



# City of Green Board of Zoning Appeals

1755 Town Park Blvd \* P.O. Box 278 \* Green, OH 44232-0278

Telephone: 330-896-6605 Fax: 330-899-0469 Email: [zoning@cityofgreen.org](mailto:zoning@cityofgreen.org)

## APPEAL / VARIANCE REQUEST APPLICATION

*Applications for an Appeal or Variance request must include one copy of each:*

- 1) Completed Appeal/Variance Request Application identifying your specific request;
- 2) Fee in the amount of \$300.00;
- 3) Completed Zoning Permit Application for the proposed project, as applicable;
- 4) Optional: Supporting documentation, photos, and/or narrative statements substantiating the request;
- 5) One 11 x 17 scalable site plan showing all dimensions & setbacks, as applicable

Application Date: 2-21-25

Applicant Name: Darren Shultz

Telephone: 330-936-8377

Applicant Mailing: 3465 S. Arlington Rd., E-116, Akron, Ohio 44312

Subject Property Address: (if different) 2993 Graybill Rd, Uniontown, OH 44685

Subject Property Parcel No.: 28-16794

Property Owner: (if not applicant) Brandon & Megan Skinner

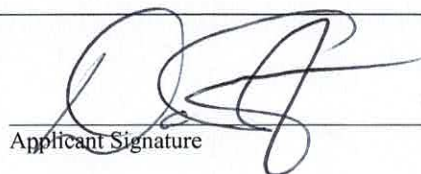
Telephone: 330-618-2751

Property Owner Mailing: \_\_\_\_\_

### THE SPECIFIC VARIANCE OR APPEAL REQUEST MUST BE STATED BELOW.

Additional supporting documents and pages of photos may accompany your request, but the request with specific information must be stated on this form; failure to include the request statement may render your application incomplete, which may also delay scheduling of your hearing.

I am requesting a variance for ~~the~~ accessory structures, a pavilion and a detached garage, which is over the max accessory use according to code 157.087.

  
Applicant Signature

2-21-25  
Date

- Adjacent property owners and the applicant will be notified by US mail 10 days prior to the hearing.
- Supporting documentation and/or photos of the subject property/project may be brought to the hearing.
- Hearings are held at the: Central Administration Building, 1755 Town Park Blvd (located off Massillon Rd, north of Steese Rd)
- Doors open at 5:30 p.m. Hearings are scheduled consecutively in the order received, starting promptly at 6:00 p.m.

Non-refundable Fee: \$300.00

Check No: \_\_\_\_\_

Visa

MC

Conf. No.: \_\_\_\_\_

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

Hearing Time: \_\_\_\_\_

BZA22-

Received By: \_\_\_\_\_

---

**2993 Graybill Rd. - Variance Request - Detached Garage & Pavilion**

---

**From** Tom Fazio <TFazio@cityofgreen.org>  
**Date** Fri 2/21/2025 3:50 PM  
**To** darren@shultzdc.com <darren@shultzdc.com>  
**Cc** Renee Wilcox <rwilcox@cityofgreen.org>

Darren,

Your request to construct a (66' X 80') 4234 square foot detached garage and a (18' X 36') 648 square foot pavilion cannot be approved because it is not compliant with code. Green Codified Ordinance 157.101 (3)(B) states that in no case shall the total footprint of all accessory structures and buildings exceed the total footprint of the principal structure.

The total square footage of the home is reported to be 4304 sf. The total of the existing pool and the proposed garage and pavilion is 5522 sf. You will need to request a variance for an additional 1218 sf to allow the garage and pavilion to be constructed.

Please contact me if you have any questions.

Thank you,  
Tom Fazio



## RESIDENTIAL ACCESSORY PERMIT APPLICATION

PARCEL NO. 28-16794

A Zoning Permit through this office is required for all structures over 30 square feet; a building permit through Summit County Dept of Building Standards is required for all accessory structures over 200 square feet. The property owner will ultimately be held responsible if permits are not obtained.

**ACCESSORY USES:** Complete areas of the application form relative to the specific project:  
\* 3 site plans – 11 x 17 \* 1 set building plans – 11 x 17 \* 2 copies of application form

### SEPTIC LOT APPROVAL:

For septic lots, the **Summit County Health Department (SCHD)** requires an assessment of the septic system prior to issuance of a building permit by Summit County Building for any residential addition or construction of an accessory use.

**This assessment is NOT REQUIRED for small garden-type sheds.**

### SETBACK REQUIREMENTS:

Sheds & storage buildings: minimum of 5 ft from rear and side yard property lines

### FEES:

The fee for all Accessory Uses is \$75; checks should be made payable to **City of Green**. We also accept Visa & Mastercard debit & credit cards, and exact cash.

Project Address: <u>2993 Graybill Rd</u>	ZIP: <u>44685</u>	Lot No: <u>—</u>	Subdivision: <u>—</u>
Applicant: <u>Darren Shultz</u>		Phone: <u>330-936-8377</u>	
Applicant Address: <u>3465 S. Arlington Rd, E-116</u>		City/State/Zip: <u>Akron, OH 44312</u>	
Contractor, if not applicant: <u>"</u>		Phone: <u>"</u>	
Contractor Address: <u>"</u>		City/State/Zip: <u>"</u>	
Contractor Email: <u>darren@shultzdca.com</u>			
Field Contact, if a problem would arise onsite: <u>Darren Shultz</u>		Cell: <u>"</u>	
Property Owner Name, if not applicant: <u>Brandon &amp; Megan Skinner</u>		Phone: <u>330-618-2751</u>	

### ACCESSORY USES:

Setbacks are measured from the structure to the **nearest** property lines, and are relative to the specific project only, i.e. deck, shed, pergola, etc.

<input type="checkbox"/> SUNROOM / PATIO ENCLOSURE	<u>480'</u>	FRONT SETBACK - PROPERTY LINE TO FOUNDATION
<input type="checkbox"/> GARAGE <u>detached</u> <u>attached</u>	<u>187'</u>	LEFT SETBACK - PROPERTY LINE TO FOUNDATION
<input type="checkbox"/> DECK <input type="checkbox"/> SHED / STORAGE BUILDING	<u>213'</u>	REAR SETBACK - PROPERTY LINE TO FOUNDATION
<input checked="" type="checkbox"/> OTHER <u>Pavilion</u>	<u>85'</u>	RIGHT SETBACK - PROPERTY LINE TO FOUNDATION
Corner Lot? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	OVERHANG SIZE <u>18'</u>	FR <u>12</u> in / L <u>12</u> in / R <u>12</u> in / RR <u>12</u> in
All Easements Shown on Site Plan? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<u>36'</u>	WIDTH OF STRUCTURE
Creek, drainage area or wetlands on property? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<u>14'6"</u>	DEPTH OF STRUCTURE
Health Dept Needed: <input type="checkbox"/> Yes <input type="checkbox"/> No		HEIGHT OF STRUCTURE
Approval Date: _____		*Maximum garage height is 18 ft to the peak, other Accessory Uses – max height is 15 ft OAH.
	TOTAL SQ FT: <u>648</u>	
	DISTURBING MORE THAN 4,356 SQ FT OF LAND AREA? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	

BZA VARIANCE: Date: \_\_\_\_\_ No: \_\_\_\_\_ Variance granted: \_\_\_\_\_

**BUILDING PERMIT: SUMMIT COUNTY DEPT. OF BUILDING STANDARDS** 1030 E. TALLMADGE AVE. 330-630-7280  
LOCATED 2 MILES EAST OF THE RT. 8 INTERSTATE EXIT.

THE UNDERSIGNED HEREBY CERTIFIES THAT THE INFORMATION IN AND WITH THIS APPLICATION IS TRUE AND ACCURATE, CONSENTS TO AGENTS OF THE CITY ENTERING PREMISES FOR INSPECTION AND VERIFICATION OF INFORMATION SUBMITTED, AND IF THIS APPLICATION IS APPROVED, TO VERIFY CONFORMANCE TO REQUIREMENTS AND CONDITIONS OF SUCH APPROVAL.

Applicant Signature: [Signature] Date: 2-21-25

3/28/2016