



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)

17-12-11(2)

1. APPLICANT INFORMATION (Person who would be in violation if variance is not granted; usually this is the owner)		
Name of applicant	Title	
Christopher D. Sailors	Sheriff	
Name of organization	Telephone number	
Fulton County Sheriff's Department	(574) 223-2819	
Address (number and street, city, state, and ZIP code)		
200 E. 8 th St., Rochester, Indiana 46975		
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
Fulton County Law Enforcement Center (County Jail)		Fulton
Address of site (number and street, city, state, and ZIP code)		
815 Madison St., Rochester, Indiana 46975		
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):		
<input checked="" type="checkbox"/> A check made payable to the Indiana Department of Homeland Security for the appropriate amount. (see instructions)		
<input 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 checked="" type="checkbox"/> Yes (If yes, attach a copy of the Correction Order.) <input type="checkbox"/> No		
Has a violation been issued?		
<input checked="" type="checkbox"/> Yes (If yes, attach a copy of the Violation and answer the following.) <input type="checkbox"/> No		
Violation issued by:		
<input type="checkbox"/> Local Building Department <input checked="" 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	Specific code section
Indiana Building Code 2014	Sec 1008.1.3 675 IAC 13-2.6

Nature of non-compliance (Include a description of spaces, equipment, etc. involved as necessary.)
Marked exit door at Madison St. needs to be repaired so that it opens easily or apply for a variance to discontinue that exit location. This door is not used and will require a major renovation to be operational. There is another egress in that area which would be utilized in case of an emergency. After discussion with state jail inspector he has no issue with making this door a non exit until we can determine what renovations would need to be completed on the jail 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:
Recently had Indiana jail inspector on site and he stated that he did not have an issue with this not being an exit as there are two other exits in this area.

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.

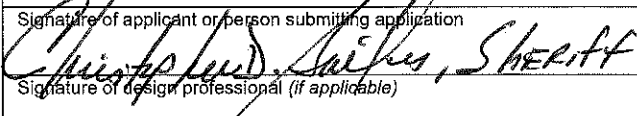
Imposition of the rule would result in an undue hardship (unusual difficulty) because of excessive costs of additional or altered construction elements.

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:
This door is in a area we would not use for evacuation of inmates. This faces the street and the door is original equipment when the building was built in 1984-1985. Our emergency evacuation plan does not incorporate this door for an emergency exit. There is another door in this room that would be utilized that would be a more viable option if need.

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	Date of signature (month, day, year)
	Christopher D. Sailors	11/07/2017
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)



APPLICATION FOR VARIANCE

State Form 44400 (R7 / 10-13)
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302 West Washington Street, Room W246
Indianapolis, IN 46204-2739

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

Variance number (Assigned by department)

17-12-11 (b)

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

Name of applicant	Title
Christopher D. Sailors	Sheriff
Name of organization	Telephone number
Fulton County Sheriff's Department	(574) 223-2819
Address (number and street, city, state, and ZIP code)	
200 E. 8 th St., Rochester, Indiana 46975	

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
Fulton County Law Enforcement Center (County Jail)		Fulton
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815 Madison St., Rochester, Indiana 46975		
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 Indiana Fire Code 2014	Specific code section 901.6-2014 Edition IFC / IAC 22-25
Nature of non-compliance (Include a description of spaces, equipment, etc. involved as necessary.) There are two (2) hose stations with hoses located in the hallways of the Fulton County Jail. These hoses are no longer in a serviceable condition as they are original hoses installed when the jail was built in 1984-1985. The hoses have never been pressure tested and more than likely are dry rotted at this time. The hoses have never been used in the 30+ years nor do I anticipate they will ever be used due to the sprinkler system and fire extinguishers that are in place. The hoses are not adequate in their present physical location to effect fire suppression of any kind. It is our wish that a variance be issued to remove the hoses.	

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 Fire Department will not use these hoses nor will they utilize the stand pipe hook up in place. We have a fire hydrant outside of the facility and in discussion with Rochester Fire Chief Tom Buter, he has indicated that they will utilize the hydrant with an engine to provide fire suppression. They will not utilize the standpipes or hoses that are in the building.

The entire building is currently sprinkled and we have dry chemical fire extinguishers located throughout the building as well as in the hose cabinets.

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.

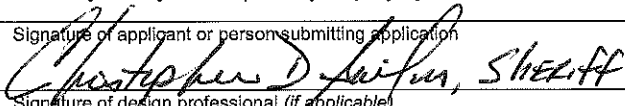
Imposition of the rule would result in an undue hardship (*unusual difficulty*) because of excessive costs of additional or altered construction elements.

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:
There is not adequate hose (currently only 50 ft.) to effectively suppress fire in the building. The cost to replace the hose and then to maintain does not make sense as they will not be used due to other fire suppression alternatives in place at this time. The sprinkler system throughout the building which is inspected, tested and maintained is adequate to suppress until the fire department can arrive. The full time department is less than (1) one mile away. Also, the number of dry chemical fire extinguishers that are in the building of which are also checked monthly and annually serviced.

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 Christopher D. Sailors	Date of signature (month, day, year) 11/07/2017
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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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

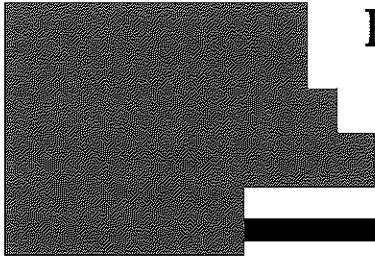
Identification Number JP11296	Name of the facility FULTON COUNTY LAW ENFORCEMENT	County FULTON
Address of Property 815 MADISON STREET ROCHESTER 46975	Name of the Contact CATHY COLLINS JAIL COMMANDER	Telephone Number (574) 224-5630
Email jail.cdr@co.fulton.in.us	Inspection Date 08/15/2017	
Inspection Category PRISON/JAIL	Inspection Type ANNUAL	Inspection Status: VIOLATION
Name of the inspector ED SORENSEN	Phone: 3175174524	
Email: esorensen@dhs.in.gov		

Violations

VIO-LATION NUMBER	RULE OR INDIANA CODE SECTION VIOLATED	DESCRIPTION OF VIOLATION	DATE BY WHICH VIOLATION MUST BE CORRECTED
1	Sec. 1008.1.3 2014 Edition IBC 675 IAC 13-2.6	The force for pushing or pulling open interior swinging egress doors, other than fire doors, shall not exceed 5 pounds (22 N). For other swinging doors, as well as sliding and folding doors, the door latch shall release when subjected to a 15-pound (67 N) force. The door shall be set in motion when subjected to a 30-pound (133 N) force. The door shall swing to a full-open position when subjected to a 15-pound (67 N) force. <u>Marked exit door at Madison street needs to be repaired so that it opens easily or apply for a variance to discontinue that exit location.</u>	09/15/2017
2	Sec. 605.1 2014 Edition IFC 675 IAC 22-2.5	Identified electrical hazards shall be abated. Electrical wiring, devices, appliances and other equipment that is modified or damaged and constitutes an electrical shock or fire hazard shall not be used. <u>GFCI outlets need to be repaired or replaced at kitchen sink, front lobby restroom.</u>	09/15/2017
3	Sec. 605.5 2014 Edition IFC 675 IAC 22-2.5	Extension cords and flexible cords shall not be a substitute for permanent wiring. Extension cords and flexible cords shall not be affixed to structures, extended through walls, ceilings or floors, or under doors or floor coverings, nor shall such cords be subject to environmental damage or physical impact. Extension cords shall be used only with portable appliances. <u>Please remove white extension cord in outer office.</u>	09/15/2017
4	Sec. 315.3.1 2014 Edition IFC 675 IAC 22-2.5	Storage shall be maintained 2 feet (610 mm) or more below the ceiling in nonsprinklered areas of buildings or a minimum of 18 inches (457 mm) below sprinkler head deflectors in sprinklered areas of buildings. Exception: Sidewall storage to a maximum depth of thirty (30) inches (seventy-six and two-tenths (76.2) centimeters) shall be acceptable to the ceiling in nonsprinklered buildings. <u>Maintain proper clearance in basement storage areas.</u>	09/15/2017

✓ 8/22/17

✓ 8/25/17



Fulton County Area Plan Commission

125 East 9th Street, Suite 012 - Rochester, IN 46975

Phone: 574.223.7667 - Fax: 574.223.3652

[http://co.fulton.in.us/advisory/
plandirector@rtcol.com](http://co.fulton.in.us/advisory/plandirector@rtcol.com)

January 26, 2017

Chris Sailors
Fulton County Sheriff
200 East 8th Street
Rochester, IN 46975

Dear Sheriff Sailors,

This letter is in regard to your request to remove two existing fire hose cabinets within the Fulton County Jail, 815 Madison Street, Rochester, Indiana. It is the Fulton County Plan Commission and Building Department's belief there is ample fire suppression in existence, without the replacement of these hoses, to allow for measurable fire safety within the jail.

Chief Thomas Butler, Rochester Fire Department, has been consulted to discuss the conclusion of our assessment and he is in agreement with the Plan and Building Department in regard to the removal of the existing fire hoses. Please feel free to contact the office if you have further questions (574) 223-7667.

Sincerely,

A handwritten signature in cursive script that reads "Casi Cowles".

Casi Cowles
Executive Director

Rochester Fire Department

2006 East State Road 14
Rochester Indiana 46975

January 26, 2017

The Rochester Fire Department has been informed by the Fulton County Sheriff Department Jail, that they will be removing the fire hoses from the cabinet on the walls. Rochester Fire has no problem with this plan. Rochester Fire Dept. pre-plan for the jail would be for us to use our attack lines off of our engines in response to a fire in the jail area. If for some reason any additional lines where needed or if our lines did not reach. The connections in the hose cabinets are a National Standard thread and we could still use our hose lines to hook up to the jails connections, for fire suppression.

A handwritten signature in black ink, appearing to read 'T. Butler', with a stylized flourish at the end.

Thomas Butler
Chief, Rochester Fire Department

