

## 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/



Variance number (Assigned by department) INSTRUCTIONS: Please refer to the attached four (4) page instructions. Attach additional pages as needed to complete this application. 1. APPLICANT INFORMATION (Person who would be in violation if variance is not granted; usually this is the owner) Telephone number ivestick Show Asn 1765 4 EN 46970 2. PERSON SUBMITTING APPLICATION ON BEHALF OF THE APPLICANT (If not submitted by the applicant) Name of applicant Telephone number Name of organization + Livestock Showson Miami Address (number and street, city, state, and ZIP code) Pen, In. 46900 3. DESIGN PROFESSIONAL OF RECORD (If applicable) License number Name of design professional Lomest Name of organization Telephone number Address (number and street, city, state, and ZIP code) 4. PROJECT IDENTIFICATION State project number County Name of project Miami Address of site (number and street, city, state, and ZIP code) 'en, IN. 469-70 Type of project Existing Alteration Change of occupancy New New Addition 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. None 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.) Has a vielation been issued? Yes (If yes, attach a copy of the Violation and answer the following.) Violation issued by: State Fire and Building Code Enforcement Section Local Fire Department Local Building Department

7. DESCRIPTION OF REQUESTED VARIANCE	
Name of code or standard and edition involved	Specific code section
Nature of non-compliance (Include a description of spaces, equipment, etc. involve	d as necessary.)
The buildings in question are Sheds. I have enclosed photographs.	
2 Buildings are 12 x 24	
The other Shed/building is 10 x 16	
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:	
Fire Extinguishes have been installed	
Public is not allowed inside the buildings	
Buildings will be secured to time per year for about 4.5 hours each	
Public is not allowed inside the buildings buildings will be secured to the ground Buildings are only about 30 times per year for about 4-5 hours each	
Smoke darms have been installed.	
9. DEMONSTRATION OF UNDUE HARDSHIP OR HISTORICALLY SIGNIFICANT STRUCTURE  Select at least one of the following statements:	
The state of the s	culty) 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:  WP are: a non-profit 50)(c)3	
Utilities pose a problem The location of the spreducy does not have acres to septic as this area of the Fairgrounds is not developed due to not being used often.	
of the Fairgrounds is not developed are to not being used other.	
Buildings are not used for the public.	
10. STATEMENT OF ACCURACY	
I hereby certify under penalty of perjury that the information conta	ained in this application is accurate.
	se print name.  Date of signature (month, day, year)
	se 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 Plea	Date of signature (month, day, year)
Signature of applicant Plea	2 usty Merrist 5-23-2018

## MIAMICOUNTYPLAN/BUILDING COMMISSION 25 NORTH BROADWAY COURTHOUSE - ROOM 105 PERU, IN. 46970 765-472-3901 EXT. 1213 tgamble@miamicountyin.gov

May 23, 2018

RE: Circus City Speedway 1029W 200N, Peru, In. 46970

Indiana Department of Homeland Security Code Services Section,

This letter is to inform you that we have received a copy of the application for variance for the above referenced location as required Per State Form # 44400 Section 5 of the Application for Variance.

Section 5 also requires written documentation from a local fire official but there is none for this area as this is in a volunteer fire department jurisdiction.

If you have any questions or this is not sufficient for your requirements please phone or e-mail me so I can provide what is needed.

Sincerely,

Tammy R. Gamble

Zoning Administrator/Building Commissioner Miami County Plan/Building Commission









