



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)

18-08-01

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

Name of applicant	Title
Matt Eckert	President
Name of organization	Telephone number
Koch Development Corp.	(812) 937-4401
Address (number and street, city, state, and ZIP code)	
452 E. Christmas Blvd., Santa Claus, IN 47579	

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

Name of applicant	Title
John Adkins	Director Safety & Security
Name of organization	Telephone number
Koch Development Corp.	(812) 937-5269
Address (number and street, city, state, and ZIP code)	
452 E. Christmas Blvd., Santa Claus, IN 47579	

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
Automatic Fire Extinguishing Inspection Schedule		
Address of site (number and street, city, state, and ZIP code)		
452 E. Christmas Blvd., Santa Claus, IN 47579		
Type of project		
<input type="checkbox"/> New <input type="checkbox"/> Addition <input checked="" type="checkbox"/> Alteration <input type="checkbox"/> Change of occupancy <input 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 IFC	Specific code section 904.11.6.2	
Nature of non-compliance (include a description of spaces, equipment, etc. involved as necessary.) All inspections of automatic fire-extinguishing systems are currently in compliance with IFC 904.11.6.2 as inspected by a qualified individual and a certificate of inspection provided on a six month basis. We are seeking a variance from the requirement to inspect all kitchen automatic fire-extinguishing systems on a six months basis within all restaurants with the exception of Kringle's & Wildbeestro. All restaurants with the exception of these two are only operated May thru October (6 months) as well as waterpark restaurants are only operated May thru September (5 months). This also includes a total operating season of 120 days.		
8. DEMONSTRATION THAT PUBLIC HEALTH, SAFETY, AND WELFARE WILL BE PROTECTED		
Select one of the following statements: <input type="checkbox"/> Non-compliance with the rule will not be adverse to the public health, safety or welfare; or <input checked="" type="checkbox"/> 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: Koch Development Corp will ensure the following alternative actions in lieu of compliance with 2014 IFC 904.11.6.2. 1) All restaurant automatic Fire-extinguishing systems (27 total systems) will be inspected & serviced as required on an annual basis in March. This will include the replacement of fusible links as outlined in IFC 904.11.6.3. 2) The automatic fire-extinguishing systems in Kringle's and Wildbeestro restaurants (4 total systems) will be serviced each 5 months to ensure compliance with IFC 904.11.6.2. This will be done as these kitchens are used outside of the normal operating season as test & training kitchens.		
9. DEMONSTRATION OF UNDUE HARDSHIP OR HISTORICALLY SIGNIFICANT STRUCTURE		
Select at least one of the following statements: <input type="checkbox"/> Imposition of the rule would result in an undue hardship (unusual difficulty) because of physical limitations of the construction site or its utility services. <input type="checkbox"/> 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. <input checked="" type="checkbox"/> Imposition of the rule would result in an undue hardship (unusual difficulty) because of excessive costs of additional or altered construction elements. <input type="checkbox"/> 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: Koch Development Corp. has historically maintained the six month inspection and certification requirements of the automatic fire-extinguishing systems in all restaurants through the non-operating season. These inspections have historically occurred late March to early April & late September to Early October. The buildings each go through a winterization and cleaning process in which all food, oils, chemicals, etc. are removed and the structure is winterized starting in September for the waterpark restaurants and November for the Holiday World restaurants. The cost associated with performing the inspections on 23 total automatic fire-extinguishing systems continues to increase as the equipment associated with the systems sits dormant and not at risk of creating a fire during the non-operating season of November thru March. Through the continued annual inspection of these automatic fire-extinguishing systems, we will continue to ensure that we are complying with the intent of the regulations while still ensuring that those systems used for longer time periods are properly inspected and certified.		
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 <i>Matt Eckert</i>	Please print name Matt Eckert	Date of signature (month, day, year) 05-07-18
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 <i>John Adkins</i>	Please print name John Adkins	Date of signature (month, day, year) 05-07-18

Chaney, Sarah

From: Santa Claus Fire <scvfd@psci.net>
Sent: Monday, July 16, 2018 4:14 PM
To: DHS Variances
Cc: Chaney, Sarah; jenkins@holidayworld.com
Subject: Holiday World Variance

**** This is an EXTERNAL email. Exercise caution. DO NOT open attachments or click links from unknown senders or unexpected email. ****

07/16/2018

My name is Max Meyer Fire Chief of the Santa Claus Volunteer Fire Department. I'm writing this email acknowledging that I have received a copy of the variance application for Automatic fire suppression system inspection intervals.

Max J. Meyer
Fire Chief
Santa Claus Volunteer Fire Department

Town of Santa Claus

TOWN COUNCIL AND
OFFICE OF THE CLERK-TREASURER



90 N. HOLIDAY BLVD.
P.O. BOX 92
SANTA CLAUS, INDIANA 47579
(812) 937-2551
FAX (812) 937-2630

April 11, 2018

RE: Request for Variance Review

Holiday World & Splashin' Safari is in the process of applying for a variance regarding the six-month inspection of kitchen automatic fire-extinguishing systems throughout Holiday World & Splashin' Safari. We are interested in reducing the six-month testing requirements for 23 automatic fire-extinguishing systems to an annual inspection which would include the replacement of required fusible links. We will continue the six-month testing of four systems within Kringle's and Wildebeestro restaurants. We are including a copy of the variance application that we are sending for review by the Indiana State Fire Prevention and Building Safety Commission.

Please let me know if you have any questions or would like to review the variance request.

I Don Winkler acknowledge receipt of the above-mentioned variance application.

Signed: _____

Date: _____

4-11-2018

Thank you,

John Adkins
Director of Safety & Security