



APPLICATION FOR VARIANCE

State Form 44400 (R6 / 6-12)

Approved by State Board of Accounts, 2012

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/



INSTRUCTION: Please refer to the attached four (4) page instructions.
 Attach additional pages as needed to complete this application.

Variance number (Assigned by department)

16-12-14 amended

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

Name of the applicant BRH GRABER	Title Owner
Name of organization MAPLE LAKE METALS	Telephone number (260) 627 0987
Address (number and street, city, state, and ZIP code) 13428 SPRINGFIELD CENTER RD GRABILL, IN ALLEN CO. 46741	

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

Name of person on behalf of the applicant SAME AS ABOVE	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 JOHN F. REYNOLDS (JFR ASSOCIATES)	License number 2949
Name of organization	Telephone number (317) 776 1524 - (317) 375-0906
Address (number and street, city, state, and ZIP code)	

4. PROJECT IDENTIFICATION

Name of project SAME AS ABOVE	State project number 375219	County Allen
Site address (number and street, city, state, and ZIP code)		
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):

- 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 & 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 FIRE WALL THROUGH ALL BDC	Specific code section
Nature of non-compliance (include a description of spaces, equipment, etc. involved as necessary) ONE 28' X 114' ADDED SECTION TO NU-CORP BLDG. TO BE CONSTRUCTED	

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:

OWNER HAS NO WAY TO SPRINKLE BLDG. FIREWALL IS RATED ROLL UP 14'X14' MAKES AREA MEETING SQ. FT ALLOWABLE.

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:

COUNTRY SITE NO WATER LINE SOURCE AVAILABLE W/THE REQUIRED GALLONS OF WATER AND PRESSURE IT REQUIRES

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 BENJAMIN GRABER	Date of signature (month, day, year)
Signature of design professional (if applicable) X JOHN REYNOLDS	Please print name	Date of signature (month, day, year) JAN. 20, 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 BEN GRABER	Date of signature (month, day, year) JAN. 20, 2017
----------------------------	--	--



APPLICATION FOR VARIANCE

State Form 44400 (R6 / 6-12)

Approved by State Board of Accounts, 2012

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/



INSTRUCTION: Please refer to the attached four (4) page instructions.
 Attach additional pages as needed to complete this application.

Variance number (Assigned by department)

16-12-14

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

Name of the applicant X BENJAMIN GRABER	Title X Owner
Name of organization MAPLE LANE METALS	Telephone number (260) 627 5000
Address (number and street, city, state, and ZIP code) 13428 Springfield Center Rd	

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

Name of person on behalf of the applicant JOHN REYNOLDS	Title ARCHITECT
Name of organization JFR ASSOCIATES	Telephone number (317) 373-0906
Address (number and street, city, state, and ZIP code) 807 COFFEE TREE CT. NOBLESVILLE IN 46062	

3. DESIGN PROFESSIONAL OF RECORD (If applicable)

Name of design professional JOHN REYNOLDS	License number 2849
Name of organization SAME	Telephone number () SAME
Address (number and street, city, state, and ZIP code)	

4. PROJECT IDENTIFICATION

Name of project MAPLE LANE METALS	State project number 375219	County ALLEN
Site address (number and street, city, state, and ZIP code) 13428 Springfield Center Rd		
Type of project: <input checked="" type="checkbox"/> New <input checked="" 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):

- 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 & 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

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

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).

Provide details that the above selected statement is true:

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.

Provide details 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: <i>Benjamin S. Graber</i>	Print name: Benjamin	Date of signature (month, day, year): 11/10/16
Signature of design professional (if applicable): <i>Benjamin S. Graber</i>	Print name: Benjamin	Date of signature (month, day, year): 11/10/16

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: <i>Benjamin S. Graber</i>	Print name: Benjamin S. Graber	Date of signature (month, day, year): 11/10/16
--	--	--

Spring Field Center Highway

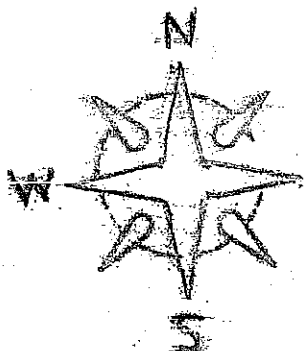
drive way 25' 5" wide

Property Line

To Property Line

To Property Line

To Property Line



114' 5"

5320 sq. ft. Proposed Addition

ENTRANCE

98.8
42.0

230'

11,594 sq. ft

Rolling Mill

299.5

Parking Area

62'

914.5'

10,830 sq. ft

11,350 sq ft

Trim machinery

Truck Dock

Shipping and receiving

4 hour fire wall

4 hour fire wall

No opening
four hour fire wall

10,830 sq.

New Coil Steel Stock

Power Room

24.5

155

104.7

114'

The 114ft. X 190ft. Nu-Corr Steel Bldg. has been approved by State

1/8" = 3.50
Scale (1/8" = 3.50)

Owner wants to add one more bay.

Plot Plan-Maple Lane Metals
13428 Spring Field Ctr. Rd
Grabil. Ind 46741