INDIANA FIRE PREVENTION AND BUILDING SAFETY COMMISSION

Monday, February 8, 2021 By Electronic Mail

Melinda Kristof
Petitioner
Staybridge Suites
52860 State Route 933
South Bend, IN 46637
mkristof@jskhospitality.com

Re: Petition for Administrative Review – IDHS Sanctions Order No. 434-623 – South Bend Staybridge Suites

Dear Ms. Kristof:

The Indiana Fire Prevention and Building Safety Commission (Commission) is in receipt of your electronically-filed petition for administrative review of Indiana Department of Homeland Security (IDHS) IDHS Sanctions Order No. 434-623 – South Bend Staybridge Suites, submitted on Monday, February 8, 2021. Pursuant to the requirements of Indiana Code § 4-21.5-3-7, your petition for administrative review is hereby granted by the Commission.

Your petition will now be forwarded to the Indiana Office on Administrative Law Proceedings (OALP) to be assigned to the Commission's administrative law judge. OALP or the judge will contact you directly to make arrangements for further proceedings. Should you have any questions, you may contact the Indiana Department of Homeland Security's deputy general counsel assigned to this matter, Justin Guedel, at jquedel@dhs.in.gov or (317) 234-9515.

Sincerely,

Douglas J. Boyle, Director

J-7.B/-

Indiana Fire Prevention and Building Safety Commission

Indiana Department of Homeland Security

Indiana Government Center South, Room E-208

302 W. Washington Street Indianapolis, IN 46204

doboyle@dhs.in.gov

Enclosure

cc: Justin K. Guedel, IDHS Deputy General Counsel – representing the Respondent (by electronic mail)

Bryston Sprecher, Administrative Assistant to the Indiana Fire Prevention and Building Safety Commission (by electronic mail)

From: DHS Legal Mailbox

To: Guedel, Justin K; Boyle, Douglas J (DHS); Sprecher, Bryston

Subject: FW: Petition for Review

Date:Monday, February 8, 2021 1:26:19 PMAttachments:68379161 DHS fire insp fine.pdf

From: noreply@formstack.com

Sent: Monday, February 8, 2021 6:24:28 PM (UTC+00:00) Monrovia, Reykjavik

To: DHS Legal Mailbox Subject: Petition for Review

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



Formstack Submission For: petition for review

Submitted at 02/08/21 1:24 PM

Individual Name:	Melinda Kristof
Business Name::	Staybridge Suites
Phone Number:	(574) 968-7440
Email Address:	mkristof@jskhospitality.com
Mailing Address:	52860 State Route 933 South Bend, IN 46637
Are you represented by an attorney?:	No

Attorney Name:	
Firm:	
Phone Number:	
Email Address:	
Mailing Address:	
Order Number:	
Facility Device Boiler ID:	HM100900
Date Order Received:	Jan 28, 2021
How did you receive the Order?:	Hand Delivery
Entity Issuing Order:	Indiana Department of Homeland Security
Entity Name:	
Upload Order:	View File
Was this order specifically directed to you?:	Yes
Explain:	Hotel Manager
Explain:	

Have you been aggrieved or Yes adversely affected by the order?: when you google emergency lights, the second picture is exit light. We replaced 8 exit lights and 5 **Explain:** emergency lights but she didn't accept that. My first language isn't english **Explain:** If the order was not specifically directed to you and you have not been aggrieved or adversely affected by the order, are you entitled to review under some other law?: What law?: I request review of the entire order Yes described above: If you are not requesting review of the entire order. what is the scope of your request?:

I request a stay of effectiveness:	No
What is the basis of your challenge?:	We replaced emergency lights and Exit lights after the inspection dated 12/21/2020 Inspection number: C7D8-2337. On the date of the reinspection, 1 of the 3 lights were not working again. To our defense, we must've received a bad batch of emergency light batteries, because after the visit on 1/28 it was replaced and one wasn't working again on 2/6/2021. Every other violation she marked on 12/21/2020 was also successfully addressed. Due to the nature of light bulbs, I don't feel the \$250 fee is legit. After her suggesting getting LED lights, that's what we did.
What is your desired outcome?:	Waive the \$250 fee
Additional information in support of my request:	
Additional Attachments:	
Additional Attachments:	
Additional Attachments:	



Report of inspection Indiana Department of Homeland Security 302 W. Washington Street, Room E208 Indianapolis, IN 46204

Sanction Number **Permit Number** 434-623 HM100900

Visit us at: http://www.in.gov/dhs

Date Results

Phone: 317-232-2222

01/28/2021 Sanctions Туре

Sanctions

Location Name Street

City

Zip

STAYBRIDGE SUITES 52860 SR 933 SOUTH BEND 46637 Owner Name Street City

Zip

Type

STAYBRIDGE SUITES 52860 SR 933 SOUTH BEND

Inspector Name Email Phone

Crystal Thompson CrThompson@dhs.IN.gov 317-233-2222 Permit State Number

HM100900 Motel

46637

otice of Violations

#	Code	Description	Order	Correct By	Fee
	Sec. 1006.3 2014 Edition IFC 675 IAC 22-2.5	The power supply for means of egress illumination shall normally be provided by the premises' electrical supply. In the event of power supply failure, an emergency electrical system shall automatically illuminate all of the following areas: 1. Aisles and unenclosed egress stairways in rooms	Maintain emergency lighting to operate on battery back up as intended. (206, 2nd and 4th floor stairway A).	01/21/2021	\$250.00
		and spaces that require two or more means of egress. 2. Corridors, interior exit stairways and ramps and exit passageways in buildings required to have two or more exits. 3. Exterior egress			
		components at other than their levels of exit discharge until exit discharge is accomplished for buildings required to have two or more exits.	816		
		Interior exit discharge elements, as permitted in Section 1027.1, in buildings required to have two or more exits. Exterior landings as			
		required by Section 1008.1.6 for exit discharge doorways in buildings required to have two or more exits.			



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2 W. Washington of Homeland Security	Permit Number	Sanction Number
2 W. Washington Street, Room E208 dianapolis, IN 46204	HM100900	434-623
ione: 317-232-2222	×	
	,	Visit us at: http://www.in.gov/dhs

	The emergency power system shall provide power for a duration of not less than 90 minutes and shall consist of	- 1 S SS	
1000	storage batteries, unit equipment or an on-site generator. The installation of the emergency power system shall be in accordance with Section 604.	100 1004.7	

Scanned with CamScanner



Permit Number HM100900

434-623

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If you are receiving this document, property that you own or have control over, has been, or was attempted to be, inspected by the Indiana Department of Homeland Security (Department). Depending on the outcome of this inspection, one of five different RESU hi was notated. See the first page for the RESULT of this inspection. The following describes what each RESULT means:

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This report is to notify you that the Department attempted to perform an inspection of your property, but was unable to for some reason. If you have not already spoken with your inspector regarding this, please contact him or her immediately.

This report is to notify you that the Department performed an inspection of your property, and no violations were found to exist. However, please be aware that obtaining a RESULT of "no violations found" does not mean that no violations exist on your prope may be found during a later inspection.

EMERGENCY OR TEMPORARY ORDER

This report is to notify you that the Department has determined that conduct or a condition of property:

- presents a clear and immediate hazard of death or serious bodily injury to any person other than a trespasser; is prohibited without a permit, registration, certification, release, authorization, variance, exemption, or other license and (1)(2)
- license has not been issued; or will conceal a violation of law. (3)

This order must immediately be complied with, up to and until such time that: (1) it expires; (2) an order is issued by an administr law judge voiding, terminating, modifying, or staying its effectiveness; or (3) the Department terminates its effectiveness. If you d administrative review of this order, you must submit your request by one of the methods provided for in the administrative review section mentioned below.

NOTICE OF VIOLATIONS

This report is to notify you that violations are believed to exist on your property. However, if you enter into a corrective plan and correct these violations by the correction date provided in this report, no enforcement actions or sanctions will commence. If you enter into a corrective plan, the Department will move forward with enforcement of this order and the imposition of sanctions.

If you would like to enter into a corrective plan, you must notify your inspector, in writing, within five (5) days of receiving this rep

corrected.

- Terms of corrective plan: I agree to correct the violations contained on this report by the date provided. 1.
- I understand my failure to correct these violations by the correction date will result in the enforcement of this report and 2. sanctions, including, but not limited to, a fine of \$250 per day per violation.
- I understand no extensions of time are permitted unless they are granted in writing by the Department. 3.
- I understand that entering into this corrective plan is not an admission that a violation has occurred. 4.
- I agree to protect the safety and property of other persons as outlined by the Department while corrections are underw 5.
- I agree to notify the Department, by the compliance date, that all violations have been corrected, and I am aware that r 6.
- failure to do so may result in sanctions being ordered. 7.
 - I understand that in order for the Department to determine compliance, an additional inspection may be performed and Department must notify me of the determination of my compliance within thirty (30) days following the earlier of: (a) the correction date contained in this report; or (b) the date the Department is provided notice that the violations have been

If you do not enter into a corrective plan or receive a determination modifying or reversing this report, the requirements of this are effective fifteen (15) days after service and must be complied with until such time that: (1) this order is overturned on revie an administrative law judge issues a stay of enforcement; or (3) the Department consents to the request for a stay in writing. request an informal review or administrative review of this report, you must comply with the information provided below.



Report of inspection Indiana Department of Homeland Security 302 W. Washington Street, Room E208 Indianapolis, IN 46204 Phone: 317-232-2222 Permit Number Sanction Number HM100900 434-623

Visit us at: http://www.in.gov/dhs

SANCTIONS

s report is to notify you that sanctions are being imposed due to violation(s) of the law. If a civil penalty is imposed, you will be hibited from renewing any permit, license, registration, certification, or other similar authorization related to the device, equipment, structure, which is the subject of the civil penalty, until the debt has been satisfied. For information on how to request an informal ew or administrative review, see below.

ORMAL REVIEW

request an informal review of your order by the Department, complete the informal review form located at S://www.in.gov/dhs/4149.htm. Following receipt of this form, the Department will review your request and may modify or reverse report, and will attempt to respond to your request within five (5) business days, however, a request for an informal review does extend the deadline for filing a petition for administrative review which must be filed to initiate formal administrative proceedings er IC 4-21.5.

MINISTRATIVE REVIEW

u desire administrative review of this order by the Fire Prevention and Building Safety Commission, you must comply with the irements of Indiana Code § 4-21.5-3-7 and file a written petition for review within fifteen (15) days after receiving notice of these tions. Your petition for review must state facts demonstrating that you are: (1) a person to whom the order is specifically directed; ggrieved or adversely affected by the order, or (3) entitled to review under any law. You must submit your petition by one of the wing methods:

MAIL OR PERSONAL SERVICE
ina Department of Homeland Security
Prevention and Building Safety Commission
W. Washington Street, Rm. E208
inapolis. IN 46204

ONLINE

By completing the form at https://www.in.gov/dhs/4148.htm

ur petition qualifies for review, it will be assigned to an administrative law judge who will initiate proceedings under IC 4-21.5. For itional information about the administrative review process and other options that may be available to you, visit the following link:://www.in.gov/dhs/appeals.htm.

