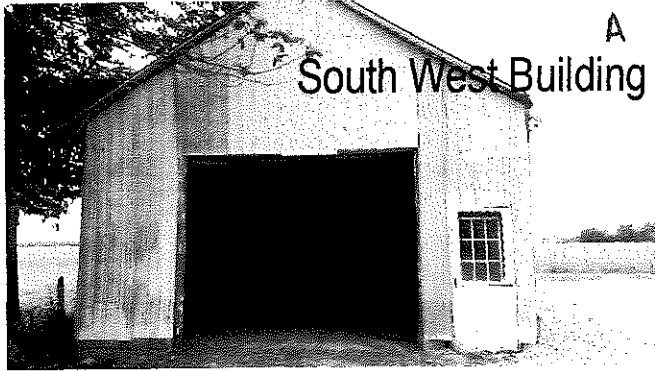
Scale
1" =



North West Building B



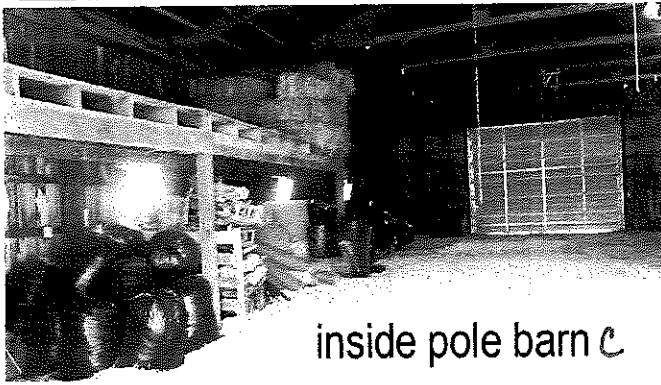
North West Building B



A
South West Building



inside South West Building A



inside pole barn C



front pole barn



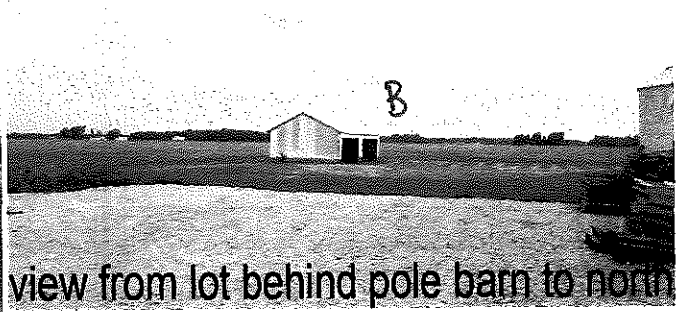
inside pole barn C



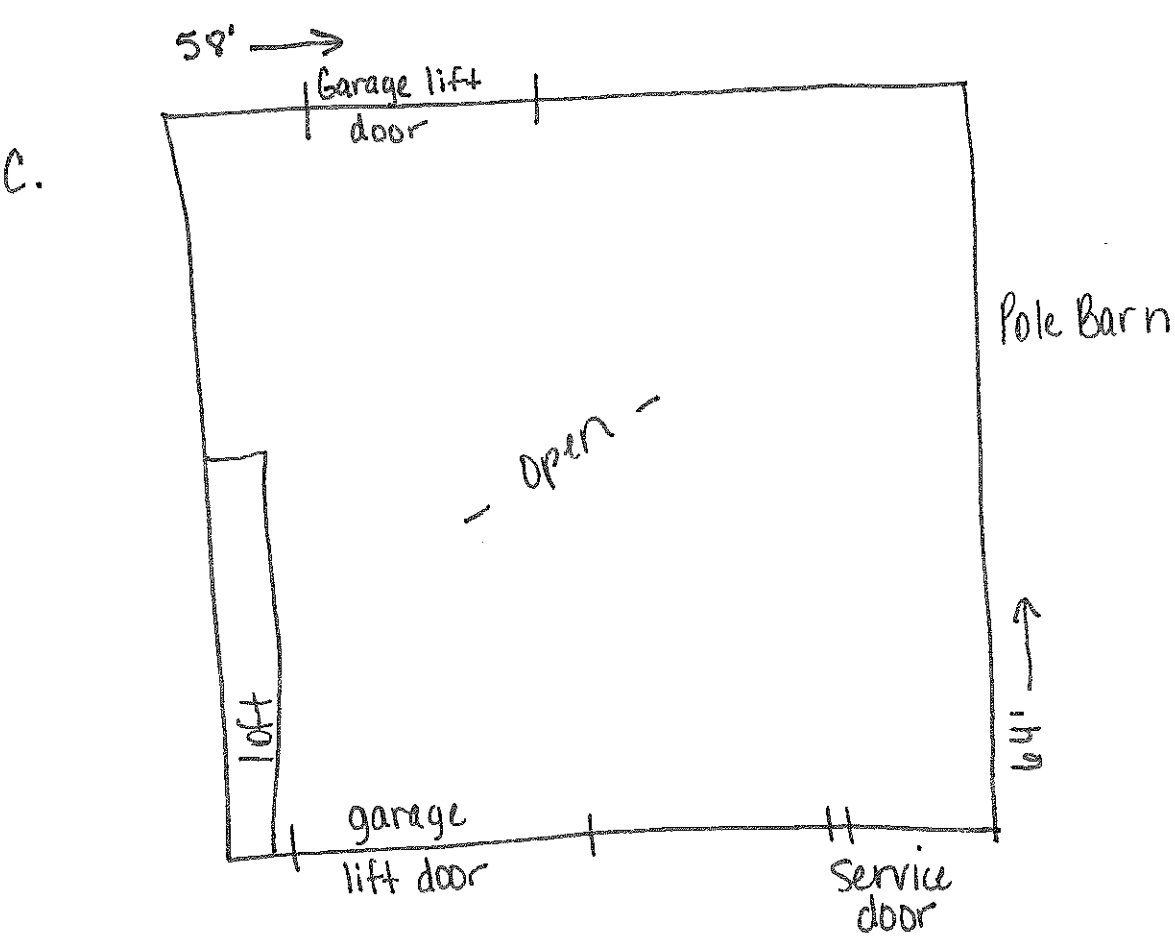
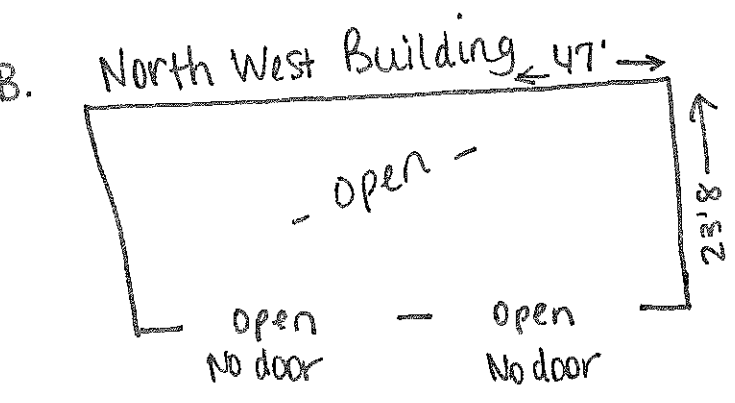
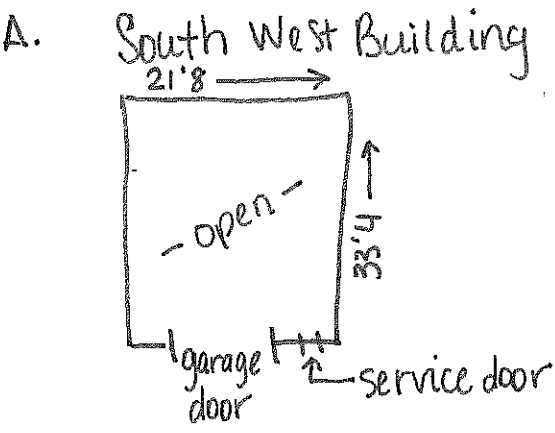
Inside pole barn C



view from NW building looking south



view from lot behind pole barn to north





- ① Does it have electricity? Yes
- ② Does it have floor drains? NO
- ③ Does it have a bathroom? NO
- ④ Does it have a second floor? NO
- ⑤ Is it heated or air conditioned? NO
- ⑥ Is it insulated? NO
- ⑦ What is the specific use of this building? material storage
- ⑧ Will any employees be inside this building? Yes
- ⑨ Size of building? height to peak, width and length.
- ⑩ Any hazardous materials stored inside? NO
 $60' \times 65'$ height to peak: 20'
width length

White River Township Fire Department
12695 E. 256 Street
Cicero, IN 46034

Mr. Carson Stacy
28490 Rulon Road
Arcadia, IN 46030

10/12/2016

Re: Application for Variance

This letter is to serve as verification that Carson Stacy did submit a copy of the Application for Variance to the White River Township Fire Department.

Any questions can be directed to Chief Carl Colbert 317-984-9370.

Thank you,

A handwritten signature in black ink that reads "Chief Carl Colbert". The signature is written in a cursive, flowing style.

Carl Colbert
Chief, White River Township Fire Department