



CITY OF PATASKALA BOARD OF ZONING APPEALS

City Hall, Council Chambers
621 West Broad Street
Pataskala, Ohio 43062

STAFF REPORT

September 12, 2023

Variance Application VA-23-019

Applicant:	Timothy D. Stires
Owner:	Timothy D. Stires
Location:	69 First Street SW, Pataskala, OH 43062 (PID: 063-150438-00.000)
Acreage:	+/- 0.44-acres
Zoning:	R-20 – Medium Density Residential
Request:	Requesting two (2) Variances. The first, from Section 1231.05(C)(4) to allow for an Accessory Building to be located within a front yard, as there is a public right-of-way to the south of the parcel, and Second, from Section 1221.05(A) to allow for an increase in the allowable number of Accessory Buildings on a single lot from two (2) to three (3).

Description of the Request:

The Applicant is seeking approval of two (2) Variances. The first, from Section 1221.05(D)(1) to allow for an Accessory Building to be located within a front yard, and the second, from Section 1221.05(A) to allow for an increase in the allowable number of Accessory Buildings on a single lot from two (2) to three (3).

Staff Summary:

The property located at 69 1st Avenue SW is currently occupied by a 1,296-square foot single-family home built in 1967. Also located on the property are two (2) existing accessory buildings, a 100-square foot shed, and a 180-square foot shed. The lot itself is adjacent to two (2) platted public rights-of-way, with 1st Street SW to the north, where the driveway is, and then a currently unused right-of-way along the south property line.

As proposed, the Applicant would like to construct a third accessory building, 20-feet by 24-feet (480-square feet) in size, located in what would be their back yard. This structure will sit at an angle, with the closest point from the south property line being set back 21-feet, and the closest point to the west property line being at minimum 5-feet away from the property line.

Pursuant to Section 1231.05(C)(4), all accessory buildings must meet the front yard setback when adjacent to a public right-of-way. As the south rear property line is adjacent to a right-of-way, although an unimproved right-of-way, any structure must be at minimum 50-feet (1231.05(C)(1)) from the property line. As proposed, the Applicant intends to locate the structure only 21-feet from the south rear property line.

Additionally, Section 1221.05(A) of the Pataskala Code states that the maximum number of accessory buildings on a single lot shall not exceed two (2). As there are already two (2) existing accessory structures on the lot, the applicant is requesting a Variance from this section of code to allow for a third.

According to the Narrative Statement as submitted by the Applicant, the existing home has no basement and limited storage. They would like to add a third building to allow for extra storage space for their family of five (5).

Staff Review: *The following review does not constitute recommendations but merely conclusions and suggestions from staff.*

As mentioned above, Section 1231.05(C)(4) states that when adjacent to a public right-of-way, the same setback as required by the front yard shall be followed. As the south rear property line is adjacent to a public right-of-way, though unused, any structure would need to be a minimum of 50-feet from this property line. As such, the Applicant is requesting a Variance from Section 1231.05(C)(4) to allow for a reduction in this minimum setback from 50-feet to 21-feet, a 29-foot, or 58%, decrease. If there were no public right-of-way adjacent to the south rear property line, the structure would only need to be five (5) feet from the rear property line.

Additionally, Section 1221.05(A) states that the maximum number of accessory buildings on any lot shall not exceed two (2). As a third is proposed, the Applicant is requesting a variance to allow for an increase in the allowable number of accessory building from two (2) to three (3), an increase of one (1), or 50%.

As proposed, the other aspects of the proposed structure (setbacks, size, location) meet the requirements of Pataskala Code. Should this request be approved, the Applicant will need to apply for and receive an approved Accessory Building Permit to construct the building.

Other Departments or Agencies

No other comments from applicable Departments or Agencies were received.

Surrounding Area:

Direction	Zoning	Land Use
North	R-20 – Medium Density Residential	Single-Family Home
East	R-20 – Medium Density Residential	Single-Family Home
South	R-20 – Medium Density Residential	Single-Family Home
West	R-20 – Medium Density Residential	Single-Family Home

Variance Requirements:

According to Section 1211.07(1) of the Pataskala Code, the Board of Zoning appeals shall consider the following factors when determining if an area variance is warranted:

- Whether the property in question will yield a reasonable return or if there can be a beneficial use of the property;*
- Whether there are unique physical circumstances or conditions that prohibit the property being developed in strict conformity with the zoning regulation such that a variance is necessary to enable the reasonable use of the property;*
- Whether the variance requested is substantial;*

- d) *Whether the essential character of the neighborhood would be substantially altered or the adjoining properties would suffer a substantial detriment as a result of the variance;*
- e) *Whether the variance, if granted, will substantially or permanently impair the appropriate use or development of adjacent property;*
- f) *Whether the variance, if granted, will be detrimental to the public welfare;*
- g) *Whether the variance, if granted, would adversely affect the delivery of government services;*
- h) *Whether the property owner purchased the subject property with knowledge of the zoning restriction;*
- i) *Whether the property owner's predicament can be obviated through some other method than variance;*
- j) *Whether the variance, if granted, will represent the minimum variance that will afford relief and represent the least modification possible of the requirement at issue; and,*
- k) *Whether the spirit and intent behind the zoning requirement would be observed and substantial justice done by granting the variance.*

Furthermore, Section 1211.07(2) allows other factors to be considered, including comments from City staff, when determining if an area variance is warranted. The following factors from Section 1211.07(2) are applicable to Variance Application VA-23-019:

- None

Department and Agency Review

- Zoning Inspector – No comments.
- Public Service – No comments.
- City Engineer – No comments.
- SWLCWSD – No comments.
- Police Department – No comments.
- West Licking Joint Fire District – No comments.
- Licking Heights School District – No comments.

Conditions:

Should the Board choose to approve the applicant's request, the following conditions may be considered:

1. The Applicant shall obtain all necessary permits from the City of Pataskala and the Licking County Building Department within one (1) year of the date of approval.

Resolution:

For your convenience, the following resolution may be considered by the Board of Zoning Appeals when making a motion:

"I move to approve variances from Section 1231.05(C)(4) and Section 1221.05(A) of the Pataskala Code for variance application VA-23-019 ("with the following conditions" if conditions are to be placed on the approval)."



CITY OF PATASKALA PLANNING & ZONING DEPARTMENT

621 West Broad Street, Suite 2A
Pataskala, Ohio 43062

VARIANCE APPLICATION

(Pataskala Codified Ordinances Chapter 1211)

Property Information	
Address: 69 First ST. S.W. PATASKALA, OHIO 43062	
Parcel Number: 063-150438-00.000	
Zoning: R-20	Acres: 0.44
Water Supply:	
<input type="checkbox"/> City of Pataskala	<input checked="" type="checkbox"/> South West Licking <input type="checkbox"/> On Site
Wastewater Treatment:	
<input type="checkbox"/> City of Pataskala	<input checked="" type="checkbox"/> South West Licking <input type="checkbox"/> On Site

Staff Use
Application Number: VA-23-019
Fee: 300
Filing Date: 8-8-23
Hearing Date: 9-12-23
Receipt Number: 00/273

Applicant Information		
Name: TIMOTHY D. STIRES		
Address: 69 First ST. S.W.		
City: PATASKALA	State: OHIO	Zip: 43062
Phone: (614) 582-1964	Email: TIMZTOY@GMAIL.COM	

Documents
<input checked="" type="checkbox"/> Application
<input checked="" type="checkbox"/> Fee 300 ^{Cash} ^{or} ^{Check}
<input type="checkbox"/> Narrative
<input checked="" type="checkbox"/> Site Plan
<input checked="" type="checkbox"/> Deed
<input checked="" type="checkbox"/> Area Map

Property Owner Information		
Name: TIMOTHY D. STIRES		
Address: 69 First ST. S.W.		
City: PATASKALA	State: OHIO	Zip: 43062
Phone: (614) 582-1964	Email: TIMZTOY@GMAIL.COM	

Variance Information	
Request (Include Section of Code):	VARIANCE 1231.05(C)(4) 1231.05(C)(4) Setback from South 50' to 21' 1221.05(A) 3 Acc. Bldgs
Describe the Project:	

Documents to Submit

Variance Application: Submit 1 copy of the variance application.

Narrative Statement: Submit 1 copy of a narrative statement explaining the following:

- The reason the variance is necessary
- The specific reasons why the variance is justified as it pertains to Section 1211.07 of the Pataskala Code:
 - a) *Whether the property in question will yield a reasonable return or if there can be a beneficial use of the property without the variance;*
 - b) *Whether there are unique physical circumstances or conditions that prohibit the property from being developed in strict conformity with the zoning regulation such that a variance is necessary to enable the reasonable use of the property;*
 - c) *Whether the variance requested is substantial;*
 - d) *Whether the essential character of the neighborhood would be substantially altered or adjoining properties would suffer a substantial detriment as a result of the variance;*
 - e) *Whether the variance, if granted, will substantially or permanently impair the appropriate use or development of adjacent property;*
 - f) *Whether the variance, if granted, will be detrimental to the public welfare;*
 - g) *Whether the variance, if granted, would adversely affect the delivery of governmental services;*
 - h) *Whether the property owner purchased the subject property with knowledge of the zoning restriction;*
 - i) *Whether the property owner's predicament can be obviated through some other method than variance;*
 - j) *Whether the variance, if granted, will represent the minimum variance that will afford relief and represent the least modification possible of the requirement at issue; and,*
 - k) *Whether the spirit and intent behind the zoning requirement would be observed and substantial justice done by granting the variance.*
- A use variance must also meet the requirements described in Section 1211.07(B) of the Pataskala Code.

Site Plan: Submit 1 copy (unless otherwise directed by staff) of a site plan to scale of the subject property indicating the following:

- All property lines and dimensions
- Location and dimensions of all existing and proposed buildings and structures.
- Setbacks from property lines for all existing and proposed buildings, structures and additions
- Easements and rights-of-way
- Driveways
- Floodplain areas
- Location of existing wells and septic/aerator systems.
- Any other information deemed necessary for the variance request

Deed: Provide a copy of the deed for the property with any deed restrictions. Deeds can be obtained from the Licking County Recorder's website here: <https://apps.lcounty.com/recorder/recording-search/>

Area Map: Submit 1 copy of an area map showing the property and the surrounding area. Area maps can be obtained from the Licking County Auditor's website here: <https://www.lickingcountyohio.us/>

Signatures

I certify the facts, statements and information provided on and attached to this application are true and correct to the best of my knowledge. Also, I authorize City of Pataskala staff to conduct site visits and photograph the property as necessary as it pertains to this variance request.

Applicant (Required):



Date:

8-8-23

Property Owner (Required):



Date:

8-8-23

To Whom it May Concern,

August 8, 2023

I am requesting a variance to add an additional (3rd) storage building on my property at 69 1st Street SW Pataskala OH 43062. The building will be located at the rear right (south west) corner of the lot. The left rear corner of the building will be approximately 21-25ft from the rear property line. Our house has 1,296 sq. ft of living space with no basement. With a family of 5, storage space is extremely limited. The additional building is necessary for storage.

I appreciate your consideration to grant a variance to add an additional storage building on my property.

Sincerely,

Timothy Stires



Existing shed #1 : 10x10
Existing shed #2 : 10x16
Proposed shed #3: 20x24

Map

[BOR](#)
[Card](#)
[CAUV](#)
[Documents](#)
[Land](#)
[Map](#)
[Parcel](#)
[Pictometry](#)
[Sketch](#)
[Street View](#)
[Structures](#)
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Address Search

69 151 ST
PATASKALA, OH 43062

Land
Improv
Total

Transfer Date
Amount
Conveyance
Valid Sale

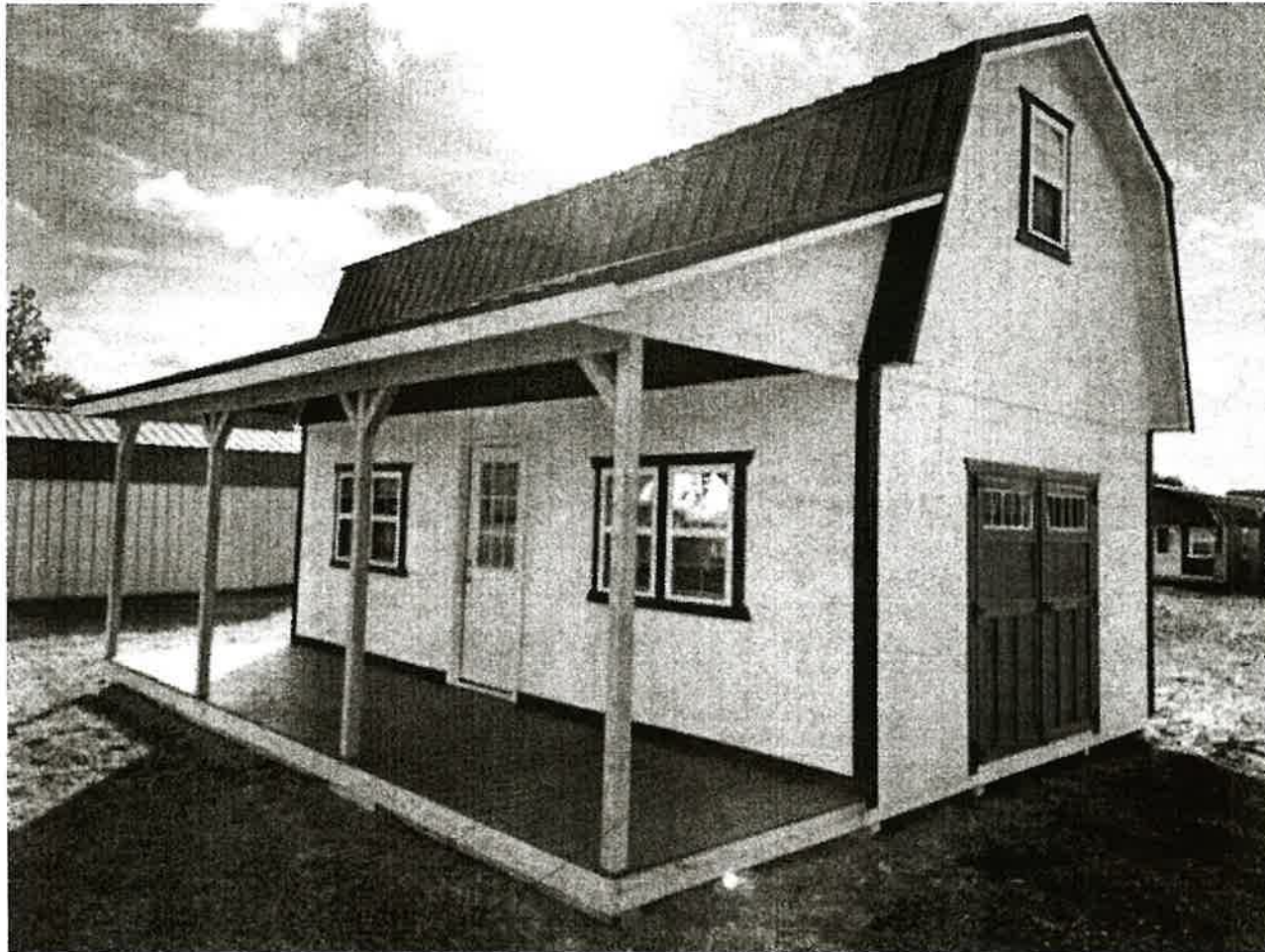
Homestead
Owner Occ

Foreclosure
Certified Delq
On Contract
Bankruptcy
Tax Lien

Back left corner of building will be approx. 21 ft
from the property line

Building is 14' x 24' with a 6' porch

Total Building and Porch is 20' x 24'



* TOTAL HEIGHT
OF BUILDING FROM
GROUND TO PEAK ON
ANY SIZE BUILDING

← 17' →

TYPICAL PORCH:
4x4 TREATED POSTS
WITH Y BRACES &
2x6 PLATE WITH 2x6 TOP
PLATE TO SUPPORT
THE ROOF

[illegible]

TYPICAL 2x4 SIDING EX. WALL:
2x8 TOP PLATE
2x4 #2 (SPF) STUDS 16" O.C.
LP SMART SIDING
VERTICAL 4x8 PANELS

CROSS SECTION

SCALE: 1/4" = 1'-0"

A-4

14'X32" 2 STORY CABIN
WITH 6' PORCH

BUILT BY:



MODEL: CABIN

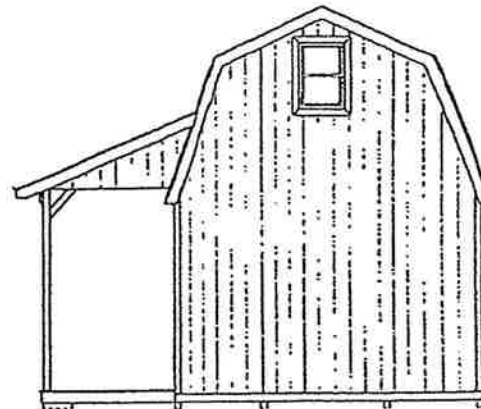
DRAWN BY: D COBLENTZ

DATE: SEPT. 16, 2021

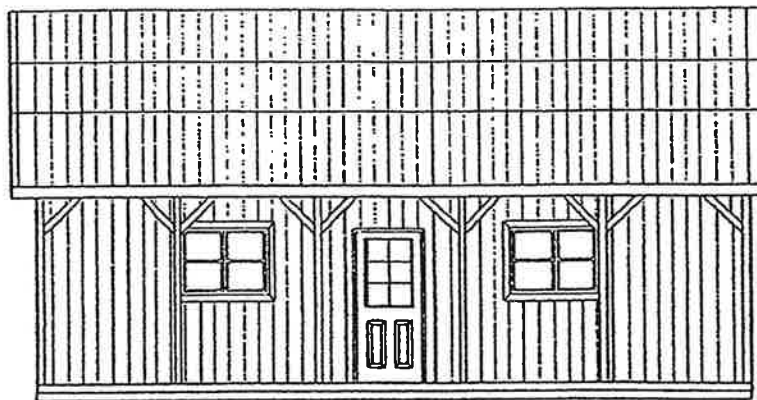
CROSS SECTION



REAR ELEVATION



RIGHT & LEFT ELEVATION



FRONT ELEVATION

ELEVATION

SCALE: 3/16" = 1'-0"

SHEET:

JOB:

14'x24'

14'x32" 2 STORY CABIN
WITH 6' PORCH

BUILT BY:



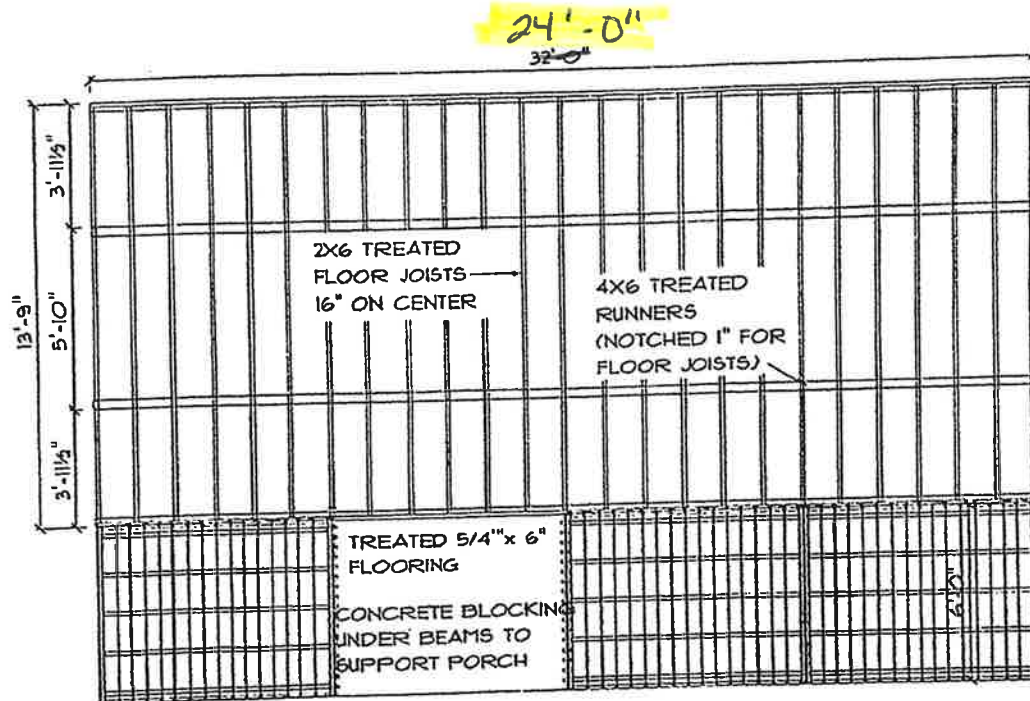
MODEL: CABIN

DRAWN BY: D COBLENTZ

DATE: SEPT. 16, 2021

ELEVATION

A-1



FLOOR SYSTEM

SCALE: 1/4" = 1'-0"

SHEET:

A-2

JOB:

14' x 24'
14' x 32'

2 STORY CABIN
WITH 6' PORCH

BUILT BY:

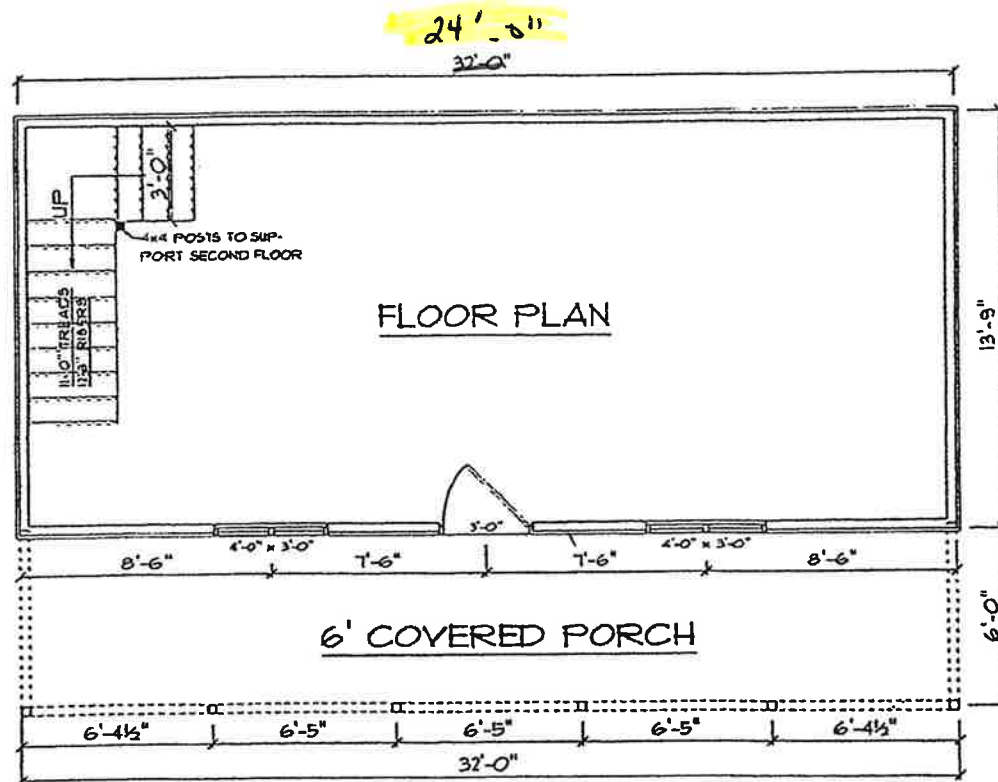


MODEL: CABIN

DRAWN BY: D COBLENTZ

DATE: SEPT. 16, 2021

FLOOR SYSTEM



FLOOR PLAN

SCALE: 1/4" = 1'-0"

SHEET:

A-3

JOB:

14' x 24'

2 STORY CABIN
WITH 6' PORCH

BUILT BY:



MODEL: CABIN

DRAWN BY: D COBLENTZ

DATE: SEPT. 16, 2021

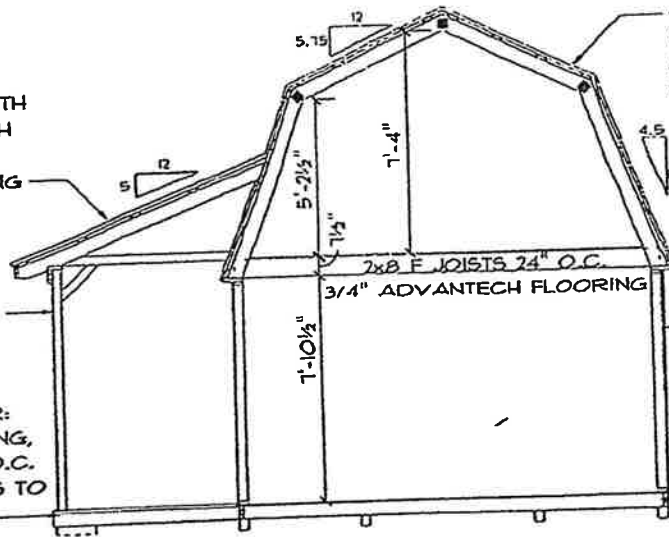
FLOOR PLAN

TYPICAL CROSS SECTION

TYPICAL PORCH ROOF:
2X6 RAFTERS 24" O.C. WITH
1X4 PUPLINS 24" O.C. WITH
SINGLE BUBBLE WRAP
29 GAUGE METAL ROOFING

TYPICAL PORCH:
4X4 TREATED POSTS
WITH Y BRACES &
2X6 PLATE WITH 2X6 TOP
PLATE TO SUPPORT
THE ROOF

TYPICAL PORCH FLOOR:
5/4X6 TREATED FLOORING,
2X6" FLOOR JOISTS 16" O.C.
USE CONCRETE BLOCKS TO
SUPPORT FLOOR



TYPICAL TRUSS ROOF:
2X6 TRUSSES 24" O.C. WITH
4" X 4" STEEL PLATES
1X4 PUPLINS 24" O.C. WITH
SINGLE BUBBLE WRAP
29 GAUGE METAL ROOFING

TYPICAL 2X4 SIDING EX. WALL:
2X8 TOP PLATE
2X4 #2 (SPF) STUDS 16" O.C.
LP SMART SIDING
VERTICAL 4X8 PANELS

TYPICAL FLOOR SYSTEM:
ADVANTECH COMPOSITE FLOORING,
2X6 FLOOR JOISTS 16" O.C. WITH
4X6 TREATED RUNNERS,
4X6's NOTCHED 1" FOR JOISTS

CROSS SECTION

SCALE: 1/4" = 1'-0"

4

JOB:

4'x24'

14'x32" 2 STORY CABIN
WITH 6' PORCH

BUILT BY:

 Preferred
STRUCTURES

MODEL: CABIN

DRAWN BY: D COBLENTZ

DATE: SEPT. 16, 2021

CROSS SECTION

CONDITIONAL APPROVAL FOR THE TRANSFER
CORRECTION REQUIRED FOR NEXT TRANSFER
JARED N. KNERR, LICKING COUNTY ENGINEER

SW-5/30/17-POOR
BECKING

TRANSFER ON DEATH CONFIRMATION AFFIDAVIT
[RC 5302.22]

State of Ohio
County of Licking

I, Timothy D. Stires, being duly sworn, says as follows:

That Gary D. Stires was the owner of property under a duly recorded Transfer on Death Deed or a duly recorded Transfer on Death Designation Affidavit. Said deed or affidavit was recorded at Licking County Recorder's Office, Ohio as Instrument No. 201505070008695.

That Gary D. Stires died on May 21, 2017, and a certified copy of the death certificate is attached to the Affidavit. The following are the designated beneficiaries, and their addresses, who survived the owner and who were in existence on the date of the death of the deceased owner:

1. Timothy D. Stires 7811 Cheriton Circle, Reynoldsburg, Ohio 43068

That, by virtue of the death of Gary D. Stires the above beneficiaries now own legal title to the premises as set out in the attached legal description.

The Recorder is requested to make reference to this Affidavit on the Transfer on Death Deed or Transfer on Death Designation Affidavit pursuant to Section 5302.222 of the Ohio Revised Code.

Further Affiant sayeth naught


Affiant

Sworn to before me and subscribed in my presence at 31 W Broad St. Bldg 2 Ohio on 5/30/17
2017.



EMILY M. OXLEY
Notary Public, State of Ohio
My Comm. Expires Dec. 7, 2021
Recorded in Fairfield County


Notary Public


201705300011200
Pgs. 3 \$60.00 T20170012813
05/30/2017 2:24PM MEPTIMOTHY ST
Bryan A. Long
Licking County Recorder



Reg. Dist. No. 45
Primary Reg. Dist. No. 4500
Registrar's No. 2017-0005662

Ohio Department of Health - Vital Statistics
CERTIFICATE OF DEATH
Type or print in permanent blue or black ink

State File No. 2017050863

1. Decedent's Legal Name (First, Middle, Last, Suffix) (Include AKA's if any) GARY DALE STIRES				2. Sex MALE		3. Date of Death (Mo/Day/Year) MAY 21, 2017	
4. Social Security Number [REDACTED]		5a. Age (Years) 72		5b. Under 1 Year Months		5c. Under 1 day Hours Minutes	
6. Date of Birth (Mo/Day/Year) OCTOBER 06, 1944				7. Birthplace (City and State or Foreign Country) COLUMBUS, OHIO			
8a. Residence State OHIO		8b. County LICKING		8c. City or Town PATASKALA		8d. Zip Code 43062	
9. Ever in US Armed Forces? NO		10. Marital Status at Time of Death WIDOWED (AND NOT REMARRIED)		11. Surviving Spouse's Name (If wife, give name prior to first marriage)			
12. Decedent's Education HIGH SCHOOL GRADUATE OR GED		13. Decedent of Hispanic Origin NO		14. Decedent's Race WHITE			
15. Father's Name ORVILLE STIRES		16. Mother's Name (prior to first marriage) KATHRYN RADER		17. Relationship to Decedent SON			
17a. Informant's Name TIMOTHY STIRES		17b. Relationship to Decedent SON		17c. Mailing Address (Street and Number, City, State, Zip Code) 7811 CHERITON CIRCLE REYNOLDSBURG, OHIO 43068			
18a. Place of Death DECEDENT'S HOME		18b. Facility Name (If not institution, give street & number) 69 FIRST ST. SW		18c. City or Town, State and Zip Code PATASKALA, OH 43062		18d. County of Death LICKING	
19. Signature of Funeral Services Licensee or Other Agent JOSHUA B FRALEY		20. License Number (of Licensee) 009089		21. Name and Complete Address of Funeral Facility KAUBER-FRALEY FH 289 S MAIN ST PO BOX 1413 PATASKALA, OH 43062			
22a. Method of Disposition BURIAL		22b. Date of Disposition (Mo/Day/Year) MAY 26, 2017		22c. Location (City/Town and State) PATASKALA, OH			
23. Place of Disposition (Name of Cemetery, Crematory, or other place) PATASKALA CEMETERY		24. Date of Disposition (Mo/Day/Year) May 25, 2017		25. Date Disposition Permit Issued (Mo/Day/Year) MAY 24, 2017			
26. Registrar's Signature <i>Barbara Lanthorn</i>		27. Name of Person Issuing Disposition Permit LANTHORN, BARBARA		28. District No. 4500			
29. Certifier (Check only one) <input checked="" type="checkbox"/> Certifying Physician To the best of my knowledge, death occurred at this time, date, and place; and due to the cause(s) and manner stated. <input type="checkbox"/> Coroner or Medical Examiner On the basis of examination under investigation, in my opinion, death occurred at this time, date, and place; and due to the cause(s) and manner stated.		30. Time of Death 08:07		31. Date Pronounced Dead (Mo/Day/Year) 05/24/2017		32. Was the Medical Examiner or Coroner Contacted? NO	
33. Signature and Title of Certifier <i>[Signature]</i> MD		34. License number 35,041168		35. Date Signed (Mo/Day/Year) 05/24/2017			
27. Name (First, Middle, Last) and Address of Person who Completed Cause of Death WALTER CECIL FERRIS, 1144 DUBLIN RD., COLUMBUS, OH 43215							
28. Part I: Enter the disease, injuries, or complications that caused the death. Do not enter the mode of dying, such as cardiac or respiratory arrest, shock, or heart failure. List only one cause on each line. Type or print in permanent blue or black ink.							
Immediate Cause (Final disease or condition resulting in death)		a. Chronic systolic CHF				years	
Sequentially list conditions, if any, leading to immediate cause.		b. Due to (or as Consequence of) Cardiomyopathy				years	
Enter Underlying Cause (Disease or injury that initiated events resulting in death)		c. Due to (or as Consequence of) Mixed Valvular and ischemic				years	
d. Aortic stenosis		years					
e. Coronary artery disease		20 years					
f. Hypertension							
30. Did Tobacco Use Contribute to Death? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		31. If Female, Pregnancy Status <input type="checkbox"/> Not pregnant within past year <input type="checkbox"/> Pregnant at time of death <input type="checkbox"/> Not pregnant, but pregnant within 42 days of death <input type="checkbox"/> Not pregnant, but pregnant 43 days to 1 year before death <input type="checkbox"/> Unknown if pregnant within the past year		32. Manner of Death <input checked="" type="checkbox"/> Natural <input type="checkbox"/> Accident <input type="checkbox"/> Suicide		33. Was an Autopsy Performed? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
33a. Date of Injury (Mo/Day/Year)		33b. Time of Injury		33c. Place of Injury (e.g., Decedent's home, construction site, restaurant, wooded area)		33d. Injury at Work? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
33e. Location of Injury (Street and Number or Rural Route Number, City or Town, State)							
33f. Describe How Injury Occurred:							
33g. If Transportation Injury, Specify: <input type="checkbox"/> Driver/Operator <input type="checkbox"/> Pedestrian <input type="checkbox"/> Passenger <input type="checkbox"/> Other:							

HEA 2734 Rev. 07/15/07/18

Barbara Lanthorn Registrar

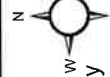
MAY 23 2017

Barbara Lanthorn

OnTrac Property Map



August 8, 2023



- Street Number Only
- County Road
- Township Road
- Other Road Type
- Interstate/US/State Route

- Driveway
- Interstates
- Municipal Corporations
- County Boundary

- Jurisdictional Townships
- Historical Townships Line
- County Boundary

LICKING COUNTY TAX MAP