



Design Review Board Meeting
Tuesday, March 12, 2024 - 5:00 PM
AGENDA

1. Call to Order
2. Roll Call
3. Public Comment
4. Approval of Minutes
 - a. February 13, 2024
5. Application # 2-12-1 Sign Permit; 28 B S. Main Street
 - a. Application
6. Application # 2-19-2 Certificate of Appropriateness; Demolition 165 S. Kasson
 - a. Application
7. Other Business
8. Adjourn



Design Review Board
Tuesday, February 13, 2024 - 5:30 PM
MINUTES

1. Call to Order

Heather Green called the Design Review Board meeting to order for February 13, 2023 at 5:31 pm.

2. Roll Call

Present - Heather Green, Candice Evans, Josh Harrison, Franz Stein, Andrew Hale, Craig Bohning

Absent - None

Staff present - Sean Staneart - City Manager, Terry Wymer - Zoning Inspector, Teresa Monroe - Clerk of Council

Public present - Michael Mockler, Dale Novy

3. Election of Chair & Vice-Chair

Heather Green said that she had interest in being Chair. Josh Harrison said he had interest in being Vice-Chair.

ACTION: Craig Bohning moved to appoint Heather Green as the Chair and Josh Harrison as the Vice-Chair; Franz Stein seconded and the vote was as follows:

AYES: Heather Green, Candice Evans, Josh Harrison, Franz Stein, Andrew Hale, Craig Bohning

NOES: None

ABSTAIN: None

Passed 6 - 0

4. Action on Minutes

- a. Nov 9, 2022; Dec 13, 2022; Jan 10, 2023; May 9, 2023; Jun 13, 2023; Jun 27, 2023; July 25, 2023; Aug 9, 2023; Aug 22, 2023; Sept 26, 2023; Oct 10, 2023; Nov 14, 2023; Nov 28, 2023

ACTION: Heather Green moved to approve all minutes in a block; Josh Harrison seconded and the vote was as follows:

AYES: Heather Green, Candice Evans, Josh Harrison, Franz Stein, Andrew Hale, Craig Bohning

NOES: None

ABSTAIN: None

Passed 6 - 0

5. Public Comment

No comments

6. Application # Z-23-217 Certificate of Appropriateness; 667 W. Coshocton Street

a. Application & Staff Report

Michael Mockler with Signmaster and business owner Dale Novy were present for the application. The sign will be direct mount, 1/2 inch thick, flush mount. The pylon/monument sign wording will match the primary sign showing "Mattress Warehouse". Board discussion on the potential for the addition of goose neck lighting and changing the sign font.

Conditions discussed listed:

1. 30" overall sign height
2. "Mattress" font bold as presented with a height of 16"
3. "Warehouse" font thinner (as shown on company truck logo) with a height of 12"
4. No more than 120.5" overall sign width
5. Monument sign to match, to scale

ACTION: Heather Green moved to approve with the conditions listed; Josh Harrison seconded and the vote was as follows:

AYES: Heather Green, Andrew Hale, Franz Stein, Craig Bohning, Josh Harrison, Candice Evans

NOES: None

ABSTAIN: None

Passed 6 - 0

7. Discussion and recommendation to Council on allowability of solar panels

Solar panels are regulated under Environmental Change Minor found in Chapter 1187 Definitions. Discussion on the current approval process. Discussion on the timeline of Design Regulation standards by MKSK, should be able to complete within a year.

ACTION: Josh Harrison moved to recommendation that council put approval of solar panels on hold; Andrew Hale seconded and the vote was as follows:

AYES: Josh Harrison, Candice Evans, Heather Green, Andrew Hale, Franz Stein, Craig Bohning

NOES: Franz Stein

ABSTAIN: None

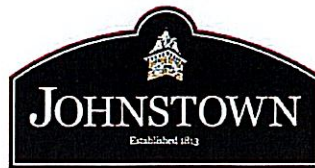
Passed 5 - 1

8. Other Business

1. Board asked if there were any updates on the NAPA building reface conditionally approved. Zoning Inspector reported that the owner will not proceed and will return the building face to the way it was, removing the paint from the brick and painting the top same color as before the repair.

9. Adjourn

ACTION: Craig Bohning moved to adjourn; Candice Evans seconded and all were in favor. Motion passed 6-0, Meeting adjourned at 6:21 pm.



SIGN PERMIT APPLICATION: CHAPTER #1177

Application Number: 2.12.1 Date: 2/19/2024

FEES:

Base fee: \$150 - Sign size in sq. ft.: _____ @ \$.50 = \$_____

Total Amount: \$_____ Paid: Check #: _____ Cash: \$_____

1. Applicant: Conrad Sokolowski (Garage Sale 24/7)
2. Address: 5019 Clancy CT City: Columbus State: OH Zip: 43230
3. Phone: (860) 490 - 4822
4. E-mail Address: conradsokolowski@yahoo.com Zoning District: _____
5. Business Address: 28 B South Main Street Johnstown, OH. 43031
6. Existing Use of Property: Commercial / Retail
7. Proposed Use of Property: N/A
8. Type of Sign:
 - Canopy / Awning: _____ Size: _____
 - Identification: (Name & Address of business only): Size: _____
 - Marquee: _____ Size: _____
 - Projecting: _____ Size: _____
 - Wall: _____ Size: _____
 - Monument: _____ Size: _____
 - Other: Wall Sign Size: _____
9. Wording on Sign: Garage Sale 24/7 (buy,sell,trade) est. 2022 | Johnstown, OH
10. Elevation: Length: _____ ft. Width: _____ ft. Height: _____ ft.

20' linear ft. 13.33 sq ft.
13-14 sq ft.

11. Contractor Information:

Name: Thomas J. Baker

Address: 5171 Sulgrave Dr City: New Albany State: OH Zip: 43054

E-mail: thomasjbaker8302@gmail.com

Contractor Business Phone Number: (614) 949 - 8733

IN ADDITION, THE FOLLOWING ITEMS MUST ACCOMPANY THIS APPLICATION:

- Attach two (2) sets of sign drawings, scaled and with colors of all signs and their locations on the building. If the sign is free standing include a plot plan.
- Attach Certificate of Liability Insurance.

The undersigned is applying for a Sign Permit for the following use: said permit to be issued based on information contained within this application. The applicant hereby certifies that all information and attachments to this application are true and correct and agrees to follow all applicable regulations, refer to ordinance #1177.01 through #1177.99.

Applicant's Signature: _____



Date: 2 / 12 / 24

OFFICE USE ONLY:

Date Received in Office: 2 / 19 / 2024

Received By: T. Wymer

Date Permit Issued: _____ / _____ / _____ By: _____

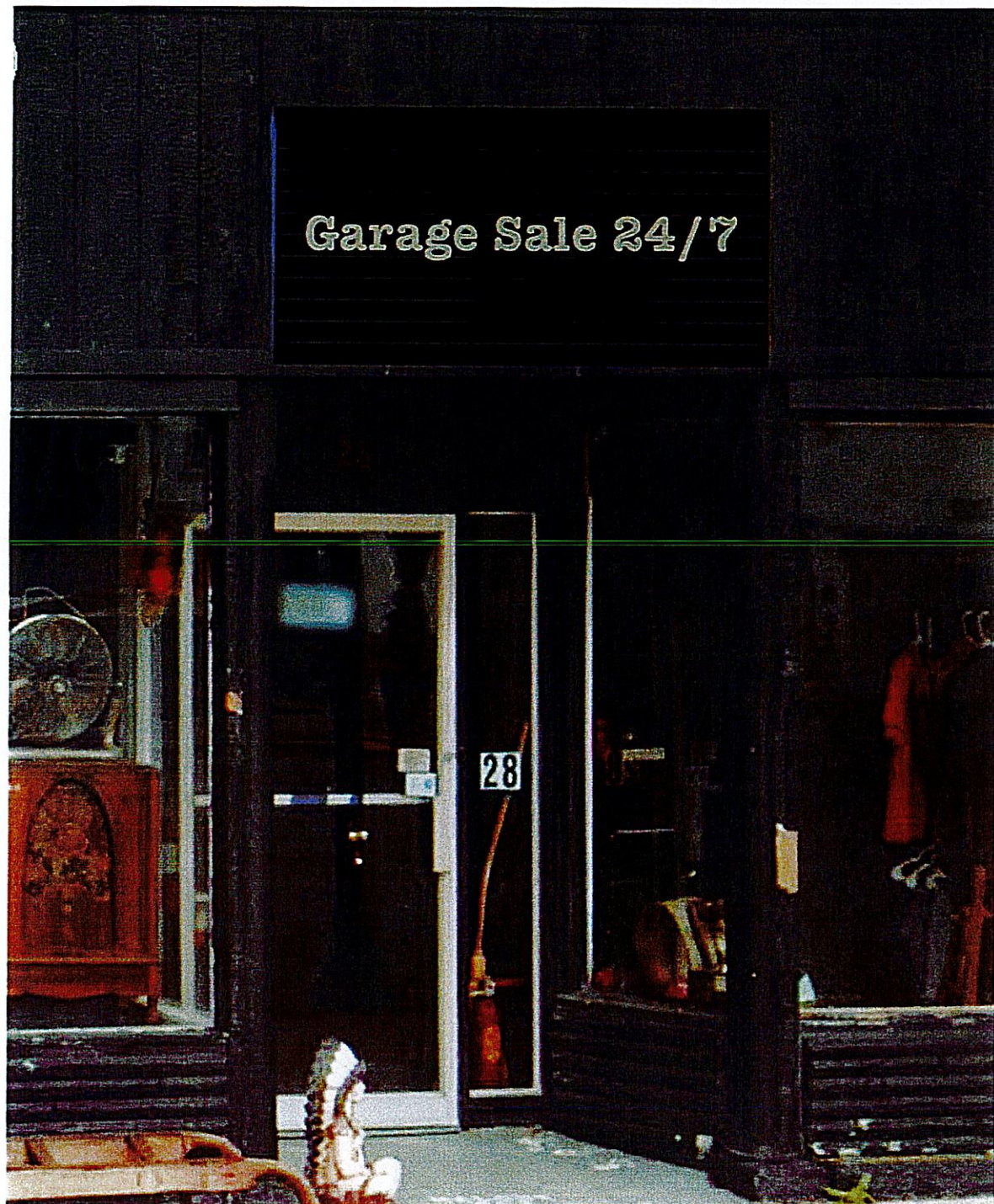
Date of Inspection If Required: _____ / _____ / _____ By: _____

Zoning Code Enforcement Official: x _____

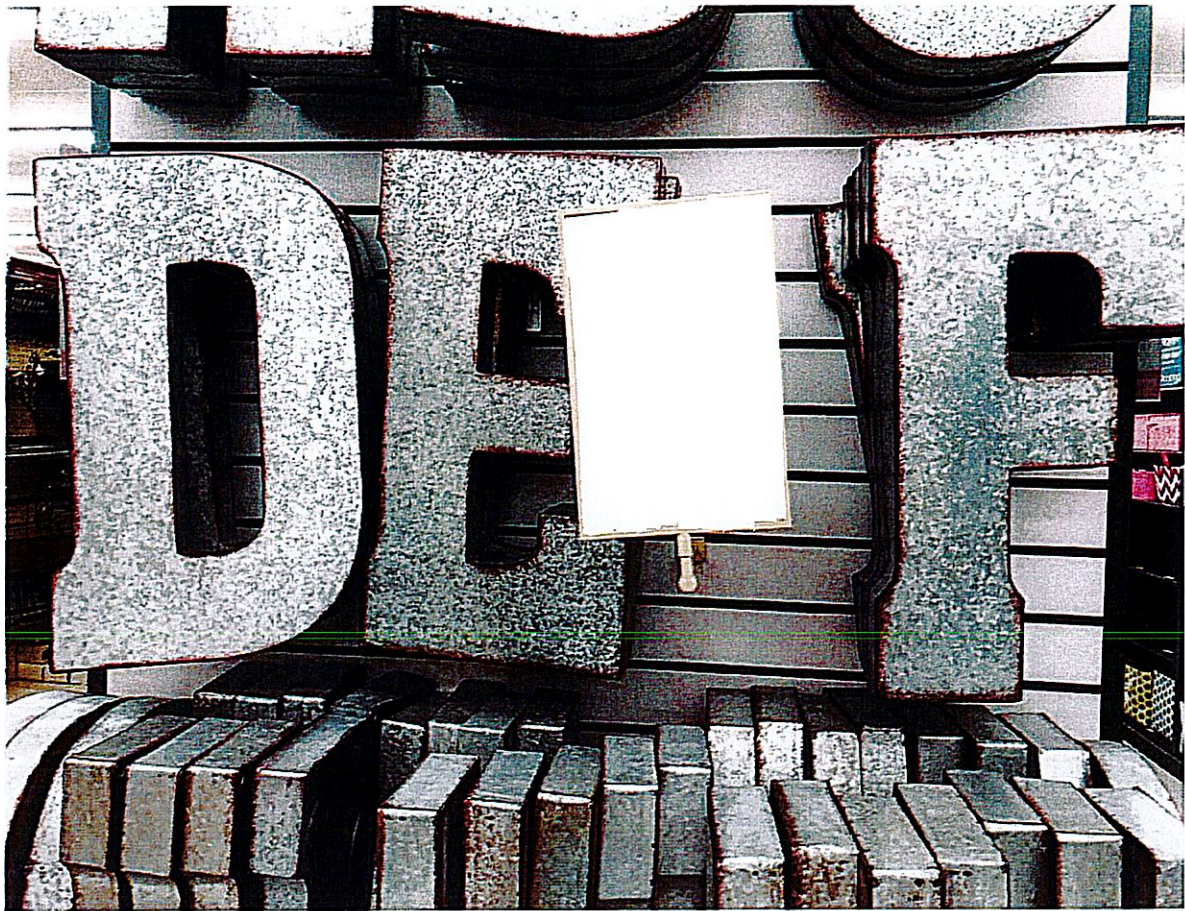
Additional Comments: _____

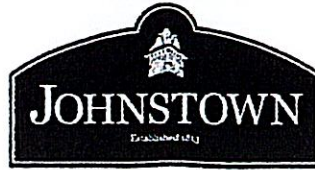
Narrative for Garage Sale 24/7

I will use 3D lettering that will say "Garage Sale 24/7". They will be metallic gray - 8"H x 5"W x 1" deep - separately affixed to the wall and will be fabricated out of metal or composite - Like the examples attached. The background won't be JET BLACK like that. The whole face of the wood panel area will be repainted the same color (as it is), giving it a fresh coat, then the lettering will be applied.









JOHNSTOWN, OHIO

FEB 16 2024

PAID

CERTIFICATE OF APPROPRIATENESS: CHAPTER #1187

Application Number: 2-19-2 Date: 2/19/2024

FEES:

Base Fee: \$ 300

Total Fee Amount: \$ _____ Paid: Check # _____ Cash: \$ 300⁰⁰

(PLEASE PRINT)

1. Applicant: Aarons 81 Demolition Phone: (614) 332-6174
2. Property Address: 1655 Kasson St City: Johnstown State: OH Zip: 43031
3. Applicant's E-mail: aaronc.aarons81.com
4. Business Owner's Name: 3T Property Mgmt Phone: () -
5. Contractor's Name: Aarons 81 Demolition Phone: (614) 332-6174
6. Principal Business Activity: Vacant
7. Existing Use of Property: Vacant
8. Square Footage of Proposed Building or Business: .0 sq. ft.
9. Zoning District: Historical Number of Off-Street Parking Spaces: 2
10. Estimated Cost of Improvements: \$ —

IN ADDITION, THE FOLLOWING ITEMS MUST ACCOMPANY THIS APPLICATION:

- (Conditional) Eight full sets (11x17) of to scale plans and dimensioned drawings showing the property, with all elevations and the location of existing and proposed buildings and alterations are required. Attach any requested, supplemental or necessary documentation. (Required only if asked for by the Zoning Inspector.)

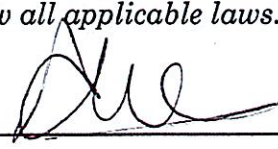
List of Materials that will be used on the project:

1. Grass Seed 2. _____
3. Straw 4. _____
5. Plastic Fencing 6. _____
7. _____ 8. _____

List of Contiguous Neighbors and Addresses:

- | | | | |
|----------------------------------|-------------------------|-----------|--------------|
| 1. <u>3T Property Mgmt</u> | <u>45 E College Ave</u> | <u>OH</u> | <u>43031</u> |
| Neighbor's Name | Neighbor's Address | State | Zip Code |
| 2. <u>164 Kasson LLC</u> | <u>164 S Kasson St</u> | <u>OH</u> | <u>43031</u> |
| Neighbor's Name | Neighbor's Address | State | Zip Code |
| 3. <u>DAVID BLAIR</u> | <u>181 S Kasson St</u> | <u>OH</u> | <u>43031</u> |
| Neighbor's Name | Neighbor's Address | State | Zip Code |
| 4. <u>Parsons Family Rentals</u> | <u>187 S Kasson St</u> | <u>OH</u> | <u>43031</u> |
| Neighbor's Name | Neighbor's Address | State | Zip Code |

The undersigned is applying for a Certificate of Appropriateness Permit for the following use: said permit is to be issued based on the information contained within this application. The applicant hereby certifies that all information and attachments to this application are true & correct and agrees to follow all applicable laws.

Applicant's Signature: x 

Date: 2/19/2024

OFFICE USE ONLY:

Date Received in Office: 2/22/24 By: cashbrook

Date of Planning and Zoning Commission Meeting: ____/____/____

Date Permit Approved or Denied by Planning Commission: ____/____/____

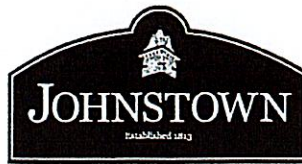
Conditions Necessary for Approval: _____

City Manager Signature: x _____

Narrative for 165 South Kasson St. Demolition of house

The homeowner decided to tear it down due to the fact that it was going to cost more to repair than what the house is worth.

The area will be turned back into green space.



FEB 20 2024

P A I D

**RESIDENTIAL OR COMMERCIAL DEMOLITION PERMIT
APPLICATION**

Application Number: 2-19-1 Date: 2/19/2024

FEES:

Single Family: \$700 per structure (owner shall be eligible to receive a \$500.00 refund following the Final Inspection to ensure lot space is restored to a green space in a timely manner.)

Non-Single Family: \$1,000 per structure (owner shall be eligible to receive a \$500.00 refund following the Final Inspection to ensure lot space is restored to a green space in a timely manner.)

Total Fee Amount: \$ _____ Paid: Check # _____ / Cash: \$ 700⁰⁰

1. Applicant: Aarons 81 Demolition LLC E-mail: aaronc@aarons81.com
2. Contractor: Aarons 81 Demolition Phone: (614) 332-6174
3. Property Address: 165 S Kasson St Johnstown, Ohio
4. Existing Use of Property: VACANT Square Footage: 922
5. Estimated Cost of Demolition: \$4000
6. Proposed Use of Property After Demolition: OPEN LAND
7. Attach any requested, supplemental, or necessary documentation or information and proof of insurance.

**** The undersigned is applying for a Demolition Permit for the following use to be issued based on the information contained within this application. The applicant hereby certifies that all information and attachments to this application are true & correct and agrees to follow all applicable regulations.*

Applicant's Signature: [Signature] Date: 2/19/2024

Application will be made to the zoning office including the submission of Liability Insurance by the owner/contractor. Upon successful completion of the demolition, the owner shall be eligible to receive a \$500.00 refund following the Final Inspection to ensure lot space is restored to a green space in a timely manner.

OFFICE USE ONLY:

Date Received in Office: 2/22/24 By: [Signature]
Date Permit Issued: ____/____/____ By: _____
Date of Final Inspection: ____/____/____ By: _____
Date of Refund if Applicable: ____/____/____ By: _____

