BOARD OF ZONING APPEALS MEETING THURSDAY, JANUARY 26, 2023, 5:30 P.M. COUNCIL CHAMBERS 40 W MAIN ST, NEWARK, OH 43055

AGENDA **PUBLIC HEARING**

- 1. CALL TO ORDER
- 2. APPROVAL OF MINUTES
- 3. OLD BUSINESS
- 4. **NEW BUSINESS**

APPLICATION BZA-22-42

Applicant: Steve Daye Owner: Steve Dave Location: 949 Shaw Dr Project: Home Business

Reference: 16.4

APPLICATION BZA-22-43

Applicant: Erik Lambert David Grigsby

Owner:
Location:
Project: 539-545 New Haven Ct Project: Two-Family Dwelling Units

Reference:

APPLICATION BZA-22-44

Applicant: Donald Dunlap
Owner: Donald Dunlap Owner: Donaid Sense, 1963 Wells Ave Proiect: Accessory Stru Owner: Donald Dunlap

Accessory Structures

Reference: 86.3

APPLICATION BZA-23-01

Applicant: Michael Lee

Four M Manufacturing Group Inc

Owner: Four M Manutactum
Location: 1851 Tamarack Rd
Proiect: Building Addition

Reference: 64.6.2

INTERPRETATION

7868 Licking Springs Rd

Home Business/Legal Non-Conforming Use

THE NEXT SCHEDULED BOARD OF ZONING APPEALS MEETING WILL BE HELD ON THURSDAY, FEBRUARY 23, 2023, 5:30 P.M. THE DEADLINE FOR AGENDA ITEM SUBMITTAL IS FEBRUARY 1, 2023, 4:30PM.

5. ADJOURNMENT



Zoning Application #

BZA-22-42 BZA Appeal #

CITY OF NEWARK ENGINEERING & ZONING

c/o Engineering Department

40 West Main Street | Newark, Ohio 43055 | Tel 740.670.7727 | Fax 740.349.5911 | www.newarkohio.net

Rev 2/10 BOARD OF ZONING APPEALS	APPLICATION
Owner	
Name: Steve PAYE	Telephone: 614-989-2651
Address: 949 SHAW DR Novant UH.	E-mail: Steve. DoyED CSSOHIO OCG
Applicant	
Name: Steve Dait	Telephone: (6/4-989-265)
Address: 949 SHAW OD NEWARK OHIO	E-mail: State DAYED CSS 01410.00
Lessee	
Name:	Telephone:
Address:	E-mail:
Parcel	
Address of Parcel: (Number & Street, City, State, Zip)	Auditor's Parcel #:
949 SHAW PR Newret OH(O 43055 On the □North ☑ South □ East □ West side of the street, between and	een the following intersections:
Subdivision Name:	Lot Number:
SHAW Estate	9288 SHAWPLACY
Zoning Classification:	Proposed Use:
If filling out electronically, click box to display dropdown	If filling out electronically, click box to display dropdown (Specify Use):
Notes: (Optional)	
	Flood: X
Appeal	
The Application is a request to permit the following:	Conversion □ Conditional Use ☒ ding or use:
Home Business	

Zoning Application #

BZA Appeal #

	Appeal Continued
This p	project is not permitted by the Zoning Code for the following reason(s):
l .	e outline the circumstances, which you feel would warrant a variance to the requirements of the g Code:
Has t	here been any previous application or appeal on these premises? Yes No When?
This a	application is a request for modification of the requirements of the following Article(s)/Section(s) of
the Z	oning Code: (List)
	Required Documents
	(Must be signed and returned to the Engineering Department.)
□A. □B.	Original Application List of owner names, street addresses and tax mailing addresses for all properties lying within 200 feet radius of
LD.	the entire property in question. Number the parcel list. This will correspond with the Tax Map in C below.
□C.	Tax Map from the County Engineer indicating boundaries of this property in question and properties described in
	B above. Number each parcel on the map to match its corresponding name, location and mailing address in
	list B above.
□D.	Site Plan showing location of existing and proposed structures, property lines, setbacks and dimensions.
□E.	Elevation drawings of the front, side and rear of the proposed building or structure. Identify all major exterior
□F.	finish materials on the elevation drawing. Application Fee of \$50.00 Cash or Check made payable to the City of Newark
$\square G$.	Application Fee of \$25.00 for Off-Premise Variable Message Sign
□H.	Additional documentation at the discretion of the applicant for support of the Appeal

Upon receipt of this application and the required documents listed above, you will be notified of the date and time of the hearing at which time you or a representative must appear.

(Lun)
(Owner/Applicant Signature)
Before me, a Notary Public in and for <u>Licking</u> County in the State of <u>Ohio</u> , personally
appeared Steve Dayl who, by me being duly sworn, says that he is the (Applicant's name)
of the parcel of land with reference to which the within appeal is made; and (Applicant, owner, lessee)
that the statement of facts contained herein above is true.
Subscriber and Stephen on before me this 19th day of December 2022
(Notary Public signature)
COMMISSION THE REPORT OF THE PROPERTY OF THE P

· · · · · · · · · · · · · · · · · · ·	_			
	DO NOT WRITE BE	ELOW THIS LINE – FOR	OFFICE USE ONLY	
Status:	Date:	Zoning Reviewer:	Date Notified:	Date: Rcvd. Date: 17/22/22 Paid Date: 12/22/22
□ Incomplete				Paid Date: 12/22/22 Check Cash (circle one)
► Forward to BZA	1/12/2013	BM		Check # 1064 Amount \$ 50-
□ Hold		Reason:		

BOARD OF **Z**ONING **A**PPEALS

PROJECT REVIEW SHEET

BZA CASE NO. 22-42

Date of Review: 1/11/23

Address of Project: 949 Shaw Dr Current Zoning: RL

Project Description: Home Business

Ordinance / Article / Section

Requirement / Proposal / Conclusion

08-16 16 16.4

Requirement: In the RL district a home business must be approved by the board of zoning

appeals.

Proposal: The applicant requests to operate and internet based firearm business

Conclusion: The proposal requires board approval.

949 Shaw Dr







DATE 11/20/2017 DOCUMENT ID 201732103306

DESCRIPTION DOMESTIC FOR PROFIT LLC - ARTICLES OF ORG (LCP)

99.00

0.00

Receipt

This is not a bill. Please do not remit payment.

SRD ENTERPRISES, LLC STEVE DAYE 949 SHAW DR **NEWARK, OH 43055**

STATE OF OHIO CERTIFICATE

Ohio Secretary of State, Jon Husted 4098567

It is hereby certified that the Secretary of State of Ohio has custody of the business records for

SRD ENTERPRISES, LLC

and, that said business records show the filing and recording of:

Document(s)

Document No(s):

DOMESTIC FOR PROFIT LLC - ARTICLES OF ORG

Effective Date: 11/16/2017

201732103306



United States of America State of Ohio Office of the Secretary of State Witness my hand and the seal of the Secretary of State at Columbus, Ohio this 20th day of November, A.D. 2017.

Ohio Secretary of State



PO Box 182215 Columbus, OH 43218-2215 tax.ohio.gov

այլիլենիրիանիայնարարականակիրներիրիկինին առանին

SRD ENTERPRISES LLC 949 SHAW DR NEWARK, OH 43055-2614

> April 06, 2018 Contact ID: 4561304555

ETN 923 645972 RE: Ohio Tax Account #: 45049109

County: LICKING

Effective Date: April 15, 2018



This is to certify that the vendor herein named, having complied with the provisions of Ohio Revised Code (R.C.) section 5739.17, is hereby authorized to sell tangible personal property and selected services at retail, at the location specified below. This license shall terminate and be null and void: If the business is moved to a new location outside the county where it is presently located, if the business is sold, if an individual or partnership incorporates the business, if a partnership is dissolved, or if a corporation is dissolved or is canceled for cause by the Tax Commissioner.

SRD ENTERPRISES LLC 949 SHAW DR NEWARK, OH 43055-2614

The Ohio Sales Tax Law provides that no vendor shall fail to collect the full and exact tax as required by Sections 5739.01 to 5739.31, inclusive, of the R.C., or fail to comply with such sections and the rules and regulations of the Tax Commissioner.

Whoever violates this provision may be fined not less than twenty-five nor more than one hundred dollars for a first offense; for each subsequent offense such person shall, if a corporation, be fined not less than one hundred nor more than five hundred dollars, or if an individual or member of a partnership, firm, or association, be fined not less than twenty-five nor more than one hundred dollars, or imprisoned not more than sixty days, or both.

Taxpayer Services Division Phone: 1-888-405-4089 Fax: 1-614-387-1851

TTY/TDD: 1-800-750-0750

U.S. Department of Justice

Bureau of Alcohol, Tobacco, Firearms and Explosives

Federal Firearms License (18 U.S.C. Chapter 44)

In accordance with the provisions of Title I, Gun Control Act of 1968, and the regulations issued thereunder (27 CFR Part 478), you are licensed to engage in the business specified in this license, within the limitations of Chapter 44, Title 18, United States Code, and the regulations issued thereunder, until the expiration date shown. THIS LICENSE IS NOT TRANSFERABLE UNDER 27 CFR 478.51. See "WARNINGS" and "NOTICES" on reverse.

Direct ATF Correspondence To ATF - Chief, FFLC

244 Needy Road

Martinsburg, WV 25405-9431

Chief, Federal Fireagus Licensing Center (FFLC)

Expiration Date

License

Number

4-31-089-01-4D-06408

Mailing Address (Changes? Notify the FFLC of any changes.)

SRD ENTERPRISES LLC

NEWARK, OH 43055-

949 SHAW DR

Name

SRD ENTERPRISES LLC

Premises Address (Changes? Notify the FFLC at least 30 days before the move.)

949 SHAW DR

NEWARK, OH 43055-

Type of License

01-DEALER IN FIREARMS OTHER THAN DESTRUCTIVE DEVICES

Purchasing Certification Statement

The licensee named above shall use a copy of this license to assist a transferor of firearms to verify the identity and the licensed status of the licensee as provided by 27 CFR Part 478. The signature on each copy must be an original signature. A faxed, scanned or e-mailed copy of the license with a signature intended to be an original signature is acceptable. The signature must be that of the Federal Firearms Licensee (FFL) or a responsible person of the FFL. I certify that this is a true copy of a license issued to the licensee named above to engage in the business specified above under "Type of License."

Licensee/Responsible Person Signature

Steve SAYF

Printed Name

Position/Title

949 Shaw DR Newark Ohio 43055 FFL # 4-31-089- -06408

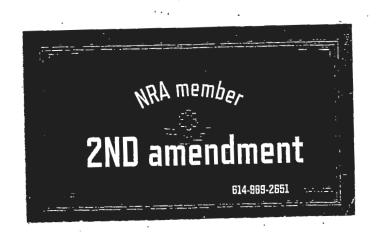
Steve.daye@cssohio.org

FL# 4-31-089-

949 Shaw DR Newark Ohio 43055 614-989-2651







April 1, 2024

ATF Form 8 (5310.11)



If filling out electronically, click box to display dropdown

539 - Parcel/LoT

Zoning Application #

ONING

c/o Engineering Department

If filling out electronically, click box to display dropdown

(Specify Use): RESIDENTAAL, NEW

FOUR PARCELS:

nio 43055 | Tel 740.670.7727 | Fax 740.349.5911 | www.newarkohio.net

*	CITY OF NEWARK ENGINEERING & ZO
AND FUTUR	40 West Main Street Newark, Oh

BOARD OF ZONING APPEALS A	APPLICATION	
Rev 2/10		
Owner		
Name: DAVID GRIGSBY	Telephone: (740) 403 - 0047	
Address: 55 Sandlewood Dr Newark OH 43055	E-mail: deginc@icloud.com	
Applicant		
Name: ERIK Lambert	Telephone: (614) 419-4386	
Address: 6665 Busch Blud Columbus OH 43229	E-mail: elambert @ habitat mid ohio . or	
Lessee		
Name:	Telephone:	
Address:	E-mail:	
Parcel		
Address of Parcel: (Number & Street, City, State, Zip) 539-545 New Haven Ct. Newark OH 43055	Auditor's Parcel #: 054-196506-00.004,005,00	
On the North South East West side of the street, between		
New Haven Ave and		
Subdivision Name: New Hoven Commons	Lot Number: 12324 12323 12321	
Zoning Classification:	12324 12323 12322 12321 Proposed Use:	

5390	06/12324	543- 545-	·005/12322 ·004/12321	
-		Appea	i e	
The Application	in is a request to pern	nit the following:		
Erection 🗹	Alteration □	Maintenance □	Conversion □	Conditional Use
In accordance	with the plans filed h	erewith, describe the	building or use:	
	•	,	9	
			,	

MFR

Notes: (Optional) SEEKING SAME VARIANCES ON OLL

Zoning Application #

BZA Appeal #

Eik Lamlet
(Owner/Applicant Signature)
Before me, a Notary Public in and for <u>franklin</u> County in the State of <u>Onlin</u> , personally
appeared <u>ERIK LamberT</u> who, by me being duly sworn, says that he is the
(Applicant's name) ERIK Lamberet of the parcel of land with reference to which the within appeal is made; and
(Applicant, owner, lessee)
that the statement of facts contained herein above is true.
Subscribed and sworn to before me this 22nd day of dlclmblr
AUBREY SMOCK Notary Public State of Ohio My Comm. Expires August 31, 2026 AUBREY SMOCK Notary Public State of Ohio My Comm. Expires August 31, 2026

	DO NOT WRITE BE	ELOW THIS LINE – FOR	OFFICE USE ONLY	
Status:	Date:	Zoning Reviewer:	Date Notified:	Date: Revd. Date: 12 28 22
□ Incomplete				Paid Date: 12/28/27 Check Cash (circle one)
₹ Forward to BZA	1/12/2023	BAM		Check # 1079\ Amount \$ 50.00
□ Hold		Reason:		-

Appeal Continued This project is not permitted by the Zoning Code for the following reason(s): Lot Area in 50fficient - requesting reduction from 10,000 to 8,000 st. Side yard setbacks - requesting reduction from 17 to 10.44 REAR YARD Setbacks - requesting reduction from 45 to 32 Minimum parking regularement - request reduction from 3.5 to 3 per unit Please outline the circumstances, which you feel would warrant a variance to the requirements of the Zoning Code: MFR Classification of platted parkels only allows duplex or larger but with Zoning square footage requirements they would be un buildable. Lot square footage, side and rear yard setbacks and parking will be Similar to All Other duplexes on New Haven Ct. Has there been any previous application or appeal on these premises? Tes Mo When? This application is a request for modification of the requirements of the following Article(s)/Section(s) of the Zoning Code: (List) 26.8 Lot Area & SY setback & RY Set back 125.2 Parking

Required Documents
(Must be signed and returned to the Engineering Department.)
☐ ☐ Original Application
□B. List of owner names, street addresses and tax mailing addresses for all properties lying within 200 feet radius of
the entire property in question. Number the parcel list. This will correspond with the Tax Map in C below.
Tax Map from the County Engineer indicating boundaries of this property in question and properties described in
B above. Number each parcel on the map to match its corresponding name, location and mailing address in
list B above.
☑D. Site Plan showing location of existing and proposed structures, property lines, setbacks and dimensions.
Elevation drawings of the front, side and rear of the proposed building or structure. Identify all major exterior
finish materials on the elevation drawing.
Application Fee of \$50.00 Cash or Check made payable to the City of Newark
☐G. Application Fee of \$25.00 for Off-Premise Variable Message Sign
☐H. Additional documentation at the discretion of the applicant for support of the Appeal

Upon receipt of this application and the required documents listed above, you will be notified of the date and time of the hearing at which time you or a representative must appear.

BZA CASE NO. 22-42

Date of Review: 1/11/23

Address of Project: 539-545 New Haven Ct Current Zoning: RL

Project Description: Two-Family Units

Ordinance / Article / Section

Requirement / Proposal / Conclusion

08-16 26 26.8

Requirement: To build a two-family unit in the MFR district, a lot area of 10,000 square feet is

required. The required rear yard setback is 40 ft. The minimum road frontage

required is 80 ft.

Proposal: The applicant requests a blanket variance for 4 lots to reduce the lot area

requirement to 8,000 sq. ft., the rear yard setback to 32 ft. and the lot frontage to

60 ft.

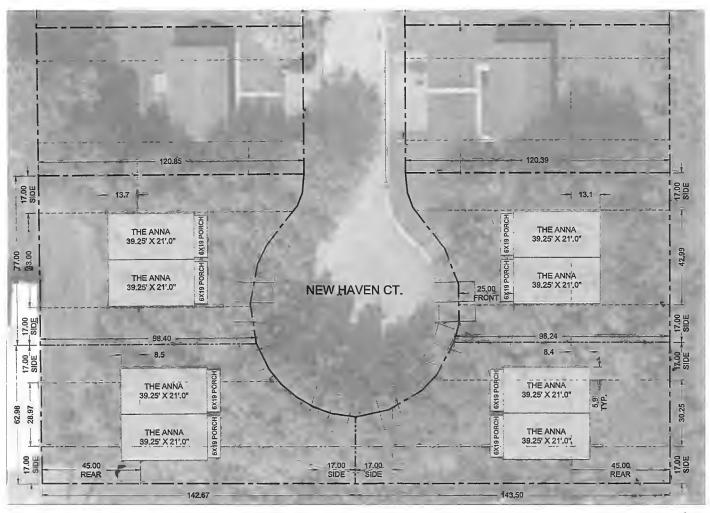
Conclusion: The proposal does not meet the requirement of the code.

08-16 125 125.2

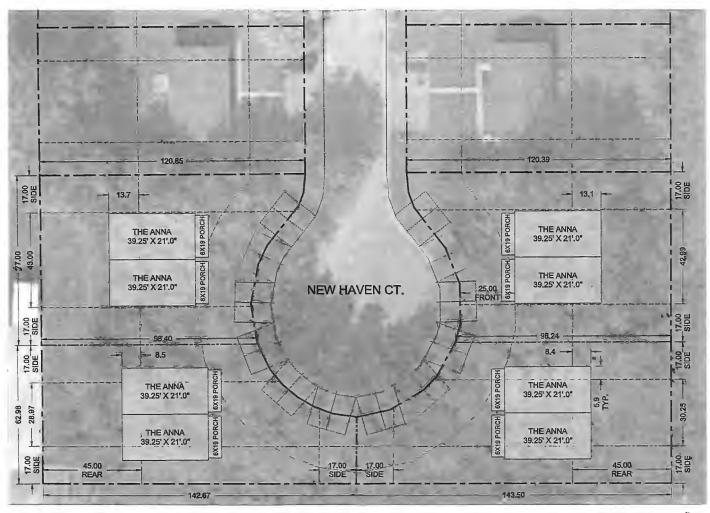
Requirement: The code requires 3.5 parking spaces for each 3+-bedroom unit

Proposal: The applicant proposes three parking spaces per unit

Conclusion: The proposal does not meet the requirement of the code.

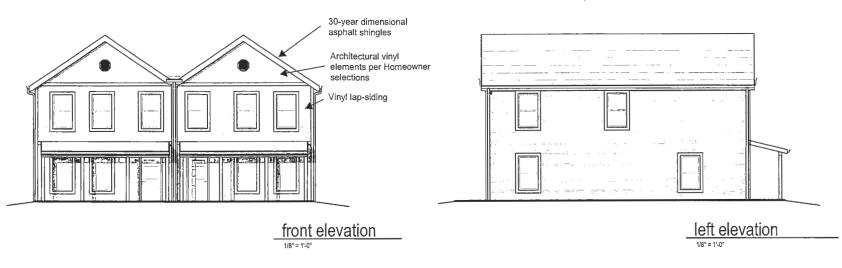


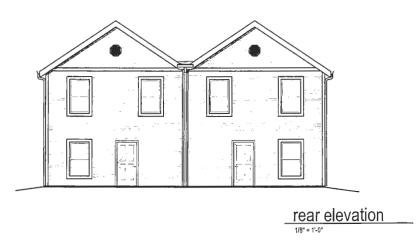
SITE PLAN STUDY

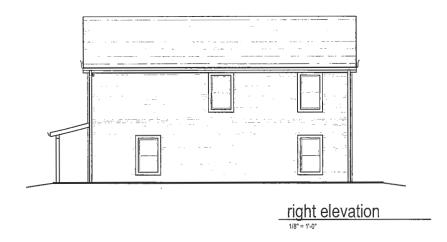


SITE PLAN STUDY T

4 BED







BED 30-year dimensional asphalt shingles Architectural vinyl elements per Homeowner selections Vinyl lap-siding

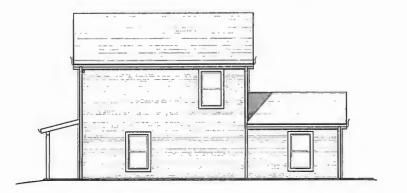
front elevation

1/8" = 1'-0"

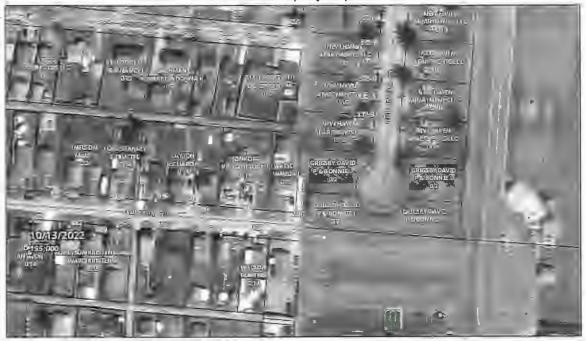
left elevation



rear elevation



right elevation



December 22, 2022

O Street Number Only Centerline Labels

O Sales - 2022

Owner Name & Acres = County Road

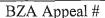
Driveway

Interstate/US/State Route — Other Road Type Municipal Corporations

___ Jurisdictional Townships

1:1,128 0 0.0075 0.015 0.03 ml

0.015 0.03





CITY OF NEWARK ENGINEERING & ZONING

c/o Engineering Department

40 West Main Street | Newark, Ohio 43055 | Tel 740.670.7727 | Fax 740.349.5911 | www.newarkohio.net

BOARD OF ZONING APPEALS APPLICATION Rev 2/10 Owner Telephone: 740-975-4980 Name: Donald Dunlap 963 Wells Ave Address: E-mail: **Applicant** Name: Telephone: Same as above E-mail: Address: Lessee Telephone: Name: E-mail: Address: Parcel Auditor's Parcel #: Address of Parcel: (Number & Street, City, State, Zip) 054-228378-00.000 963 Wells fre 054-228378-00.000 On the North South East West side of the street, between the following intersections: Lot Number: **Subdivision Name:** 182, 183, 184 **Zoning Classification: Proposed Use:** If filling out electronically, click box to display dropdown If filling out electronically, click box to display dropdown RH (Specify Use): Notes: (Optional) Appeal The Application is a request to permit the following: Alteration Maintenance □ Conditional Use Conversion In accordance with the plans filed herewith, describe the building or use: Multiple accessory structures on the lot

Appeal Continued
This project is not permitted by the Zoning Code for the following reason(s):
The number of accessory structures exceed what is permitted (4 total). Exceeds by The structures are located in the side of Front yard. They are supposed to be in
The structures are located in the side of Front yard. They are supposed to be in
the star yard.
Please outline the circumstances, which you feel would warrant a variance to the requirements of the
Zoning Code: NEED THE Shed FOR STORAGE FOR BUILDING MATERIALS FOR THE REBUILD OF THE MOUSE
MATERIALS FOR THE REBUILD OF THE MOUSE
Has there been any previous application or appeal on these premises? □Yes ☑No When?
This application is a request for modification of the requirements of the following Article(s)/Section(s) or
the Zoning Code: (List) 86. 3. 1
86.3.2

	Required Documents (Must be signed and returned to the Engineering Department.)
□A.	Original Application
$\square B$.	List of owner names, street addresses and tax mailing addresses for all properties lying within 200 feet radius of
	the entire property in question. Number the parcel list. This will correspond with the Tax Map in C below.
$\square C$.	Tax Map from the County Engineer indicating boundaries of this property in question and properties described in
	B above. Number each parcel on the map to match its corresponding name, location and mailing address in
	list B above.
$\square D$.	Site Plan showing location of existing and proposed structures, property lines, setbacks and dimensions.
$\Box E$.	Elevation drawings of the front, side and rear of the proposed building or structure. Identify all major exterior
	finish materials on the elevation drawing.
$\Box F$.	Application Fee of \$50.00 Cash or Check made payable to the City of Newark
□G.	Application Fee of \$25.00 for Off-Premise Variable Message Sign
□H.	Additional documentation at the discretion of the applicant for support of the Appeal

Upon receipt of this application and the required documents listed above, you will be notified of the date and time of the hearing at which time you or a representative must appear.

into the city Row.

Zoning Application # BZA Appeal #

Dugle Vang Z
(Owner/Applicant Signature)
Before me, a Notary Public in and for County in the State of, personally
appeared Donald E Danley, Tr who, by me being duly sworn, says that he is the
(Applicant's name)
of the parcel of land with reference to which the within appeal is made; and
(Applicant, owner, lessee)
that the statement of facts contained herein above is true.
NOTARY PUBLIC STATE OF OHIO MY COMMISSION EXPIRES (Notary Public signature)

DO NOT WRITE BELOW THIS LINE – FOR OFFICE USE ONLY				
Status:	Date:	Zoning Reviewer:	Date Notified:	Date: Rcvd. Date: 1 5 2023
□ Incomplete				Paid Date: 12023 Check Cash (circle one)
► Forward to BZA	1/12/2023	BAM		Check #Amount \$_50.00
□ Hold	,	Reason:		

BOARD OF **Z**ONING **A**PPEALS

PROJECT REVIEW SHEET

BZA CASE NO. 22-44

Date of Review: 1/11/23

Address of Project: 963 Wells Ave Current Zoning: RH

Project Description: Multiple Storage Sheds

B.Z.A. Approval Required?	Yes
Planning Commission Approval Required?	No
Engineer's Approval Required?	No
Law Director's Approval Required?	No
City Council Approval Required?	No

Ordinance / Article / Section

Requirement / Proposal / Conclusion

<u>08-16</u> <u>86</u> <u>86.3</u>

Requirement: In a residential district accessory structures are limited to 2 per lot. They must be

located in the rear yard, and have setback of 5' from the property line

Proposal: The applicant has installed four accessory structures on his lot, without the

issuance of a zoning permit. All four appear to be in the side yard, and two of them appear to encroach into the public right of way. The owner is asking for a

variance to leave the accessory structures as they sit.

Conclusion: The property does not meet the requirement of the code.



City of Newark Zoning/Sign/Fence Application for Certificate of Plan Approval

Office	Use Only			
Applica	tion#		-1	
Applica	tion Date:	12/2	222	
Date Pa	aid:			
Paid:	Check	Cash		
(Circle one)				
Check	Number _			
Amoun	t \$			

	Nature of Project: ☐ Addition ☐ Alteration ☐ New Construction ☐ Change of Occupancy/Use ☐ Sign ☐ Fence Please note, demolitions require a separate application. Upon completion, print to .pdf prior to printing to your printer to ensure proper formatting.						
	Description of Project:						
	Address of Project (Number & Street):			Auditor's Parcel #: 054-228378-00-000			
ct		Subdivisio	n Name:	Entrance to Subdivision is off of:			
Project	On the North South East W Between the intersection of: (give streets)	lest side o	f street:	Site Telephone:			
5	Between the interestion on (give execut)			Site Fax:			
	Flood Hazard area? N/A ☐ Floodwa	y □100 Yr	□ 500 Yr	Sewer System: □Public □Private			
	Flood Zone:	A	rport: Yes□ No □	Water System: □Public □Private			
	Is this property part of a Homeowners A	ssociation	? Yes□ No □				
	If yes, has the HOA been notified of this Pla	an? Yes□	No □				
¥	Has there been a Board of Zoning Appea	als (BZA) v	variance granted for	this project?			
Board	Yes□ No □ If yes, BZA Application # Da	ate:					
ž	Property Owner: GiNA M. DONAL E DUNAL	J. C		Telephone: 740 \$ 9775-4980			
Juner	Address: 963 WEIIS AVE			E-mail:			
0	City: NEWARK	State:	Zip: 43055	Fax:			
nt	Applicant Name: DONALO E DUNLAD JR	Sam	e as above: 🛛	Telephone:			
fica	Address:			E-mail:			
App		State:	Zip:	Fax:			
	NEWARK						
tor	Contractor Name:	Sam	e as above:□	Telephone:			
Contractor	Address:	*-		E-mail:			
Con	City:	State:	Zip:	Fax:			



City of Newark Zoning/Sign/Fence Application for Certificate of Plan Approval

Z –	
	Application #

Zoning Fees

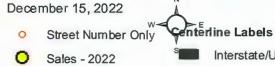
	Project floor area - sq ft	Fee per sq ft	Fees
Application Fee			\$22.50
(Minimum for all Certificates)			of English
Residential - 1, 2 & 3 Family Dwellings (Maximum Fee \$225)		\$0.09	1 3444
Commercial, All other Structures (Maximum Fee \$450)		\$0.09	157 E
Residential - Accessory Structures Fee \$7.50 - Fences, Garages, Sheds, Decks***	enter fee or 0		· I sale
Change of Occupancy/Use		\$0.00	\$0.00
TOTAL(tab out of last field to autocalculate)			Total Structure Fee

^{***}Fences, Garages, Sheds, Decks (detached), Porch (with no roof or sidewalls). \$7.50 fee will show in the total if box is checked.

		# of signs this size	Fee <u>per sign</u>		Fees
	Application Fee				\$22.50
SI	(Minimum for all Certificates)				922.00
Signs	Sign Face Area = 1 – 10 Sq Ft		\$30.00		:
S	Sign Face Area = 11 - 40 Sq Ft		\$120.00		
	Sign Face Area = 41 - 100 Sq Ft		\$180.00		1
	Sign Face Area = 101 - 300 Sq Ft		\$255.00		No.
	TOTAL(tab out of last field to auto-			Total Sign Fee	
	calculate)				1

DO NOT WRITE BELOW THIS LINE – FOR OFFICE USE ONLY					
Status Date Examiner Signature Date Notified					
□ Incomplete			·		
☐ Disapproved					
☐ Approved					
□ Hold		Reason:			

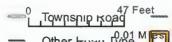




Owner Name & Acres

Interstate/US/State Route

County Road



Other koau Type M

Driveway Licking County Auditor GIS

Interstates

Municipal Corporations

Jurisdictional Townships

2022

LICKING COUNTY TAX MAP





Street Number Only

Sales - 2022

Owner Name & Acres

Centerline Labels

Interstate/US/State Route

County Road





Driveway

Jurisdictional Townships

Municipal Corporations

Interstates

2021

LICKING COUNTY TAX MAP



December 15, 2022

Street Number Only

Sales - 2022

Owner Name & Acres

Interstate/US/State Route

County Road

Centerline Labels

Township Road Feet

Other koau Type MES

Driveway

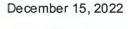
Municipal Corporations Jurisdictional Townships

Interstates

2020

LICKING COUNTY TAX MAP





Street Number Only

Sales - 2022

Owner Name & Acres

enterline Labels

Interstate/US/State Route

County Road

Townsnip road

Other Road Type

47 Feet

0.01 M

Driveway

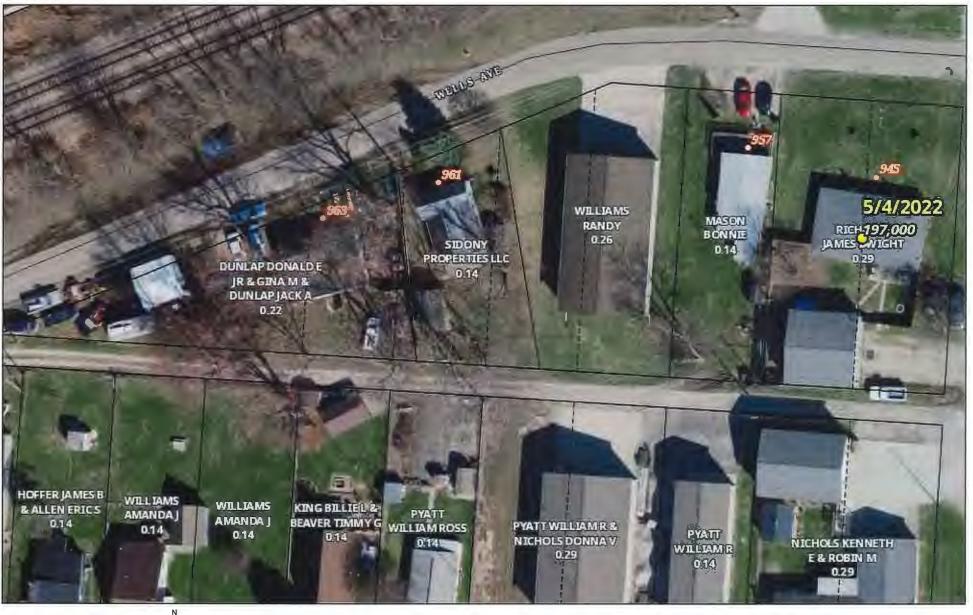
Interstates

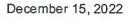
Municipal Corporations

Jurisdictional Townships

2019

LICKING COUNTY TAX MAP





Street Number Only

0

Sales - 2022

Owner Name & Acres

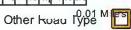
Interstate/US/State Route

County Road

Centerline Labels



Driveway



Licking County Auditor GIS

Interstates







LICKING COUNTY TAX MAP





Street Number Only

0

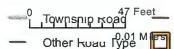
Sales - 2022

Interstate/US/State Route

Owner Name & Acres

County Road

Centerline Labels



Driveway

Interstates

Municipal Corporations

Jurisdictional Townships

es

LICKING COUNTY TAX MAP

2016





2015 LICKING COUNTY TAX MAP



Licking County **Building Code Department** 740.349.6671 Fax - 740.349.6672 675 Price Road Newark, OH 43055 PERMIT NUMBER R-222382

JURISDICTION

CITY OF NEWARK

1/9/20

GRID NUMBER

THE BUILDING ADDRESS MUST BE VISIBLE FROM THE STREET

This certificate, the approved plans, and all inspection reports must be on the jobsite and located at the front door (in the case of multiple units, in the lowest numbered unit) before an inspection can be conducted.

This certificate expires if construction does not begin within 12 months of approval date of the construction documents, or if work is delayed or suspended for more than 6 months.

mspection requests must be mad			
DESCRIPTION & LOCATION OF PROJECT: RESTORATION / ALTERATION 963 WELLS AVE	740-349- 6671 REQUIRED 740-349- 6671 6671		
NEWARK, OH 43055 OWNER: DUNLAP, DONALD 963 WELLS AVE NEWARK, OH 43055 CONTRACTOR: SAME AS OWNER	DO NOT POUR CONCRETE UNTIL THIS BLOCK IS SIGNED PERIMETER FOOTINGS		
APPLICANT: DUNLAP, DONALD	ELECTRICAL (Underslab)		
FLOOR AREAS (In Square Feet) TOTAL 0	DO NOT INSTALL DECKING ON OUTDOOR DECKS UNTIL THIS BLOCK IS SIGNED RAISED WOOD DECK JOISTS		
NON-HABITABLE 0 BUILDING DATA: PRESENT USE RES1,2,3 FAM USE GROUP R CONSTRUCTION TYPE VB	DO NOT INSTALL SUBFLOOR OVER CRAWL SPACE JOISTS UNTIL THIS BLOCK IS SIGNED CRAWL SPACE FLOOR JOISTSCRAWL SPACE INSULATION		
WORK AUTHORIZED UNDER THIS PERMIT IS LIMITED TO: STRUCTURAL	DO NOT COVER MASONRY FIREPLACE LINER UNTIL THIS BLOCK IS SIGNED MASONRY FIREPLACE (First Liner)		
APPROVED BY: APPROVAL DATE	DO NOT COVER TRENCH UNTIL THIS BLOCK IS SIGNED ELECTRICAL UNDERGROUND ELECTRICAL METER HOOK-UP		
Please read and review both sides of this DO NOT INSTALL EXTERIOR SHEATHING OR			
form before signing.	SIDING UNTIL THIS BLOCK IS SIGNED		

I, the undersigned, as Owner or Agent with expressed consent of the Owner of the abovereferenced premises, hereby give consent for entry onto subject premises by personnel of the Building Code Department.

Dare	(1)	20	col	25
Signature	of Own	er or A	gent	

Plumbing, seotic, and water systems are not a part of this

(APPLIES TO POST FRAME CONSTRUCTION ONLY) **HEADER TO**

POST CONNECTION

DO NOT INSULATE UNTIL THIS BLOCK IS

SIGNED (ELECTRIC, PLUMBING, AND HVAC MUST BE INSTALLED BEFORE A ROUGH FRAMING CAN BE REQUESTED)

ROUGH ELECTRICAL

ROUGH HVAC

PC FILE 22-58:

Zoning Application #

BZA-23-61

BZA Appeal #



CITY OF NEWARK ENGINEERING & ZONING

c/o Engineering Department

40 West Main Street | Newark, Ohio 43055 | Tel 740.670.7727 | Fax 740.349.5911 | www.newarkohio.net

FOUR M Manufacturing Group Inc., P.O. Box 2118, Memphis, Tn. 38101

	BOARD OF ZONING APPEALS A	PPLICATION	
Rev 2/10			
	Owner		
Name:	Justin Koepl, Project Engineer	Telephone: 901-481-5547	
Address:	Four M Manufacturing Group Inc, PO Box 2118, Memphis, TN 38101	E-mail: justin.koepl@ipaper.com	
	Applicant		
Name:	Michael Lee	Telephone: 314-960-0195	
Address:	12 Sunnen Dr. St. Louis, MO 63143	E-mail: mike.lee@thecdcompanies.com	
	Lessee		
Name:		Telephone:	
Address:		E-mail:	
	The state of the s		
	Parcel		
	f Parcel: (Number & Street, City, State, Zip) 1851 Tamarack Rd. Newark, OH 43055	Auditor's Parcel #:	
On the □N	North ⊠South □East ⊠West side of the street, between and	the following intersections:	
Subdivisio	on Name:	Lot Number:	
	lassification: Light Industrial District (LI) ctronically, click box to display dropdown	Proposed Use: If filling out electronically, click box to display dropdown (Specify Use): New Maintenance Room & offices	
Notes: (Optional) The existing building was constructed in the mid 1970's and is not long enough for the new equipment requirements of a modern box material production facility. To account for this, the existing maintenance room is being relocated to the exterior building proposed, so that the new equipment can be located inside the existing building. Modernization will eliminate cardboard waste during production, and for the client, and again, and again for the end user (customer). The proposed equipment is capable of making multiple sizes of boxes sized for the requirements of the product.			
	Appeal		
The Appli	ication is a request to permit the following:		
Erection ☑ Alteration ☑ Maintenance □ Conversion □ Conditional Use □			
	ance with the plans filed herewith, describe the building engineered metal building with concrete block walls that will as		

projections and does not impact the available parking or fire loop systems. Relocating the maintenance shop area to a new structure will allow the box plant facility to maintain it's existing client product lines and provide an opportunity to correct a sanitary sewer code issue which the original building construction and codes allowed. New building codes do not allow this. The production plant sanitary sewer effluent waste water is sampled and tested as a current requirement of the

City, but this line is directly connected to the office sanitary sewer down stream. The sanitary sewer lines will be

separated and the facility production waste water is re-routed outside of the building.

Zoning Application #

Ca4. Ce. 2

BZA Appeal #

Appeal Continued

This project is not permitted by the Zoning Code for the following reason(s):

Parcel is approximately 441,699 S.F. +/-, with proposed 30% building coverage, which exceeds the lot density requirements of maximum 25% building coverage. A variance from BZA will be needed before full zoning approval. Existing building area is 127,424 SF. Building & exterior break patio proposed roof area is 4,727 SF = 3.7% approval. Increase in building roof area compared to the existing conditions.

Please outline the circumstances, which you feel would warrant a variance to the requirements of the Zoning Code: Proposed building and relocated exterior patio roof addition of 4,727 SF. Quality green area is not impacted. Trees are not displaced. Screening is not impacted.

The proposed addition location provides for modernizing the equipment for efficiency, energy consumption, and reducing product waste. The existing building layout on the site has been exceeded previously and the location planned for the building addition is purposely placed in a lawn area requiring maintenance which can be eliminated or reduced. The area requested for the building addition is located between an open area between building projections and minimizes the impact to tree lines and quality green zones on the site while allowing the overall facility to create a product which produces less waste product for the overall community and country.

Has there been any previous application or appeal on these premises? □Yes □No When? Not sure?

This application is a request for modification of the requirements of the following Article(s)/Section(s) of the Zoning Code: (List)

Lot coverage only for Article 130.6 Table 130.6.7

Required Documents

(Must be signed and returned to the Engineering Department.)

- MA. Original Application
- □B. List of owner names, street addresses and tax mailing addresses for all properties lying within 200 feet radius of the entire property in question. Number the parcel list. This will correspond with the Tax Map in C below.
- ☐C. Tax Map from the County Engineer indicating boundaries of this property in question and properties described in B above. Number each parcel on the map to match its corresponding name, location and mailing address in
- XD. Site Plan showing location of existing and proposed structures, property lines, setbacks and dimensions.
- Elevation drawings of the front, side and rear of the proposed building or structure. Identify all major exterior finish materials on the elevation drawing.
- MF. Application Fee of \$50.00 Cash or Check made payable to the City of Newark
- ☐G. Application Fee of \$25.00 for Off-Premise Variable Message Sign
- ☐H. Additional documentation at the discretion of the applicant for support of the Appeal

Upon receipt of this application and the required documents listed above, you will be notified of the date and time of the hearing at which time you or a representative must appear.

PC FILE 22-58: Zoning Application

BZA Appeal #

(Owner/Applicant Signature)					
Before me, a Notary Public in and for	County in the State of	, personally			
appeared	who, by me being duly sworn	, says that he is the			
(Applicant's name)					
of the parcel of	land with reference to which the within app	eal is made; and			
(Applicant, owner, lessee)					
that the statement of facts contained herein above is	s true.				
Subscribed and sworn to before me this	day of				
	(Notary Public signature)				

DO NOT WRITE BELOW THIS LINE – FOR OFFICE USE ONLY				
Status:	Date:	Zoning Reviewer:	Date Notified	Date: Rcvd. Date: 1/12/2023
□ Incomplete				Paid Date: 1-12-28>3 Check Cash (circle one)
Forward to BZA	1/13/202	BON		Check # 5260 Z Amount \$ 50 - 60
□ Hold		Reason:		

BOARD OF **Z**ONING **A**PPEALS

PROJECT REVIEW SHEET

BZA CASE NO. 23-01

Date of Review: 1/11/23

Address of Project: 1851 Tamarack Rd

Current Zoning: LI

Project Description: Building Addition

Ordinance / Article / Section

Requirement / Proposal / Conclusion

08-16

64 64.6.2

Requirement: In the Limited Industrial District (LI), the combined square footage of the

footprint of all buildings and structures on a given lot shall not be more than 25%

of the lot area

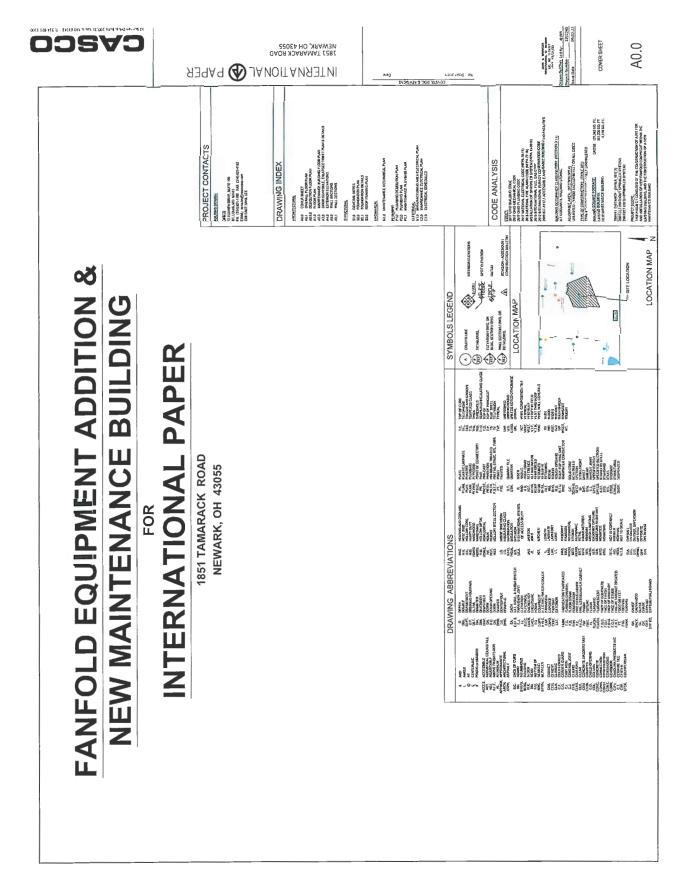
Proposal:

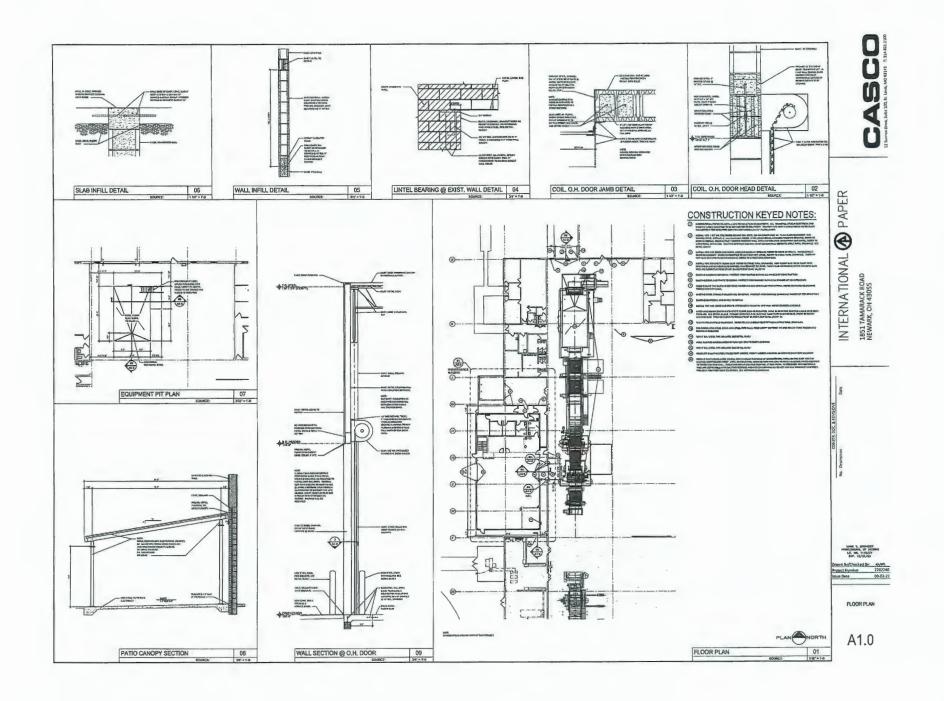
The applicant proposes to construct a 4,727 sq. ft. addition, which will create of

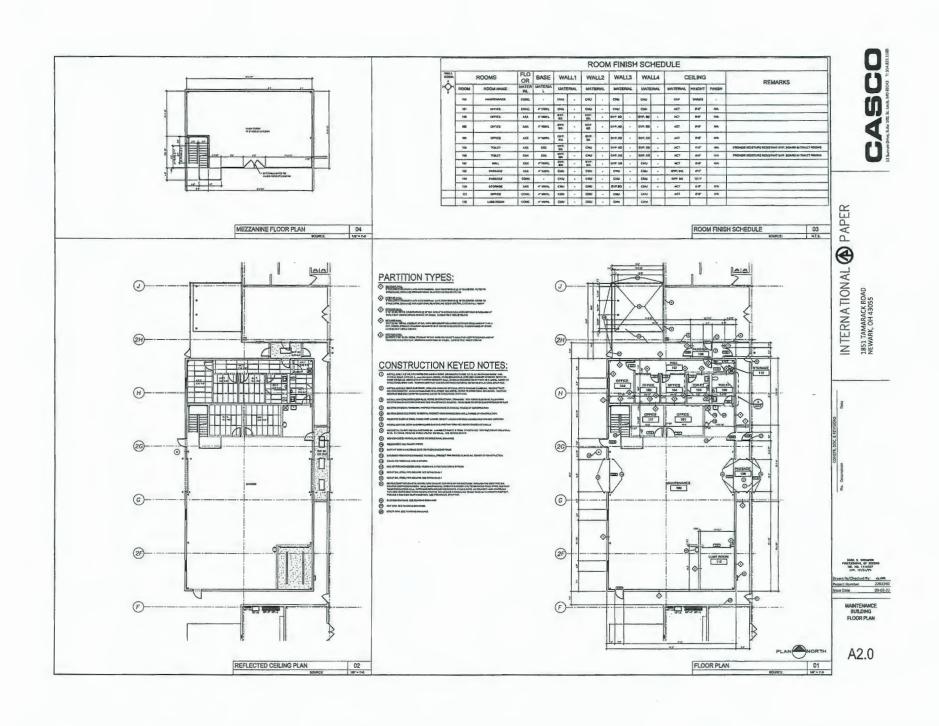
footprint with a combined square footage that totals 30% of the lot area

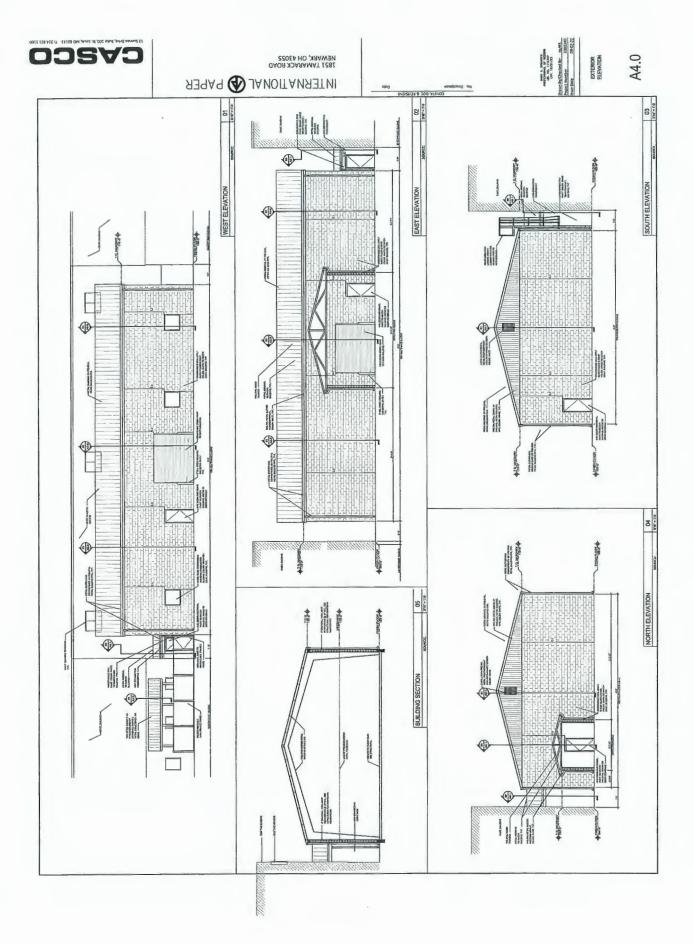
Conclusion:

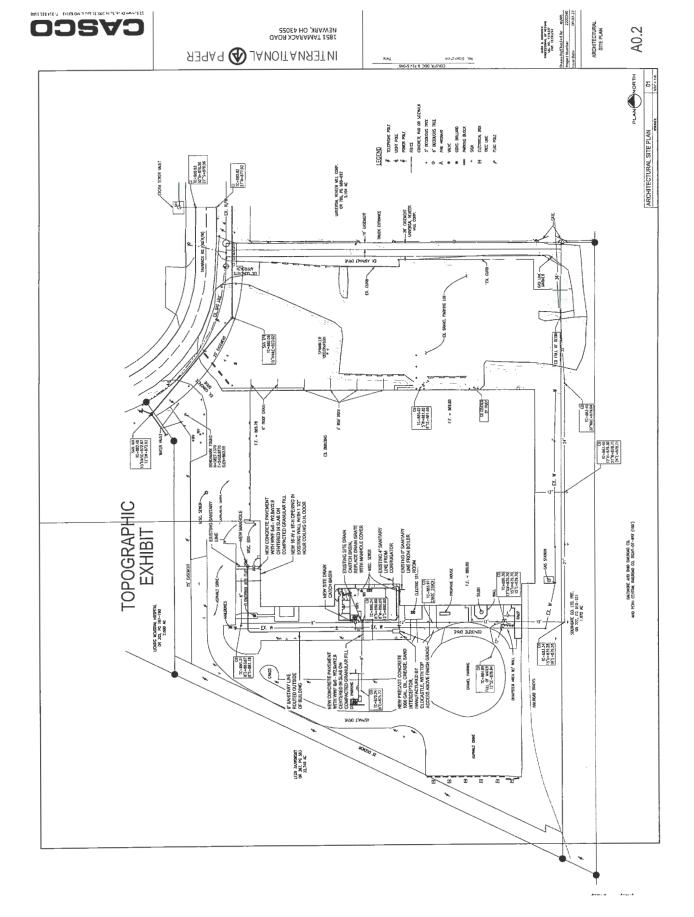
The proposal does not meet the requirement of the code.













INTERNATIONAL PPPER

\$1.00 FEMALE 200 MED 20



A0.1



CITY OF NEWARK **ENGINEERING & ZONING**

c/o Engineering Department

40 West Main Street Newark, Ohio 43055 Tel 740.670.7727 Fax 740.349.5911 www.newarkohio.net

January 13, 2023 Date:

Board of Zoning Appeals To:

Subject: Interpretation of the Zoning Code of Newark, Ohio

Use: **Existing Internet Based Firearm Home Business**

7868 Licking Springs Rd Address:

I respectfully request that you review the Zoning Code and determine that an internet based firearm business is a permitted use as a home business located at 7868 Licking Springs Rd, Newark, OH. This property is an existing legal non-conforming property because of its business nature and a residential zoning classification (RL).

Submitter:			
George Carter			
Name			
40 W Main St			
Street Address			
Newark_	OH	43055	
City	State	Zip Code	
740-670-7729	_		
Home Phone Number		Mobile Phone Number	
Lege Carte		gearter@newar Kch:o.net E-Mail Address	
Signature	E-Mail Address		
D	O NOT WRITE	BELOW THIS LINE	
1/26/23			
Meeting Date			
At its meeting on the above d	ate, the Board of	Zoning Appeals determined that the use/business	
described above is	at 7868 I	Licking Springs Rd.	
Chairman, Board of Zoning Appeals		Date	
K:/Zoning-Planning/RZA/RZA forms/RZ	△ Interpretation doc		