



# 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/](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)

18-85-03

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

Name of applicant QUEEN OF ANGELS	Title
Name of organization QUEEN OF ANGELS	Telephone number ( )
Address (number and street, city, state, and ZIP code) 1500 WEST STATE BLVD FORTWAYNE, IN 46808	

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

Name of applicant RICHARD MCKEO	Title BUSINESS MANAGER
Name of organization QUEEN OF ANGELS CATHOLIC CHURCH	Telephone number (260) 482-9411
Address (number and street, city, state, and ZIP code) 1500 WEST STATE BLVD FORTWAYNE, IN 46808	

### 3. DESIGN PROFESSIONAL OF RECORD (If applicable)

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

### 4. PROJECT IDENTIFICATION

Name of project REMOVE FIRE HOSES FROM CABINET	State project number	County ALLEN
Address of site (number and street, city, state, and ZIP code) 1600 WEST STATE FORTWAYNE, IN 46808		
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 INTERNATIONAL FIRE CODE 2012 EDITION	Specific code section 901.61
Nature of non-compliance (Include a description of spaces, equipment, etc. involved as necessary.) 2 FIRE HOSE CABINETS IN SCHOOL BUILDING PERMISSION REQUESTED TO REMOVE EACH HOSE	

**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:  
QUEEN OF ANGELS SCHOOL WILL PLACE A FIRE EXTINGUISHER IN EACH HOSE CABINET.

**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:  
EVERY YEAR HOSES ARE SERVICED. EXPENSE IS HIGH.  
CODE NO LONGER REQUIRES HOSES TO BE IN OUR FACILITY.

**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 Richard E. McKee	Please print name RICHARD E. MCKEE	Date of signature (month, day, year) 3-10-18
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 Richard E. McKee	Please print name RICHARD E. MCKEE	Date of signature (month, day, year) 3-10-18
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# Queen of Angels Parish

1500 West State Boulevard  
Fort Wayne, Indiana 46808-3197  
(260) 482-9411  
Fax: (260) 471-0005

To: Indiana Dept. of Homeland Security  
302 West Washington Street Room 248  
Indianapolis, IN. 46204-2739

From: Queen of Angels Catholic Church  
1500 West State Blvd  
Fort Wayne, Indiana 46808

March 12, 2018

To Whom It May Concern:

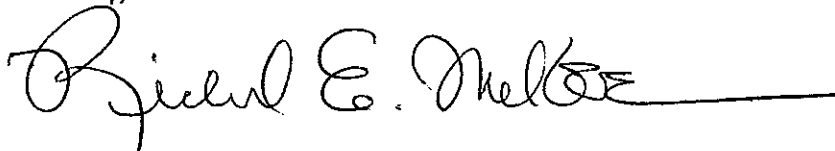
Queen of Angels Catholic Church is applying for a variance from the Indiana Department of Homeland Security.

The variance involves removing hoses from two cabinets.

A fire extinguisher will be put in each cabinet.

It is our hope that the application variance will be approved by April 1, 2018.

Sincerely,



Richard E. McKee  
Business Manager  
Queen of Angels Catholic Church

enclosures

cc: John Caywood, Building Commissioner (Certified Letter)  
200 E. Berry Suite 180 Fort Wayne, IN 46802

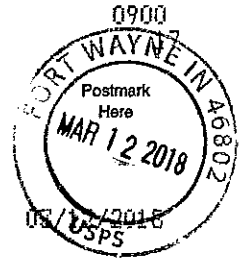
Fire Marshall Chief James Murua (Certified Letter)  
1 East Main Street Suite 901 Fort Wayne, IN 46802

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<input type="checkbox"/> Adult Signature Restricted Delivery	\$0.00
Postage	\$0.50
Total Postage and Fees	\$6.70



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 City, State, ZIP+4® FORT WAYNE IN 46802

PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions

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PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions

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