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

5) One 11 x 17 scalable site plan showing an unitensions & setoacks, as applicable	Application Date: 8/11/2025
Applicant Name: Jack B Runner	Telephone: 330-472-7555
Applicant Mailing: 4919 Mayfair Road, North Canton, Ohio 44720	
Subject Property Address: (if different) Same	
Subject Property Parcel No.: 2811572	
Property Owner: (if not applicant) Same	Telephone:
Property Owner Mailing: Same	
THE SPECIFIC VARIANCE OR APPEAL REQUEST MUST BE STATED BE Additional supporting documents and pages of photos may accompany your request information must be stated on this form; failure to include the request statement may which may also delay scheduling of your hearing. We are respectfully requesting a variance for the following:	t, but the request with specific
1. A variance to permit an accessory structure to be built which would be 92 SQ FT in exce	ess of the maximum allowed accessory use
2. A variance to permit an accessory structure to be built which would be 912 SQ FT in excess	s of the associated primary structure SQ FT
3. A variance to permit an accessory detached garage height of 24 feet where 18 fee	t is the maximum allowed overall height
We only have a single car garage, with very limited space for storage. Our vehicles,	lawnmowers, utility vehicles, classic car
and tractor are outside and exposed to the elements. We have almost 3 acres of land in the woods, with	ample space for a barn the size we are requesting
Applicant S	8-11-3 ignature Date
 Adjacent property owners and the applicant will be notified by US mail 10 days prior to the Supporting documentation and/or photos of the subject property/project may be brought to to Hearings are held at the: Central Administration Building, 1755 Town Park Blvd (loca Doors open at 5:30 p.m. 	the hearing. ted off Massillon Rd, north of Steese Rd) tarting promptly at 6:00 p.m.
Non-refundable Fee: \$300.00 Check No: Cash Visa	MC Conf. No.: 80969
Hearing Date: 918 2025 Hearing Time: 600pm BZA22	BZAZ5 -0023
Received By: JD	

Renee Wilcox

From:

Jason Blackburn

Sent:

Tuesday, July 22, 2025 3:16 PM

To: Cc: Jack Runner Renee Wilcox

Subject:

RE: 4919 Mayfair Rd - Garage Accessory Pemit

Attachments:

FORM - BZA Application (Fillable PDF)_202303061008194708.pdf

Follow Up Flag:

Follow up

Flag Status:

Flagged

Jack,

I have reviewed the Residential Accessory Permit Application submitted 7/21/25 for the subject address. The permit is denied based on conflict with Green Codified Ordinance (GCO) section 157.101 Site Development Standards for Residential Districts (3)(A).

- The subject parcel 2811572 is in excess of 20,000 square feet (SQ FT) and therefore provided a maximum accessory use of 2,500 SQ FT. The existing 12'x16' shed and proposed garage (40'x60') equates to 2,592 SQ FT.
- 2) Per GCO 157.101(3)(B), accessory use cannot exceed cannot exceed the primary structure SQ FT. The existing home on parcel 2811572 is shown by Summit County as 1,680 SQ FT. Accessory use as proposed equals 2,592 SQ FT.
- 3) Last, GCO 157.087(2)(F) Accessory Uses limits the height for accessory detached garage to 18 ft in overall height. You have proposed an accessory detached garage in 24 ft in overall height.

You may seek a variance from the Board of Zoning Appeals for each of the conflicts listed above, application attached. Multiple variances can be address under a single application. Please submit the completed BZA application by 8/22/25 to be placed on the September 18 BZA Agenda.

- 1) A variance to permit an accessory structure to be built which would be 92 SQ FT in excess of the maximum allowed accessory use
- A variance to permit an accessory structure to be built which would be 912 SQ FT in excess of the associated primary structure SQ FT
- 3) A variance to permit an accessory detached garage height of 24 feet where 18 feet is the maximum allowed overall height

Jason Blackburn

Code Inspector

Zoning | City of Green



(330) 896-6605, ext 248



jblackburn@cityofgreen.org



cityofgreen.org



1755 Town Park Blvd





From: Jack Runner < jack@richardsfence.com>

Sent: Tuesday, July 22, 2025 8:09 AM

To: Jason Blackburn < jblackburn@cityofgreen.org>
Subject: Fwd: 4919 Mayfair Rd - BZ Approval

Good morning Jason, here is the approval for the septic from summit county health department for 4919 Mayfair Road. Let me know if you need anything else.

Thanks Jack.

----- Forwarded message ------

From: Jack Runner < jack@richardsfence.com>

Date: Tue, Jul 22, 2025 at 7:49 AM

Subject: Fwd: 4919 Mayfair Rd - BZ Approval

To: <jackrunner65@gmail.com>

----- Forwarded message ------

From: Ellie Miller < emiller@schd.org> Date: Thu, May 29, 2025 at 11:26 AM Subject: 4919 Mayfair Rd - BZ Approval

To: jack@richardsfence.com < jack@richardsfence.com >

Hi Jack,

Please see the attached approval report.

Thanks!

Ellie Miller, BS, REHS

Environmental Health Specialist

Summit County Public Health 1867 West Market Street, Akron, OH 44313

Office: (330) 812-3974 Mobile: (330) 734-9457 Fax: (330) 923-6436

www.scph.org

City of Green Zoning Division

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

Telephone: Fax:

330-896-6605 330-899-0469

Email:

zoning@cityofgreen.org

RESIDENTIAL ACCESSORY PERMIT APPLICATION

PARCEL NO. 2811572

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

* 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.

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: 4919 Mayfair Road	ZIP: 44720	Lot No:	Subdivision:	
Applicant: Jack Runner	Phone: 330-472-7555			
Applicant Address: 4919 Mayfair Road		City/Sta	te/Zip: N.Canton/OH/44720	
Contractor, if not applicant:	Phone:			
Contractor Address:	City/State/Zip:			
Contractor Email:				
Field Contact, if a problem would arise onsite:		Cell:		
Property Owner Name, if not applicant: ACCESSORY USES:	Setbacks are meas	Phone:	n the structure to the nearest property lines,	
SUNROOM / PATIO ENCLOSURE GARAGE	overhang size 40' 24' Total sq FT: 24	the specif	FRONT SETBACK - PROPERTY LINE TO FOUNDATION LEFT SETBACK - PROPERTY LINE TO FOUNDATION REAR SETBACK - PROPERTY LINE TO FOUNDATION RIGHT SETBACK - PROPERTY LINE TO FOUNDATION FR 12 in 1 L[2in 1 R 12in 1 RR 12 in NIDTH OF STRUCTURE DEPTH OF STRUCTURE HEIGHT OF STRUCTURE Maximum garage height is 18 ft to the peak, other Accessory Uses - max height is 15 ft OAH.	
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:

Date: 7-19-