



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/ip_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)

18-06-05

1. APPLICANT INFORMATION (Person who would be in violation if variance is not granted; usually this is the owner)		
Name of applicant	Title	
David Koepper	Principle Owner	
Name of organization	Telephone number	
LaOtto Brewing LLC	(260) 897-3360	
Address (number and street, city, state, and ZIP code)		
202 S Main St, LaOtto, IN 46763		
2. PERSON SUBMITTING APPLICATION ON BEHALF OF THE APPLICANT (If not submitted by the applicant)		
Name of applicant	Title	
Joshua Brames	Co-owner	
Name of organization	Telephone number	
LaOtto Brewing LLC	(260) 897-3360	
Address (number and street, city, state, and ZIP code)		
202 S Main St, LaOtto, IN 46763		
3. DESIGN PROFESSIONAL OF RECORD (If applicable)		
Name of design professional	License number	
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
LaOtto Brewing Range Hood		Noble
Address of site (number and street, city, state, and ZIP code)		
202 S Main St, LaOtto, IN 46763		
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 checked="" type="checkbox"/> Written documentation showing that the local fire official has received a copy of the variance application.		
<input checked="" 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 type="checkbox"/> Yes (If yes, attach a copy of the Correction Order.) <input checked="" 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 2014 Edition IMC 675 IAC 18-1.6	Specific code section 675 IAC 18-1.6
Nature of non-compliance (Include a description of spaces, equipment, etc. involved as necessary.) Commercial cooking hood was required over countertop panini press that was being used to cook hamburgers (grease laden vapor).	

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:
Mr. Shaver explained to us the reason he was citing the violation and ordering corrective action was because of the hazards of grease laden vapor not being properly evacuated. He explained that if we were not cooking those unprocessed meats, he would not be requiring installation of the hood. Installation of a hood presented a unique challenge because of the close proximity of a neighboring structure. Our only option would be going up through the roof, which we fear would be cost prohibitive in our 100+ year old building as it would require significant alteration to ceiling, attic, and roof. Taking this into consideration, we decided it was in our best interest to discontinue preparation of unprocessed meats so as to eliminate the generation of grease-laden vapor. We have changed our menu completely to eliminate this hazard, and we are now purchasing and using previously prepared meats in our sandwiches.

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.

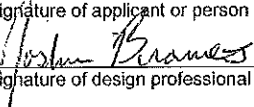
Imposition of the rule would result in an undue hardship (*unusual difficulty*) because of excessive costs of additional or altered construction elements.

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:
Installation of a hood presented a unique challenge because of the close proximity of a neighboring structure. Our only option would be going up through the roof, which we fear would be cost prohibitive in our 100+ year old building as it would require significant alteration to ceiling, attic, and roof.


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 Joshua Brames	Date of signature (month, day, year) 2/1/18
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 	Please print name David Koepper	Date of signature (month, day, year) 2/2/18
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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 BU26303	Name of the facility LAOTTO BREWING LLC	County NOBLE
Address of Property 202 S MAIN ST LAOTTO 46763		Name of the Contact DAVE KOEPPER
Telephone Number (260) 897-3360		Inspection Date 07/13/2017
Email brewers@laottobrewing.com		Inspection Status: VIOLATION
Inspection Category BUSINESS/MANUFACTURING	Inspection Type ANNUAL	Inspection Status: VIOLATION
Name of the inspector MARK SHAVER	Phone: 3174176653	
Email: mshaver@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. 7.3.1.1.1 2010 Edition NFPA 10 675 IAC 28-1-2	Fire extinguishers shall be subjected to maintenance at intervals of not more than 1 year, at the time of hydrostatic test, or when specifically indicated by an inspection or electronic notification. <u>Recertify out of date extinguishers.</u>	08/13/2017
2	2014 Edition IMC 675 IAC 18-1.6	507.2 Where required. A Type I or Type II hood shall be installed at or above all commercial cooking appliances in accordance with Sections 507.2.1 and 507.2.2 and Table 507.2. Where any cooking appliance under a single hood requires a Type I hood, a Type I hood shall be installed. Where a Type II hood is required, a Type I or Type II hood shall be installed. <u>Install required hood for commercial cooking appliances.</u>	08/31/2017
3	Sec. 904.11 2014 Edition IFC 675 IAC 22-2.5	The automatic fire-extinguishing system for commercial cooking systems shall be of a type recognized for protection of commercial cooking equipment and exhaust systems of the type and arrangement protected. Preengineered automatic dry- and wet-chemical extinguishing systems shall be tested in accordance with UL 300 and listed and labeled for the intended application. Other types of automatic fire-extinguishing systems shall be listed and labeled for specific use as protection for commercial cooking operations. The system shall be installed in accordance with this code, its listing and the manufacturer's installation instructions. Automatic fire-extinguishing systems shall be installed in accordance with the Indiana Mechanical Code (675 IAC 18). Exception: Factory-built commercial cooking recirculating systems that are tested in accordance with UL 710B and listed, labeled and installed in accordance with Section 304.1 of the International Mechanical Code. <u>Install proper suppression system under required hood.</u>	08/31/2017

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CODE SERVICES SECTION
302 W. WASHINGTON ST. W246
INDIANAPOLIS, IN 46204-2739

RE: VARIANCE REQUEST FOR

STATE PROJECT #

PROJECT ADDRESS 202 S MAIN ST
LAOTTO, IN 46763

TO WHOM IT MAY CONCERN,

THIS LETTER IS TO VERIFY MY KNOWLEDGE OF A VARIANCE REQUEST
FOR THE ABOVE REFERENCED PROJECT.

THIS REQUEST IS TO DELETE SOME OF THE CURRENT CODE
REQUIREMENTS FOR 2014 Edition IMC 675 IAC 18-1.6

Norman Lortz

(Local Building Official)

260-636-2215

(Phone number or cell number)

2090 N SR 9 Albion, IN 46701

(Address)

Noble County

(Jurisdiction)

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REQUIREMENTS FOR 2014 Edition IMC 675 IAC 18-1.6

JASON LUTTER


(Fire Chief)

260-705-5387

(Phone number or cell number)

11595 E. SR 205 Laotto IN 46763

(Address)

Swan Twp

(Jurisdiction)