VARIANCE #	19-03-01 A & B
SBC PROJECT #	
PROJECT NAME uptown cafe	
SIGNATURES ✓	APPROPRIATE CODE/SECTION ✓
PLANS ✓	LBO NOTIFICATION ✓
NOTIFICATION OF COMM MEETING	LFO NOTIFICATION ✓
CONTACT/DATE	

STAFF COMMENTS

Already knows she will be in next meeting.

Plans are under cost in a bid.

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_be_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)* 14-03-01 (a) (b)

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

Name of applicant: Jay Merrell	Title: Owner
Name of organization: Uptown Associates	Telephone number: (317) 896-8626
Address *(number and street, city, state, and ZIP code)*: 1010 Westfield Rd, Noblesville, IN 46062	

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

Name of applicant: Tara Anker	Title: Architect
Name of organization: Peterson Architecture	Telephone number: (317) 770-9714
Address *(number and street, city, state, and ZIP code)*: 298 S 10th Street, Suite 500, Noblesville, IN 46060	

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

Name of design professional: Darren Peterson	License number: AR19500143
Name of organization: Peterson Architecture	Telephone number: (317) 770-9714
Address *(number and street, city, state, and ZIP code)*: 298 S 10th Street, Suite 500, Noblesville, IN 46060	

4. PROJECT IDENTIFICATION

Name of project: Uptown Cafe	State project number: 404749	County: Hamilton
Address of site *(number and street, city, state, and ZIP code)*: 818 & 817 E Conner Street, Noblesville, IN		

Type of project:
☐ New ☐ Addition ☒ Alteration ☐ Change of occupancy ☐ 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

(a)

7. DESCRIPTION OF REQUESTED VARIANCE

Name of code or standard and edition involved	Specific code section
International Building Code - 2012 Edition	Section 903.2.8 Group R, Sprinkler Req'd.

Nature of non-compliance *(include a description of spaces, equipment, etc. involved as necessary.)*

Second floor occupancy change from Business (B) to Residence (R-3), requires adding a sprinkler system to the entire building. We are proposing that sprinkler is not necessary and is a financial hardship.

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:

There are two (2) means of egress provided from the single-family apartment (with direct access to a public way) above the Business occupancy with a 1-hour separation.

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:

1. The water main is in the centerline of major road.
2. The water storage tank for a sprinkler system would render the basement un-usable due to size.
3. A sprinkler system has been priced but is far beyond the project budget to renovate this historic building (100+years old).
4. Owner is trying to preserve the historic tin ceiling.

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)*
	Tara Anker	01/03/19
Signature of design professional *(if applicable)*	**Please print name**	**Date of signature** *(month, day, year)*
	Darren Peterson	01/03/19

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)*
	Jay Merrell	01/03/19

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)*: 14-03-01 (a) (b)

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

Name of applicant: Jay Merrell	Title: Owner
Name of organization: Uptown Associates	Telephone number: (317) 696-8626
Address *(number and street, city, state, and ZIP code)*: 1010 Westfield Rd, Noblesville, IN 46062	

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

Name of applicant: Tara Anker	Title: Architect
Name of organization: Peterson Architecture	Telephone number: (317) 770-9714
Address *(number and street, city, state, and ZIP code)*: 298 S 10th Street, Suite 500, Noblesville, IN 46060	

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

Name of design professional: Darren Peterson	License number: AR19500143
Name of organization: Peterson Architecture	Telephone number: (317) 770-9714
Address *(number and street, city, state, and ZIP code)*: 298 S 10th Street, Suite 500, Noblesville, IN 46060	

4. PROJECT IDENTIFICATION

Name of project: Uptown Cafe	State project number: 404749	County: Hamilton
Address of site *(number and street, city, state, and ZIP code)*: 813 & 817 E Conner Street, Noblesville, IN		

Type of project:
☐ New ☐ Addition ☒ Alteration ☐ Change of occupancy ☐ 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

(b)

7. DESCRIPTION OF REQUESTED VARIANCE

Name of code or standard and edition involved	Specific code section
International Building Code 2012	Table 508.4 Req'd Seperation

Nature of non-compliance *(include a description of spaces, equipment, etc. involved as necessary.)*

Seperation between B and R occupancy requires 2 hour rated assembly. The existing floor/ceiling that separate these 2 occupancies is only a 1hour rating.

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 proposed second floor plan is for one (1) single family apartment with two (2) means of egress to the street. This is a historical building and though the previous use of the second floor was business occupancy, it is likely that it was originally a residence.

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:

To upgrade the floor/ceiling assembly to a 2 hour rating, the owner would have to completely replace the stairs (cost prohibitive) to accommodate pouring gypcrete to the required thickness; or remove the tin ceiling (owner is trying to preserve this historical element) to add a gypboard ceiling.

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)*
	Tara Anker	01/11/19
Signature of design professional *(if applicable)*	**Please print name**	**Date of signature *(month, day, year)***
	Darren Peterson	01/11/19

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)*
	Jay Merrell	01/11/19

Fitzpatrick, Denise

From: Daniel Sheposh <Dsheposh@noblesville.in.us>
Sent: Monday, February 11, 2019 12:55 PM
To: Darrel Cross; Fitzpatrick, Denise
Cc: Tara Anker
Subject: RE: Uptown Cafe - Variance

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

Denise

I have received a copy of the Variance request for the Uptown Café-813/817 Conner Street

Thanks

Daniel Sheposh, CBO — Building Commissioner
Department of Planning and Development
City of Noblesville
16 S 10th Street, Suite 150
Noblesville, IN 46060
P: (317) 776-6325
F: (317) 776-4638

From: Darrel Cross
Sent: Monday, February 11, 2019 12:53 PM
To: Denise Fitzpatrick (dfitzpatrick@dhs.in.gov) <dfitzpatrick@dhs.in.gov>
Cc: Tara Anker <tanker@petersonarchitecture.com>; Daniel Sheposh <Dsheposh@noblesville.in.us>
Subject: FW: Uptown Cafe - Variance

Denise,

I have received a copy of the variance request for the Uptown Café – 813-817 Conner St.

Thank you,

Darrel Cross, CFM
Division Chief / Fire Marshal
Noblesville Fire Department
Telephone: (317)776-6336 x 1414
Cell: (317) 557-8453
dcross@noblesville.in.us

From: Darrel Cross
Sent: Thursday, January 10, 2019 10:41 AM
To: Tara Anker <tanker@petersonarchitecture.com>; Daniel Sheposh <Dsheposh@noblesville.in.us>
Cc: Darren Peterson <DPeterson@petersonarchitecture.com>
Subject: RE: Uptown Cafe - Variance

Thanks Tara – I have received a copy of this variance application.

A couple of thoughts related to this variance:

- Have you considered a 13D sprinkler system for the second floor? The Commission often asks this question and it would be good to have a cost estimate if possible.
- Do you need an additional variance for the 1st to 2nd floor separation? If the entire building complies with Table 503 with for R-3 and B as a non-separated occupancy, you don't need the separation, but if it needs to be designed as a separated occupancy, you will probably want to add another variance for the separation unless you have found a way to provide the 2 hour separation.
- Make sure that all changes can be made to that back alley to make it compliant as an egress since you are claiming that as an alternative.

Let me know if you have questions.

Thanks,

Darrel Cross, CFM
Division Chief / Fire Marshal
Noblesville Fire Department
Telephone: (317)776-6336 x 1414
Cell: (317) 557-8453
dcross@noblesville.in.us

From: Tara Anker <tanker@petersonarchitecture.com>
Sent: Thursday, January 3, 2019 5:14 PM
To: Daniel Sheposh <Dsheposh@noblesville.in.us>; Darrel Cross <dcross@noblesville.in.us>
Cc: Darren Peterson <DPeterson@petersonarchitecture.com>
Subject: Uptown Cafe - Variance

Daniel and Darrel,

Please see the attached State variance application documents. Please provide written documentation that you each have received a copy of this application for us to turn in to IDHS.

Thank you!

Tara M C Anker
Architect

p 317.770.9714
tanker@petersonarchitecture.com

1 9 9 6 - 2 0 1 6
Celebrating the ***first*** **20 years**

p e t e r s o n A R C H I T E C T U R E
298 south 10th street
suite 500
noblesville in 46060
p 317.770.9714
f 317.770.9718

Darrel Cross, CFM
Division Chief / Fire Marshal
Noblesville Fire Department
Telephone: (317)776-6336 x 1414
Cell: (317) 557-8453
dcross@noblesville.in.us

From: Tara Anker <tanker@petersonarchitecture.com>
Sent: Thursday, January 3, 2019 5:14 PM
To: Daniel Sheposh <Dsheposh@noblesville.in.us>; Darrel Cross <dcross@noblesville.in.us>
Cc: Darren Peterson <DPeterson@petersonarchitecture.com>
Subject: Uptown Cafe - Variance

Daniel and Darrel,

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Thank you!

Tara M C Anker
Architect

p 317.770.9714
tanker@petersonarchitecture.com

1996-2016
Celebrating the ***first*** **20 years**

peterson ARCHITECTURE
298 south 10th street
suite 500
noblesville in 46060
p 317.770.9714
f 317.770.9718

Fitzpatrick, Denise

From: Darrel Cross <dcross@noblesville.in.us>
Sent: Monday, February 11, 2019 12:53 PM
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Cc: Tara Anker; Daniel Sheposh
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dcross@noblesville.in.us

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Let me know if you have questions.

Thanks,

4474

PETERSON ARCHITECTURE, PC
298 SOUTH 10TH STREET STE 500
NOBLESVILLE, IN 46060
317.770.9714

CHASE
JPMorgan Chase Bank, N.A.
www.Chase.com
20-1/740

1/14/2019

PAY TO THE ORDER OF Department of Homeland Security $**345.00

Three Hundred Forty-Five and 00/100********** DOLLARS

JAN 23 2019

Department of Homeland Security
Agency Support Services
402 West Washington
RM E221
MEMO Indianapolis, IN 46204

Ellen M. Barbour
AUTHORIZED SIGNATURE

⑈004474⑈ ⑆074000010⑆ 7299515441⑈

PETERSON ARCHITECTURE, PC 4474

Department of Homeland Security 1/14/2019

Date	Type	Reference	Original Amt.	Balance Due	Discount	Payment
1/14/2019	Bill	18-0110	345.00	345.00		345.00
					Check Amount	345.00

Chase Business Checking 345.00

PETERSON ARCHITECTURE, PC

Department of Homeland Security

Date	Type	Reference	Original Amt.	Balance Due	Discount	Payment
1/14/2019	Bill	18-0110	345.00	345.00		345.00

1/14/2019

4474

Check Amount 345.00

Chase Business Checking

345.00