

INDIANA FIRE PREVENTION AND BUILDING SAFETY COMMISSION

Wednesday, November 18, 2020
By Electronic Mail

Jason Curtis
Petitioner
Five Star Dive Bar
54226 Echo Lane
Bristol, IN 46507
jasonkzk@gmail.com

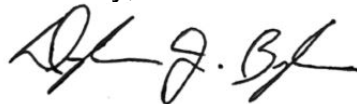
Re: Petition for Administrative Review – IDHS Sanctions Order No. 318-444 – Five Star Dive Bar

Dear Mr. Curtis:

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) Sanctions Order No. 318-444 – Five Star Dive Bar, submitted on Wednesday, November 18, 2020. 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 jguedel@dhs.in.gov or (317) 234-9515.

Sincerely,



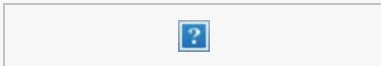
Douglas J. Boyle, Director
Indiana Fire Prevention and Building Safety Commission
Indiana Department of Homeland Security
Indiana Government Center South, Room E-208
302 W. Washington Street
Indianapolis, IN 46204
dboyle@dhs.in.gov

Enclosure

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

From: noreply@formstack.com
To: [DHS Legal Mailbox](#)
Subject: Petition for Review
Date: Wednesday, November 18, 2020 11:31:52 AM
Attachments: [68379161_Doc Nov 18, 2020 at 11-15 AM.pdf](#)
[68380022_IMG_0042.PNG](#)
[68380035_Doc Nov 18, 2020 at 11-16 AM.pdf](#)
[68380034_Doc Nov 18, 2020 at 11-17 AM.pdf](#)

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Formstack Submission For: [petition for review](#)

Submitted at 11/18/20 11:31 AM

Individual Name:	JASON CURTIS
Business Name: :	Five Star Dive Bar
Phone Number:	(574) 326-9269
Email Address:	Jasonkzk@gmail.com
Mailing Address:	54226 Echo Ln Bristol, IN 46507
Are you represented by an attorney?:	No
Attorney Name:	
Firm:	
Phone Number:	
Email Address:	

Mailing Address:	
Order Number:	318444
Facility Device Boiler ID:	
Date Order Received:	Nov 04, 2020
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:	
Have you been aggrieved or adversely affected by the order?:	Yes
Explain:	Under Covid guidelines is stressing enough but these service providers required to provide the work are stretched and unable to meet these guidelines. we already had these scheduled. The Fire alarm testing report that is required cannot be completed until 11/27/2020 and falls outside of this window for appeal. The other two are now completed - omne of them was completed 48 hours after the fine was levied.
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 described above:

Yes

If you are not requesting review of the entire order, what is the scope of your request?:

I request a stay of effectiveness:

Yes

What is the basis of your challenge? :

During the pandemic I could not get this work performed inside the required window. all work has now been performed and most of it within 2-3 days of the fines being levied. the third item is scheduled for 11/27/20 and falls outside of ,my appeal window of 15 days.

What is your desired outcome? :

To remove the fines and stay compliant within the sates guidelines.

Additional information in support of my request:

I have attached both receipts for the two completed items as well as the service ticket for the fire alarm testing.

Additional Attachments:



[Direct Link to Image](#)

Additional

[View File](#)

Attachments:

**Additional
Attachments:**

[View File](#)

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Formstack, 11671 Lantern Road, Suite 300, Fishers, IN 46038



Indiana Department of Homeland Security
 302 W. Washington Street, Room E208
 Indianapolis, IN 46204
 Phone: 317-232-2222

Permit Number	Sanction Number
AE2034609C	318-444

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

Date 11/04/2020 **Type** Sanctions
Results Sanctions

Location **Owner**
Name FIVE STAR DIVE BAR **Name** JASON CURTIS
Street 526 S Main Street **Street** 526 S Main Street
City Elkhart **City** Elkhart
Zip 46516 **Zip** 46516

Sanctioned By **Permit**
Name Chad Sharp **State Number** AE2034609C
Email CSharp@dhs.IN.gov **Type** Amusement & Entertainment Annual Location
Phone 317-273-3864

Sanctions

Notice of Violations

#	Code	Description	Order	Correct By	Fee
	Sec. 907.8.5 2014 Edition IFC 675 IAC 22-2.5	The building owner shall be responsible to maintain the fire and life safety systems in an operable condition at all times. Service personnel shall meet the qualification requirements of NFPA 72 for maintaining, inspecting and testing such systems. A written record shall be maintained and shall be made available to the fire code official.	Provide proper documentation of most recent annual fire alarm testing report.	10/24/2020	\$250.00
	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.	Provide proper documentation of most recent documentation of annual fire extinguisher testing report.	10/24/2020	\$250.00
	Sec. 904.11.6.2 2014 Edition IFC 675 IAC 22-2.5	Automatic fire-extinguishing systems shall be serviced at least every six months and after activation of the system. Inspection shall be by qualified individuals, and a certificate of inspection shall be forwarded to the fire code official upon completion.	Provide proper documentation of most recent kitchen suppression system inspection report.	10/24/2020	\$250.00

MUST BE DONE 30 DAYS FROM TODAY

Let Chad know ASAP when everything is done

**Adam Bert**

10:53 AM

To: jasonkzk >

Service Ticket Number: 1923899

Here is the Open Ticket information for the fire inspection.

Service Ticket Number: 1923899

System Account: AES5020 - Burg/Fire

Service Level: 24X7

Panel: AV32FBPT

Site: 5 Star Dive Bar

526 S Main St

Elkhart, IN 46514

(574) 294-7500

Problem: Inspection - Fire

Comments: Would like a fire inspection done for the local fire marshal.

Scheduled For: 11/25/2020 11:00:00 AM

ADAM BERT

ADMINISTRATIVE ASSISTANT

PER MAR SECURITY SERVICES

SOUTH BEND

PERMARSECURITY.COM

D [\(574\) 252-5276](tel:(574)252-5276)



CHEM-CLEAN POWER WASHING & RESTAURANT CLEANING

HOOD CLEANING INSPECTION REPORT

Company Name Five Star Dive Bar
Address 526 S. Main St Elkhart, IN 46516
Phone (574) 326-6129 (Raguel)

Date of Cleaning 11.9.2020
Hood Size 11' HOOD
Duct Size 30" X 10"

Plenum Area Cleaned

Duct Work Cleaned

Hood Fan Cleaned

Grease Trap(s) Cleaned

Grease Cup(s) Cleaned

Outside Hood Cleaned

Outside Hood Top Cleaned

Outside Hood Walls Cleaned

Hood Drip Area Cleaned

Inside Hood Walls Cleaned

Inside Hood Top Cleaned

Filter(s) Cleaned

of Filter(s) 6 Size of Filter(s) (19 1/2" X 19" X 2) (24 X 19 X 2) (19 X 15 X 2)

Exhaust Fan and Fresh Air Make-Up working properly (YES/NO)

Notes / Suggestions [Signature]

Hood Cleaning Technician [Signature] Date Nov 11, 2020

Responsible Party Signature [Signature] Print Name [Signature]

All Hoods Cleaned per Manufacturers Specifications
Chem-Clean is not responsible for hoods not working per Manufacturers Specifications and do not meet Manufactured UL Listing
Hoods per State Code shall be Cleaned / Maintained Quarterly. Chem-Clean can not remain liable for Hoods not cleaned per Codes.

FIRE SUPPRESSION SYSTEMS REPORT



FOX FIRE SAFETY, INC.

(574) 674-0910 • Fax: (574) 674-0911
 4605 Lincolnway East • Mishawaka, IN 46544
 www.FoxFireSafetyInc.com



Customer Information

Name: 5 STAR DIVE BAR
 Address: 526 S. MAIN ST
 City: ELKHART
 State: IN Zip: _____
 Phone: 326-6129
 Owner/Mgr: Raqueil

Service Information

Circle One: (Semi-Annual) Recharge Installation Renovation

System Type: Pyrochem - PCL DBL 4/2 Wet or Dry

Links

165°	280°	360°
450° <u>6</u>	500°	

Electric or Gas fuel Shutoff: MECH. GAS
 Alarm: N/A
 Last Regulator Test Date: 08'
 Last Hydro Test Date: 081 Next Hydro Test Date: 201
 Type of Control: EN-MCU3

- | | |
|---|---|
| 1. All appliances properly covered with correct nozzles | Y <input checked="" type="checkbox"/> N <input type="checkbox"/> |
| 2. Duct and plenum covered with correct nozzles | Y <input checked="" type="checkbox"/> N <input type="checkbox"/> |
| 3. Check operation of pressure switch or microswitch | Y <input checked="" type="checkbox"/> N <input type="checkbox"/> |
| 4. Check if seals intact, free of tampering | N/A <input type="checkbox"/> Y <input checked="" type="checkbox"/> N <input type="checkbox"/> |
| 5. System fully charged, free from discharge | Y <input checked="" type="checkbox"/> N <input type="checkbox"/> |
| 6. Pressure gauge in proper range | N/A <input type="checkbox"/> Y <input checked="" type="checkbox"/> N <input type="checkbox"/> |
| 7. Check cartridge assembly - weigh and replace | N/A <input type="checkbox"/> Y <input checked="" type="checkbox"/> N <input type="checkbox"/> |
| 8. Trip system from most remote detector | Y <input checked="" type="checkbox"/> N <input type="checkbox"/> |
| 9. Test for proper operation from remote pull station | Y <input checked="" type="checkbox"/> N <input type="checkbox"/> |
| 10. Check operation of gas valve & all equipment shut off | Y <input checked="" type="checkbox"/> N <input type="checkbox"/> |
| 11. Clean nozzles - free of grease and/or dirt | Y <input checked="" type="checkbox"/> N <input type="checkbox"/> |
| 12. Replace fuse links with same | Y <input checked="" type="checkbox"/> N <input type="checkbox"/> |
| 13. Exhaust fan in operational order | Y <input checked="" type="checkbox"/> N <input type="checkbox"/> |

- | | |
|--|--|
| 14. All hood filters in place | Y <input checked="" type="checkbox"/> N <input type="checkbox"/> |
| 15. Fuel shut-off in on position | Y <input checked="" type="checkbox"/> N <input type="checkbox"/> |
| 16. Manual & remote set / seals intact | Y <input checked="" type="checkbox"/> N <input type="checkbox"/> |
| 17. Clean system cylinder and component parts | Y <input checked="" type="checkbox"/> N <input type="checkbox"/> |
| 18. Check that tension lever / turnbuckle for cable tension is in proper position. | Y <input checked="" type="checkbox"/> N <input type="checkbox"/> |
| 19. Portable extinguishers properly serviced | Y <input checked="" type="checkbox"/> N <input type="checkbox"/> |
| 20. Service & certification tag on system/sealed | Y <input checked="" type="checkbox"/> N <input type="checkbox"/> |

Date of Last Hood Cleaning: 9/17/18

Duct Plenum Appliance Size Location Nozzle Type

2-BURNER, 24" Charbroiler, 60" Griddle
1H / 1H / 2H, 1H
2-15" X 14" FANES
2-2H
3-1H = PLENUMS
2-2D = DUCTS

Comments & Deficiencies

Tank, Due For HydroTEST. Heads NEED CLEANED.

This system was inspected and found to be OPERABLE NON-OPERABLE

Time In: _____ Time Out: _____ Date: 11/16/20 Service Tech: [Signature]

Customer Authorized Agent: X [Signature] [Signature]