



## 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-RA

## Project Type: ROOM ADDITION

(For Office Use Only)

**Project Number**

Date Recvd \_\_\_\_\_ By: \_\_\_\_\_

☐ Approved ☐ Disapproved

Date \_\_\_\_\_

**Committee Signatures:**

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

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

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

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

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

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

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

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

Contractor's Address: \_\_\_\_\_

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

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

### Structure Detail

**Square Footage:** Ground Level \_\_\_\_\_

Second Story \_\_\_\_\_

1/2 Story \_\_\_\_\_

**Roof Pitch:** \_\_\_\_\_

**Total Heights:** \_\_\_\_\_

### 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: \_\_\_\_\_

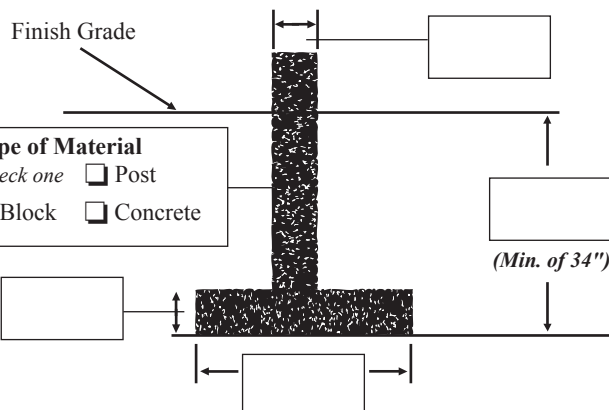
Year: ☐ 15 ☐ 20 ☐ 25 ☐ Other: \_\_\_\_\_

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

**Type of Structure:** ☐ Stick Build ☐ Modular

☐ Other: \_\_\_\_\_

### Foundation & Footer



*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.

# Application for Brown Township Zoning Certificate

Sec. 519.16 R.C.

BROWN TOWNSHIP, KNOX COUNTY

FOR OFFICE USE ONLY. DO NOT WRITE IN THIS BOX

APPLICATION NO.

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:

## • PLEASE PRINT CLEARLY •

### 1) Contact Information:

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 building: \_\_\_\_\_ ft.

#### Buildings:

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

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

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

(Usable floor space designed for use as living quarters, 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: \$ \_\_\_\_\_