

**DELAWARE-MUNCIE METROPOLITAN BOARD OF ZONING APPEALS**

**APPLICATION FOR APPEAL**

Jurisdiction: (Check One)

Submitted: 1/21/26

☐ Delaware County

Case No.: BZA 02-26

☒ City of Muncie

(1) Applicant: Kingdom Recovery LLC

Address: 409 N Jefferson Phone: 765-499-8686

(2) Applicant's Status: (Check the appropriate response)

☒ (a) The applicant's name is on the deed to the property.

☐ (b) The applicant is the contract owner of the property.

☐ (c) Other: \_\_\_\_\_

(3) If Item (2)(c) is checked, please complete the following:

Owner of the property involved: \_\_\_\_\_

Owner's address: \_\_\_\_\_

(4) Record of Ownership:

Deed Book No.: 2026R00380

Page: Warranty Deed

Purchase Date: 12-26-2025

Legal Description: (From the Deed or Abstract)

Kingdom Recovery LLC purchased 304 N Waldemere Ave Muncie, In 47303 and adjacent lots from Safe Harbor Apostolic Lighthouse

(5) Common Address of the Property Involved: (Give full street address. If no address, give geographic location such as s. side of CR 400S, 500' west of SR 3).

304 N Waldemere Ave. Muncie, IN 47303

(6) Type of Appeal: (Check the appropriate response)

☒ (a) Request for an Appeal from the Decision of the Administrative Zoning Officer according to Article XXXII, Section 5-B-1. (Attach a copy of said decision/ruling).

☐ (b) Request for a Special Use according to Article XXXII, Section 5-B-2.

☐ (c) Request for a Variance according to Article XXXII, Section 5-B-3.

(7) State explanation of requested Appeal: (State what you want to do and cite the Article and Section of the Ordinance which applies and/or creates the need for this Appeal.)

SEE ATTACHED

(8) State reasons supporting the Appeal: (If filing for a variance, refer to the attached sheet entitled "Hardship Variance" for explanation/guidance.)

\*See Attached Copy

(9) Present Zoning of the property: (Give exact classification)

R3 Residence Zone

(10) Present use of the property:

Church

(11) Describe the proposed use of the property:

Long-term sober living.

(12) Is the property:

☐ Owner Occupied

☒ Renter Occupied

☐ Other: \_\_\_\_\_

## **Answer to #7**

BZA 02 -26 Kingdom Recovery, LLC.

Request for a variance of use from the terms of the City of Muncie Comprehensive Zoning Ordinance, Article XV, Section 1, to allow group housing in an existing church building for long-term sober living in a single-family residence zone, and Article XXX, Section 2.A, to allow off site parking, and Article XXX, Section 2.C, to allow the performance standards of the parking lot to not be paved rather than developed according to engineer standards.

February 26, 2026 Hearing

**Property:** 304 N. Waldemere Ave, Muncie, Indiana

**Applicant:** Kingdom Recovery LLC

**Owners:** Brian Blevins & Devin Case (50/50 Partnership)

**Zoning Classification:** R-3 Residential

**Proposed Use:** Long-term sober living residence (men)

### **Request**

Kingdom Recovery LLC respectfully requests approval of a variance to permit the adaptive reuse of an existing former church structure as a long-term sober living residence, with occupancy not to exceed fifteen (15) residents, and with final permitted occupancy strictly governed by all applicable state and local zoning, building, and fire safety ordinances.

### **Practical Difficulty**

Also requesting off-site parking for the facility on a property across the street owned by the applicant

Strict application of the zoning ordinance to this property creates a practical difficulty due to the building's pre-existing design, size, and configuration as a former place of assembly. The hardship is not self-created, and without variance relief, the property cannot be reasonably used for a residential purpose consistent with its physical characteristics.

### **Minimum Variance**

The variance requested represents the minimum relief necessary to allow reasonable residential use. The proposed occupancy cap of no more than fifteen (15) residents is conservative and expressly subject to state and local code limitations, ensuring compatibility with the surrounding neighborhood and compliance with public safety requirements.

### **Residential Use & Neighborhood Character**

The proposed use functions as a residential dwelling, not an institution. Residents live long-term and share common living, kitchen, and household spaces. No on-site clinical treatment or medical services are provided. The use is consistent with the intent and purpose of R-3 residential zoning and will not alter the essential character of the neighborhood.

### **Safety & Code Compliance**

Occupancy and operation will be conditioned upon full compliance with the Indiana Fire Code, including Chapter 34 where applicable, review and approval by the Muncie Fire Department and Fire Marshal, and compliance with all applicable state and local building and occupancy regulations. No occupancy level will exceed what is legally permitted under governing codes.

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### **Program Safeguards**

For safety and accountability, the residence will house adult men only and will exclude registered sex offenders, individuals with violent felony convictions, and individuals requiring unmanaged clinical or institutional mental health care. These criteria are programmatic safety standards and not zoning classifications.

### **Fair Housing Considerations**

Individuals in recovery from substance use disorders are a protected class under federal and Indiana Fair Housing laws. The proposed use may not be denied based solely on the status of residents in recovery, and the operation will comply with all applicable civil rights laws.

### **Conclusion**

Granting this variance meets all statutory variance findings, allows reasonable and productive reuse of an existing structure, promotes public health, safety, and welfare, preserves neighborhood character, and provides stable, code-compliant housing for men in recovery. Kingdom Recovery LLC respectfully requests approval of this variance subject to the stated occupancy limitation and full compliance with all state and local ordinances.

**Brian Blevins**, Co-Owner

**Devin Case**, Co-Owner

Kingdom Recovery LLC

- (13) Has the Applicant provided stamped, addressed envelopes to send notices of this Appeal to all property owners within 300 feet? yes

Has the Applicant discussed this Appeal with these owners personally? Yes

If answer is "YES", give their attitudes toward the proposal.

We had sent welcome letters to all surrounding properties explaining who we are and what we would like to do with the building.

- (14) Are there any restrictions, laws, covenants, governing the property which would prohibit its use for the purpose specified in this application? If answer is "YES", attach a copy.

No

- (15) Has work for which this application is being filed already started? If answer is "YES", give details.

Yes, we have to meet code for the property, fire code as well as local code.

- (16) Has there been any previous appeal filed in connection with this property? If answer is "YES", give the date and the decision of the appeal.

Yes, BZA 30-08 approved 9/25/08 (6-0)

- (17) If the Appeal is granted, when will work commence?

Work will commence immediately to bring the building up to code.

When will it be completed?

This will depend on what it takes to be code compliant.

- (18) If the Appeal is granted, who will operate and/or use the proposed improvement for which this application has been filed?

Kingdom Recovery LLC will operate and make all improvements.

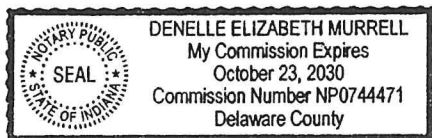
# AFFIDAVIT

(I or We) Brian Blevis and Devin Case  
TYPE NAME(S) OF SIGNATORIES

being duly sworn depose and say that (I or We) (am or are) the (owner[s]) (contract owner[s]) of property involved in this application and that the foregoing signatures, statements and answers herein contained and the information herewith submitted are in all respects true and correct to the best of (my or our) knowledge and belief.

SIGNATURES:

Dan John  
Subscribed and sworn to before me this 21 day of January, 2026



Denelle Murrell  
Notary Public  
October 23, 2030  
Commission Expires  
Resident of Delaware County  
State of Indiana

## DO NOT WRITE IN THIS SPACE

The foregoing application has been inspected by me and was filed with the office of the Delaware-Muncie Metropolitan Board of Zoning Appeals in accordance with all the formal requirements and procedures.

If properly advertised by the applicant, the application will be heard in public hearing on the 26 day of February, 2026.

Signed: [Signature]  
Date: 1/21/26

# Kingdom Recovery LLC

This letter serves as official confirmation that **Devin Case** and **Brian Blevins** are the sole principals of **Kingdom Recovery LLC**, operating as a 50/50 partnership.

Both Devin Case and Brian Blevins are required to jointly sign and represent Kingdom Recovery LLC in all decision-making, legal, zoning, contractual, and administrative matters.

Sincerely,

Brian Blevins  
Principal, Kingdom Recovery LLC

Devin Case  
Principal, Kingdom Recovery LLC



*CHC*  
DELAWARE COUNTY AUDITOR

**2026R00380**  
**JAN SMOOT**  
**DELAWARE COUNTY RECORDER**  
**RECORDED ON**  
**01/12/2026 11:06 AM**  
**REC FEE 25.00**  
**PAGES: 1**  
**RECORDED AS PRESENTED**

**WARRANTY DEED**

THIS INDENTURE WITNESSETH, that

**Safe Harbor Apostolic Lighthouse**

of **Delaware County**, in the State of **IN**,

Convey and Warrant to

**Kingdom Recovery LLC**, an Indiana Limited Liability Company, as joint tenants

of **Blackford County**, in the State of **IN**, for and in consideration of the sum of One Dollar (\$1.00) and other valuable consideration, the receipt whereof is hereby acknowledged, in the following described Real Estate in **Delaware County**, in the State of **IN** to-wit:

**Lots 58, 59, 60, except the South 19.92 feet, 91 and 92 In Mayfield Addition, an Addition to the City of Muncie, Indiana.**

Tax Duplicate No.: 18-11-11-479-002.000-003, 18-11-11-479-003.000-003, 18-11-11-478-011.000-003, 18-11-11-478-012.000-003  
Property Address: 304 North Waldemere Avenue, Muncie, IN 47303

SUBJECT TO TAXES DUE AND PAYABLE: Spring 2026

GRANTEES TAX MAILING ADDRESS: **Kingdom Recovery LLC**  
**409 North Jefferson Street, Hartford City, IN 47348**

Subject to easements, restrictions, and rights of way of record.

In Witness whereof the said **Rick L. Monroe, Charlotte A. Monroe, and Brenda Waters, Trustees of Safe Harbor Apostolic Lighthouse** have hereunto executed the foregoing deed on this 26th day of December 2025.

**Trustees of Safe Harbor Apostolic Lighthouse**

By: *Rick L. Monroe*  
**Rick L. Monroe, Pastor/Trustee**

By: *Charlotte A. Monroe*  
**Charlotte A. Monroe, Trustee**

By: *Brenda Waters*  
**Brenda Waters, Trustee**

State of **IN**  
County of **Delaware**SS:

Before me, the undersigned, a Notary Public in and for said County, on this 26th day of December 2025, came **Rick L. Monroe, Charlotte A. Monroe, and Brenda Waters, Trustees of Safe Harbor Apostolic Lighthouse**, and acknowledged the execution of the foregoing instrument.

Witness my hand and official seal.

My commission expires: **STATE OF INDIANA**  
Resident of: **MY COMMISSION EXPIRES AUGUST 01, 2032**  
**COMMISSION NUMBER NP0757888**

UTONDA N DUBOIS  
NOTARY PUBLIC  
**SEAL**

*Utonda N. DuBois* (Seal)  
Notary Public

This instrument was prepared by: **James R. Wesley, Attorney at Law**

I affirm, under the penalties for perjury, that I have taken reasonable care to redact each Social Security number in this document, unless required by law: **Utonda N. DuBois**

2025-D-2715

**ARTICLES OF ORGANIZATION**

Formed pursuant to the provisions of the Indiana Code.

**ARTICLE I - NAME AND PRINCIPAL OFFICE ADDRESS**

**BUSINESS ID** 202510231937623  
**BUSINESS TYPE** Domestic Limited Liability Company  
**BUSINESS NAME** KINGDOM RECOVERY LLC  
**PRINCIPAL OFFICE ADDRESS** 409 N Jefferson St, Hartford City, IN, 47348, USA

**ARTICLE II - REGISTERED OFFICE AND ADDRESS**

**REGISTERED AGENT TYPE** Individual  
**NAME** Brian Blevins  
**ADDRESS** 409 N Jefferson St, Hartford City, IN, 47348, USA  
**SERVICE OF PROCESS EMAIL** blevbrian73@yahoo.com

I acknowledge that the Service of Process email provided above is the email address at which electronic service of process may be accepted.

**ARTICLE III - PERIOD OF DURATION AND EFFECTIVE DATE**

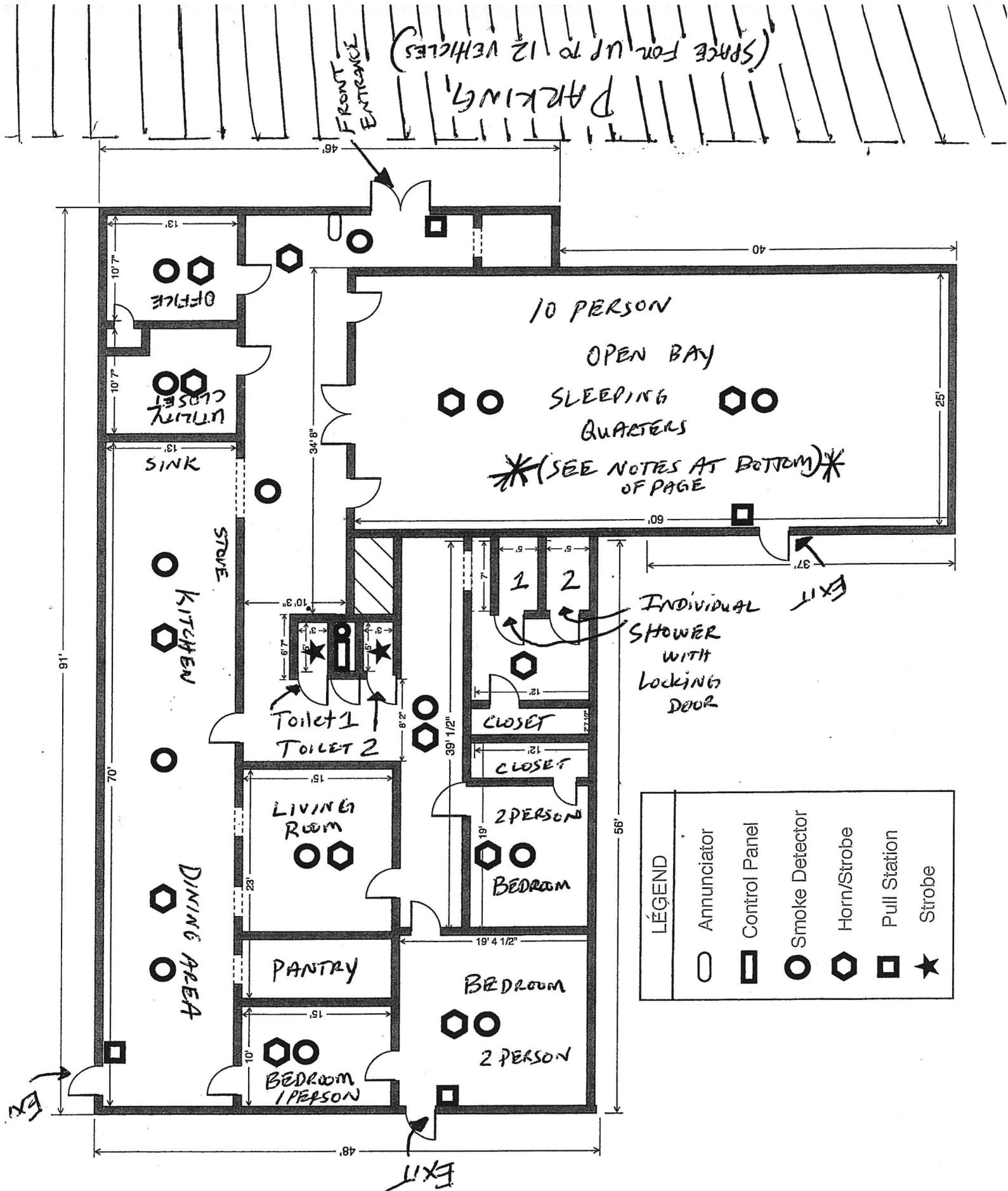
**PERIOD OF DURATION** Perpetual  
**EFFECTIVE DATE** 10/23/2025  
**EFFECTIVE TIME** 06:13PM

**ARTICLE IV - GOVERNING PERSON INFORMATION**

**TITLE** Member  
**NAME** Brian E Blevins  
**ADDRESS** 409 N Jefferson St, Hartford City, IN, 47348, USA

**MANAGEMENT INFORMATION**

**THE LLC WILL BE MANAGED BY MANAGER(S)** No  
**IS THE LLC A SINGLE MEMBER LLC?** No



\* EACH PERSON IN THE SLEEPING BAY WILL HAVE A MINIMUM OF 70sq. ft of USABLE FLOOR SPACE.

\* CAN AND WILL BE CONFIGURED ACCORDING TO LOCAL HOUSING CODE, ZONING ORDINANCE, CURRENT BUILDING CODE, AND TO THE REQUIREMENTS OF THE BOARD OF ZONING APPEALS.



