



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/fo_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)

17-03-08

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

Name of applicant	Title
Rob Staley	Executive Director
Name of organization	Telephone number
The Crossing National, Inc.	(574) 226-0671
Address (number and street, city, state, and ZIP code)	
2930 S. Nappanee St., Elkhart, In. 46517	

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

Name of applicant	Title
Jennifer Hasbrook	Administrator
Name of organization	Telephone number
The Crossing National, Inc.	(574) 226-0671
Address (number and street, city, state, and ZIP code)	
2930 S. Nappanee St., Elkhart, In. 46517	

3. DESIGN PROFESSIONAL OF RECORD (if applicable)

Name of design professional	License number
n/a	
Name of organization	Telephone number
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Address (number and street, city, state, and ZIP code)	

4. PROJECT IDENTIFICATION

Name of project	State project number	County
Elkhart Training Center -ETC		
Address of site (number and street, city, state, and ZIP code)		
1824 Reliance Drive, Goshen, In. 46526		
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 2014 Edition IFC 675 IAC 22-2.5	Specific code section Sec. 313.1 (903.3.1.1)
Nature of non-compliance (include a description of spaces, equipment, etc. involved as necessary.) Fueled equipment including, but not limited to : motorcycles, mopeds, lawn-care equipment, portable generators and portable cooking equipment, shall not be stored, operated or repaired within the building. Exceptions 1.) Building or rooms constructed to such use in accordance with the international Building Code, 2.) Where allowed section 314.3, 3.) Storage of equipment or maintenance purposes is allowed in approved locations when the aggregate fuel capacity of the stored equipment does not exceed 10 gallons (38L) and the building is equipped throughout with an automatic sprinkler system installed in accordance with Section 903.3.1.1 Note: Remove fueled equipment and fuel cans from unprotected area in facility.	

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:
The Crossing is asking for a variance from Sec 313.1 (903.3.1.1) . In additon, please add ages 14-24 years of age to existing approved variance, of which asked for ages 18-24 years of age. In addition, we are asking to allow an "indefinite" date for this variance, as we intend to stay in this facility. The variance would allow for our micro business to stay intact, of which is a major component of The Crossing School of Business and Entrepreneurship. Moreover, the nature of the training center allows for the students to run a successful tree and wood working business.

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.

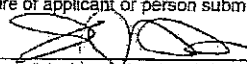
Imposition of the rule would result in an undue hardship (unusual difficulty) because of excessive costs of additional or altered construction elements.

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:
A Sprinkler system installed in this facility will cause a financial hardship for The Crossing.

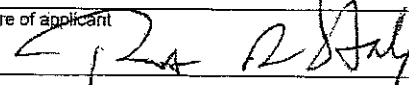
10. STATEMENT OF ACCURACY

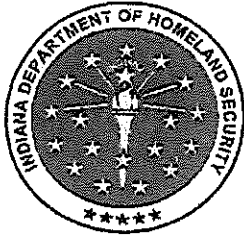
I hereby certify under penalty of perjury that the information contained in this application is accurate.

Signature of applicant or person submitting application 	Please print name Jennifer Hasbrook	Date of signature (month, day, year) 2/13/17
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 Rob Staley	Date of signature (month, day, year) 2/17/2017
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FIRE AND BUILDING CODE ENFORCEMENT INSPECTION REPORT ORDER

DIVISION OF FIRE AND BUILDING SAFETY
INDIANA DEPARTMENT OF HOMELAND SECURITY
302 WEST WASHINGTON STREET, RM E241
INDIANAPOLIS, IN 46204
TELEPHONE: 317-232-2222
WEB ADDRESS: WWW.IN.GOV/DHS

Identification Number SCB009-5	Name of the facility CROSSING EDUCATIONAL CENTER	County ELKHART
Address of Property 1202 W PIKE ST GOSHEN 46526 <i>1824 Reliance Drive</i>	Name of the Contact NATE JUDD	Telephone Number (574) 361-9080
Email mbailey@crossingcec.com		Inspection Date 11/16/2016
Inspection Category SCHOOL	Inspection Type ANNUAL	Inspection Status: VIOLATION
Name of the inspector Email: csharp@dhs.in.gov	CHAD SHARP	Phone: 3172733864

Violations

VIO-LATION NUMBER	RULE OR INDIANA CODE SECTION VIOLATED	DESCRIPTION OF VIOLATION	DATE BY WHICH VIOLATION MUST BE CORRECTED
1	Sec. 405.5 2014 Edition IFC 675 IAC 22-2.5	<p>Records shall be maintained of required emergency evacuation drills and include the following information:</p> <ol style="list-style-type: none"> 1. Identity of the person conducting the drill. 2. Date and time of the drill. 3. Notification method used. 4. Staff members on duty and participating. 5. Number of occupants evacuated. 6. Special conditions simulated. 7. Problems encountered. 8. Weather conditions when occupants were evacuated. 9. Time required to accomplish complete evacuation. <p><u>Maintain proper emergency evacuation drills. (documentation provided)</u></p>	12/16/2016
2	Sec. 906.2 2014 Edition IFC 675 IAC 22-2.5	<p>Portable fire extinguishers shall be selected, installed and maintained in accordance with this section and NFPA 10.</p> <p>Exceptions:</p> <ol style="list-style-type: none"> 1. The travel distance to reach an extinguisher shall not apply to the spectator seating portions of Group A-5 occupancies. 2. Thirty-day inspections shall not be required and maintenance shall be allowed to be once every three years for dry-chemical or halogenated agent portable fire extinguishers that are supervised by a listed and approved electronic monitoring device, provided that all of the following conditions are met: <ol style="list-style-type: none"> 2.1. Electronic monitoring shall confirm that extinguishers are properly positioned, properly charged and unobstructed. 2.2. Loss of power or circuit continuity to the electronic monitoring device shall initiate a trouble signal. 2.3. The extinguishers shall be installed inside of a building or cabinet in a noncorrosive environment. 2.4. Electronic monitoring devices and supervisory circuits shall be tested every three years when extinguisher maintenance is performed. 2.5. A written log of required hydrostatic test dates for extinguishers shall be maintained by the owner to verify that hydrostatic tests are conducted at the frequency required by NFPA 10. 	12/16/2016

		<p>3. In Group I-3, portable fire extinguishers shall be permitted to be located at staff locations.</p> <p><u>Maintain fire extinguishers to be operable and inspected.</u></p>	
3	<p>Sec. 313.1 2014 Edition IFC 675 IAC 22-2.5</p>	<p>Fueled equipment including, but not limited to, motorcycles, mopeds, lawn-care equipment, portable generators and portable cooking equipment, shall not be stored, operated or repaired within a building. Exceptions:</p> <ol style="list-style-type: none"> 1. Buildings or rooms constructed for such use in accordance with the International Building Code. 2. Where allowed by Section 314. 3. Storage of equipment utilized for maintenance purposes is allowed in approved locations when the aggregate fuel capacity of the stored equipment does not exceed 10 gallons (38 L) and the building is equipped throughout with an automatic sprinkler system installed in accordance with Section 903.3.1.1. <p><u>Remove fueled equipment and fuel cans from unprotected area in facility.</u></p>	12/16/2016

<p>Facility Id</p> <p>SCB009-5</p>	<p>Received By Name</p>	<p>Signature and Date</p>
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APPEAL RIGHTS

Please be advised that if you desire administrative review of this Order and this Order was delivered by hand, you must file a written petition for review with the Fire Prevention and Building Safety Commission at 302 West Washington Street, Rm. W246, Indianapolis, IN 46204, identifying the violations for which you seek review no later than 15 calendar days from the hand delivery date of this Order unless such date is a Saturday, Sunday, legal holiday under state statute, or day that the Department of Homeland Security's offices are closed during regular business hours, in which case the deadline would be the first calendar day thereafter that is not a Saturday, Sunday, legal holiday under state statute, or day that the Department of Homeland Security's offices are closed during regular business hours. If you do so, your petition for review will be granted and an administrative proceeding will be conducted by an administrative law judge appointed by the Fire Prevention and Building Safety Commission. If you do not file a petition for review, this Order will be **FINAL** and you **MUST** comply with its requirements.

Please be advised that if you desire administrative review of this Order and this Order was delivered by first class U.S. mail, you must file a written petition for review with the Fire Prevention and Building Safety Commission at 302 West Washington Street, Rm. W246, Indianapolis, IN 46204, identifying the violations for which you seek review no later than 18 calendar days from the mailing date of this Order unless such date is a Saturday, Sunday, legal holiday under state statute, or day that the Department of Homeland Security's offices are closed during regular business hours, in which case the deadline would be the first calendar day thereafter that is not a Saturday, Sunday, legal holiday under state statute, or day that the Department of Homeland Security's offices are closed during regular business hours. If you do so, your petition for review will be granted and an administrative proceeding will be conducted by an administrative law judge appointed by the Fire Prevention and Building Safety Commission. If you do not file a petition for review, this Order will be **FINAL** and you **MUST** comply with its requirements.

Please be further advised that you may request an opportunity to informally discuss this Order prior to filing a petition for review. Such informal discussion, or a request therefor, does not extend the deadline for filing a petition for review and, therefore, any request for an informal discussion should be made promptly, preferably by telephone, upon receipt of this Order.