



## AVPOA

113 Hasbrouck Circle  
Howard, OH 43028  
P: 740-397-3311 F: 740-397-2927  
Hours: (M-F) 8:30 am - 4:30 pm  
www.applevalleypoa.com

# Form 100-HG

## Project Type:

- ☐ HOME and/or  
☐ GARAGE

## Project Number *(For Internal Use Only)*

Recvd. \_\_\_\_\_ By: \_\_\_\_\_ ☐

☐ Reviewed: \_\_\_\_\_ ☐

Submitted to ACC: \_\_\_\_\_

Submitted to Board: \_\_\_\_\_

\_\_\_\_\_ ☐ Phone ☐ Mail

☐ Approved ☐ Disapproved

Date: \_\_\_\_\_

Architectural Committee

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Project Address: \_\_\_\_\_

Subdivision/Lot No.: \_\_\_\_\_

Property Owner's Name: \_\_\_\_\_

Address: \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Home Phone: \_\_\_\_\_

Work Phone: \_\_\_\_\_

Contractor's Name: \_\_\_\_\_

Business Phone: \_\_\_\_\_ Mobile Phone: \_\_\_\_\_

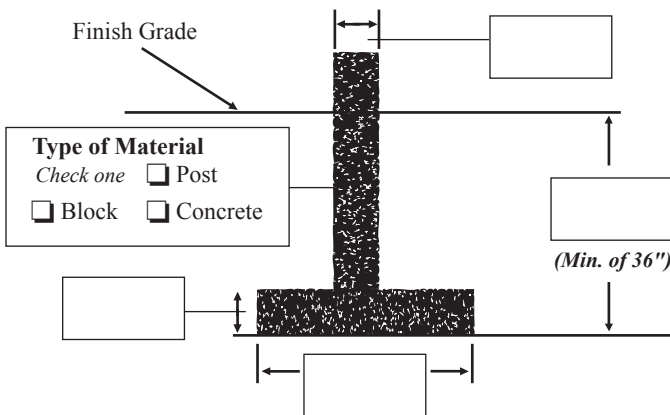
## Structure Detail

Sq. Footage: Ground Level \_\_\_\_\_ Roof Pitch: \_\_\_\_\_

Second Story \_\_\_\_\_ Total Heights: \_\_\_\_\_

1/2 Story \_\_\_\_\_ Deck(s) Size: \_\_\_\_\_

## Foundation & Footer



## Materials & Colors

**EARTHTONE ONLY:** A color sample must be submitted with this form. To remain consistent with the Restrictive Covenants and Bylaws. The color must be AVPOA APPROVED EARTHTONE in nature and consistent with the Architectural Control Committee color samples.

### Exterior:

☐ Vinyl Siding ☐ Wood Siding ☐ Brick or Stone ☐ Composition

☐ Other: \_\_\_\_\_

Color: \_\_\_\_\_

### Trim:

☐ Vinyl ☐ Wood ☐ Aluminum ☐ Other \_\_\_\_\_

Color: \_\_\_\_\_

### Fascia:

☐ Vinyl ☐ Wood ☐ Aluminum ☐ Other \_\_\_\_\_

Color: \_\_\_\_\_

### Roofing Shingles:

☐ Three Tab ☐ Dimensional ☐ Metal - Gauge: \_\_\_\_\_

Year: ☐ 15 ☐ 20 ☐ 25 ☐ Other: \_\_\_\_\_

Color: \_\_\_\_\_

Type of Structure: ☐ Stick Build ☐ Modular

☐ Other: \_\_\_\_\_

## Points: *This section only applies to Home Construction.*

**In order to receive a building permit for your new home, YOU MUST MEET the 60-point REQUIREMENT.**

*Check all that apply.*

- ☐ 100 Sq. Ft. above Twp. Min or  
400 Sq. Ft. above Twp. Min for  
Total Living Space (15)

☐ 6" x 12" or Steeper Roof (5)

☐ Attached Garage (15)

☐ Cedar Siding/Log Home (15)

☐ Concrete Driveway (10)

☐ Covered Front Porch (10)

☐ Full Basement (15)

☐ Masonry Brick or  
Stone Front (15)

*(greater than 50% of the viewable  
frontage excluding windows and doors)*

☐ Metal Roof (10)

*(main roof)*

**Total Points** \_\_\_\_\_

..... OVER .....

*Please indicate which type of lot.*

## Back Side \_\_\_\_\_ (Min. of 8')

This image shows a full page of blank graph paper. The grid consists of small, uniform squares formed by thin, light gray lines. There are no margins, text, or other markings on the page.

S: FORMS > Form 100-HG 2/2013

BROWN TOWNSHIP, KNOX COUNTY

To the Board of Township Trustees: The undersigned hereby applies for a Zoning Certificate for the following use; to be issued on the basis of the representations contained herein, all of which applicant says are true:

FOR OFFICE USE ONLY. DO NOT WRITE IN THIS BOX

APPLICATION NO.

1) Contact Information:

• PLEASE PRINT CLEARLY •

Location of property: \_\_\_\_\_

Name of Land Owner: \_\_\_\_\_

Address: \_\_\_\_\_

Phone: \_\_\_\_\_ Mobile #: \_\_\_\_\_

Contractor: \_\_\_\_\_

Phone: \_\_\_\_\_ Mobile #: \_\_\_\_\_

2) Proposed Use:

☐ New Construction

☐ Room Addition

☐ Accessory Building

☐ Residence \_\_\_\_\_ No. of Families

☐ Business

☐ Manufacturing

☐ Sign Board Size \_\_\_\_\_

☐ Other (explain below, use additional sheet if necessary)

3) Set Backs, Dimensions, and Sketch with Scale Drawing of Structures

On a separate sheet of paper, sketch the lot showing existing buildings and proposed construction or use for which application is made. (Fill in all dimensions and indicate North). Attach with application.

Set Backs:

Main road frontage: \_\_\_\_\_ ft.

Set back from side of road right of way \_\_\_\_\_ ft.

Side yard clearance: \_\_\_\_\_ side \_\_\_\_\_ ft.

\_\_\_\_\_ side \_\_\_\_\_ ft.

Rear yard clearance: \_\_\_\_\_ ft.

Depth of lot from right of way: \_\_\_\_\_ ft.

Dimensions of Building:

Width: \_\_\_\_\_ ft.

Length: \_\_\_\_\_ ft.

Highest point of buiding: \_\_\_\_\_ ft.

Buildings:

Use: \_\_\_\_\_

Number of stories: \_\_\_\_\_

Basement: \_\_\_\_\_

(Usable floor space designed for use as living quaters, exclusive of basements, porches, garages, breezeways, terraces, attics, or or partial stories.

First floor: \_\_\_\_\_ sq. ft.

Second floor: \_\_\_\_\_ sq. ft.

Off street parking: \_\_\_\_\_ sq. ft.

4) Driveway Culverts Requirements:

Please contact Township Zoning Inspector for more information. The phone number is listed in the back of Apple Valley's Publication of the Cider Press.

5) Remarks: \_\_\_\_\_

\_\_\_\_\_

6) Signatures: 

Signed (APPLICANT)

Fees:

Homes (New) ..... \$250

Garage/Garage Addition.... \$100

Room Additions ..... \$100

Do not write below this line

Upon the basis of Application No. \_\_\_\_\_,


the statement in which are made a part hereof, the proposed use is

\_\_\_\_\_ found to be in accordance with the

Township Zoning Resolution and hereby \_\_\_\_\_

(approved-rejected)

for the FR-1 District.



Signed (TOWNSHIP ZONING INSPECTOR)

BROWN TOWNSHIP, KNOX COUNTY

Date application received: \_\_\_\_\_

Date application ruled on: \_\_\_\_\_

Fee paid: \$ \_\_\_\_\_

# Knox County Water and Wastewater Department

• Phone 740-397-7041 • 17602 Coshocton Road • Mount Vernon, Ohio 43050



## WATER & SEWER HOUSE APPROVAL

Subdivison & Lot# \_\_\_\_\_ Project Address \_\_\_\_\_

Owner \_\_\_\_\_ Contractor Name \_\_\_\_\_

Address \_\_\_\_\_ Address \_\_\_\_\_

Phone \_\_\_\_\_ Phone \_\_\_\_\_

Request Date \_\_\_\_\_ Excavator \_\_\_\_\_

Expiration Date \_\_\_\_\_ Phone \_\_\_\_\_

Basement \_\_\_\_\_ Walkout \_\_\_\_\_ Crawl Space \_\_\_\_\_ Slab \_\_\_\_\_

Depth of Cut for Basement \_\_\_\_\_

Bath in Basement Yes \_\_\_\_\_ No \_\_\_\_\_

Total Baths \_\_\_\_\_

House Staked Out Yes \_\_\_\_\_ No \_\_\_\_\_

Driveway Entrance Staked Yes \_\_\_\_\_ No \_\_\_\_\_

**Notice: Pressure Regulator Required on all Water Services**

### For Office Use Only

Suggested Water Service Size Outside \_\_\_\_\_

Approximate Sewer Location and Depth \_\_\_\_\_

House Staked to Lateral \_\_\_\_\_

Comments \_\_\_\_\_

Checked by \_\_\_\_\_

Date \_\_\_\_\_

Date P.O.A. Received \_\_\_\_\_

Time \_\_\_\_\_

P.O.A. Approval Date \_\_\_\_\_