

DELAWARE-MUNCIE METROPOLITAN BOARD OF ZONING APPEALS

APPLICATION FOR APPEAL

Jurisdiction: (Check One)

☒ Delaware County

☐ City of Muncie

Submitted: 10-9-24

Case No.: BZA 59-24

(1) Applicant: Sharon Jones

Address: 608 North County Road 500 East

Phone: 765-748-0452

(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.: Plat Book 12

Page: 63-64

Purchase Date: December 15, 2023

Legal Description: (From the Deed or Abstract)

Lot numbered twenty (20) in Boggs subdivision, an addition located in Liberty Township, Delaware County, Indiana, a plat of which is recorded in Plat Book 12, pages 63-64 of the records of plats of Delaware County, Indiana.

(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).

608 North County Road 500 East, Muncie, IN 47302

(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.)

Request for a variance from the terms of the Delaware County Comprehensive Zoning Ordinance, Article XIV, Section 3, to allow a ~18' front setback rather than 30' for a variance of ~12' for an addition to a house in a residence zone.

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

Unable to meet setback requirments for new addition to stucture.

Proposed addition to the front of the exisitng house
will be 13'8" and be 36' from the edge of the road.
Cyler & Karrie Sarah are purchasing the property from
Sharon Jones and will be living in the house.

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

R2-Residence Zone

(10) Present use of the property:

Residential

(11) Describe the proposed use of the property:

Residential

(12) Is the property:

☒ Owner Occupied

☐ Renter Occupied

☐ Other: _____

- (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? No
If answer is "YES", give their attitudes toward the proposal.

- (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.

No

- (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.

No

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

Right away

When will it be completed?

Approximately 3-4 months after the start date.

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

Cyler and Karrie Sarah

AFFIDAVIT

(I or We) Sharon Jones by Brenda L. Sarah POA

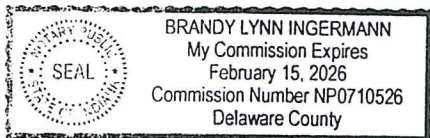
TYPE NAME(S) OF SIGNATORIES

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:

Brenda L. Sarah

Subscribed and sworn to before me this 9 day of October, 2024,



Brandi Lynn Ingermann
Notary Public
2-15-26

Commission Expires

Resident of Delaware County

State of Indiana

PRINT

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 31 day of October, 2024.

Signed:

Date:

[Signature]
10.15.24

DULY ENTERED FOR TAXATION
TRANSFER FEES \$ 10.00
Jul 03 2024 - ER

 NC/ND
DELAWARE COUNTY AUDITOR

2024R09099
JAN SMOOT
DELAWARE COUNTY RECORDER
RECORDED ON
07/03/2024 10:52 AM
REC FEE 25.00
PAGES: 2
RECORDED AS PRESENTED

Tax Mailing Address: 608 North County Road 500 East, Muncie, IN 47302

AFFIDAVIT OF SURVIVORSHIP

STATE OF INDIANA)
) SS:
COUNTY OF DELAWARE)

SHARON L. JONES, being first duly sworn upon her oath, deposes and says:

That, Clara Gene Jones and Sharon L. Jones, husband and wife, acquired title to the following described real estate situated in Delaware County, in the State of Indiana, to-wit:

Lot Numbered Twenty (20) in Boggs Subdivision, an Addition located in Liberty Township, Delaware County, Indiana, a plat of which is recorded in Plat Book 12, pages 63-64 of the records of plats of Delaware County, Indiana.

Parcel Number: 18-12-09-351-001.000-010
Commonly known as: 608 North County Road 500 East, Muncie, IN 47302

Affiant further says that Clara Gene Jones and Sharon L. Jones remained continuously married until Clara Gene Jones's death on the 15th day of December, 2023. Sharon L. Jones, having survived him, became the legal owner of the real estate hereinabove described by virtue of the property laws of the State of Indiana.

Affiant further states that this Affidavit is made for the sole purpose of having the Auditor of Delaware County, Indiana, transfer the real estate described herein from the names of Clara Gene Jones and Sharon L. Jones into the sole name of Sharon L. Jones.

Affidavit of Survivorship
Parcel Number: 18-12-09-351-001.000-010
Page 2 of 2

IN WITNESS WHEREOF, the said Sharon L. Jones has hereunto set her hand and seal this
26th day of June, 2024.

Sharon L. Jones
Sharon L. Jones

STATE OF INDIANA, COUNTY OF DELAWARE, SS:

Before me, the undersigned, a Notary Public in and for said County and State, personally
appeared the within named Sharon L. Jones, who acknowledged the execution of the foregoing
Affidavit of Survivorship to be her voluntary act and deed for the uses and purposes expressed
therein.

Subscribed and sworn to before me this 26th day of June, 2024.



Michael D. Wilhelm
Notary Public
Printed Name: Michael D. Wilhelm
Resident of Hamilton County, Indiana

My Commission Expires:
December 21, 2030

This instrument prepared by MICHAEL D. WILHELM, Attorney at Law
DeFur Voran LLP, 8409 Fishers Centre Drive, Fishers, IN 46038

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. Michael D. Wilhelm

GENERAL DURABLE POWER OF ATTORNEY

I, Sharon Leigh Jones, of Delaware County, Indiana, do hereby designate my daughter, Brenda Leigh Sarah, as my true and lawful attorney-in-fact or agent.

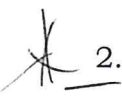
In the event that Brenda Leigh Sarah is unavailable or unable to serve as my agent or if she is not living at the time of my death or be incapable or unwilling of so serving, then Candice Jean Adams shall serve as my attorney-in-fact.

In the event that any agent, named herein, is unavailable or unable to serve, then a substitute agent may execute and deliver an affidavit that the prior agent is unable to serve or continue to serve and such affidavit shall be conclusive evidence insofar as third parties are concerned of the facts set forth therein.

Third parties shall be held harmless for any action or inaction taken in reliance upon the affidavit of such agent.

My Attorney-in-fact shall only be liable for actions under taken in bad faith.

I confer upon said attorney(s) the following authority under I.C. 30-5-5:

1. Authority to receive confidential information; to prepare, sign and file tax return forms 1040, 1040X, IT40 and IT40X for all tax years, inclusive; and to any time perform any and all other acts before the taxing authorities of any jurisdiction, including specifically the execution of Internal Revenue Forms 2848 and 8821, the Indiana Department of Revenue Power of Attorney Form 48 (or any successors thereto), and such other authorization forms as may be necessary to carry out the purposes of this delegation of authority.
-  2. General authority with respect to real property transactions (I.C. 30-5-5-2).
3. General authority with respect to tangible personal property transactions (I.C. 30-5-5-3).
4. General authority with respect to bond, share and commodity transactions excluding any authority to purchase calls or commodities or to purchase any security on margin (I.C. 30-5-5-4).
5. General authority with respect to retirement plans (I.C. § 30-5-5-4.5).
6. General authority with respect to banking transactions (I. C. § 30-5-5-5).
7. General authority with respect to business operating transactions (I.C. § 30-5-5-6).
8. General authority with respect to insurance transactions (I.C. 30-5-5-7).
9. General authority with respect to beneficiary transactions (I.C. 30-5-5-8).

10. General authority with respect to gift transactions pursuant to I.C. § 30-5-5-9 including authority to make gifts to protect and preserve my estate from the burdens of long term healthcare so that I may receive benefits from government programs including Medicaid provided that all gifts are made in accordance with my known estate plan.
11. General authority with respect to fiduciary transactions (I.C. 30-5-5-10).
12. General authority with respect to claims and litigation (I.C. 30-5-5-11).
13. General authority with respect to family maintenance (I.C. 30-5-5-12).
14. General authority with respect to benefits from military service (I.C. 30-5-5-13).
15. General authority with respect to records, reports and statements (I.C. 30-5-5-14). This authority includes the power to execute on my behalf any specific power of attorney required by any taxing authority to allow my co-attorneys-in-fact to act on my behalf before that taxing authority on any return or issue.
16. General authority with respect to estate transactions (I.C. 30-5-5-15).
17. General authority to delegate in writing all or any of the authority granted herein (I.C. 30-5-5-18).
18. General authority to perform any and all acts and execute any and all documents not herein excluded the same as I might do were I then present and competent (I.C. 30-5-5-19).
19. General authority with regards to my Digital Assets concerning, but not limited to the following: Electronic records, reports, and statements, including authority to:
 - (I) gain access to and exercise control over my digital assets,
 - (II) access my user accounts with online service providers,
 - (III) access, retrieve, copy, ore store electronic communications sent or received by me, and
 - (IV) perform any acts in connection with the use of electronic records pertaining to my affairs.

In addition to the foregoing powers, my attorney-in-fact shall have the power:

20. To communicate with any and all lawyers that may have represented me in the past, present or future and any communications with my attorney-in-fact shall be treated the same as though the lawyer was communicating with me and decisions made by the co-attorneys-in-fact shall be treated as though they were decisions made by me.

21. Authority to disclaim any power or discretion that is considered unwanted and to disclaim gifts, inheritance or other transfers to me even if my attorney-in-fact benefits by making the disclaimer on my behalf.

I hereby ratify and confirm all that my said attorney-in-fact or agent shall do by virtue hereof.

My attorney-in-fact may be reimbursed for expenses, but shall not be entitled to a fee for services provided.

This power of attorney shall be effective as of the date it is signed.

I hereby reserve the right of revocation; however, this Power of Attorney shall continue in full force and effect until I have executed and recorded in the Recorder's Office of this county of my domicile a written revocation hereof.

If it becomes necessary to secure the appointment of a guardian of my person or estate or if protective proceedings are filed on my behalf, I hereby request the appropriate court to appoint my named attorney-in-fact as my guardian.

This power of attorney shall continue in effect until revoked or until my death whichever first occurs, and neither my disability nor my incompetence shall affect or terminate this power of attorney. **I further state that: This Power of Attorney shall not be affected by my subsequent incompetence.**

IN WITNESS WHEREOF, I have hereunto set my hand and seal on the 12th day of December, 2023.

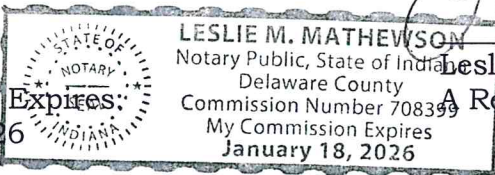
Sharon L. Jones
Sharon Leigh Jones

STATE OF INDIANA)
) SS:
COUNTY OF DELAWARE)

Before me, a Notary Public in and for said County and State, personally appeared Sharon Leigh Jones, who acknowledged the execution of the foregoing General Durable Power of Attorney.

WITNESS my hand and Notarial seal, this 12th day of December, 2023.

My Commission Expires: January 18, 2026

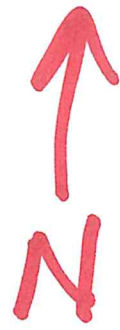
 Leslie M. Mathewson
Leslie M. Mathewson, Notary Public
A Resident of Delaware County, IN

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 and this instrument prepared by Leslie M. Mathewson, Mathewson Law, P.C., 625 S. Tillotson Ave, Muncie, Indiana, 47304 Telephone: 765-587-4526

RECEIVED

OCT 09 2024

DELAWARE-MUNCIE
METROPOLITAN PLAN COMMISSION

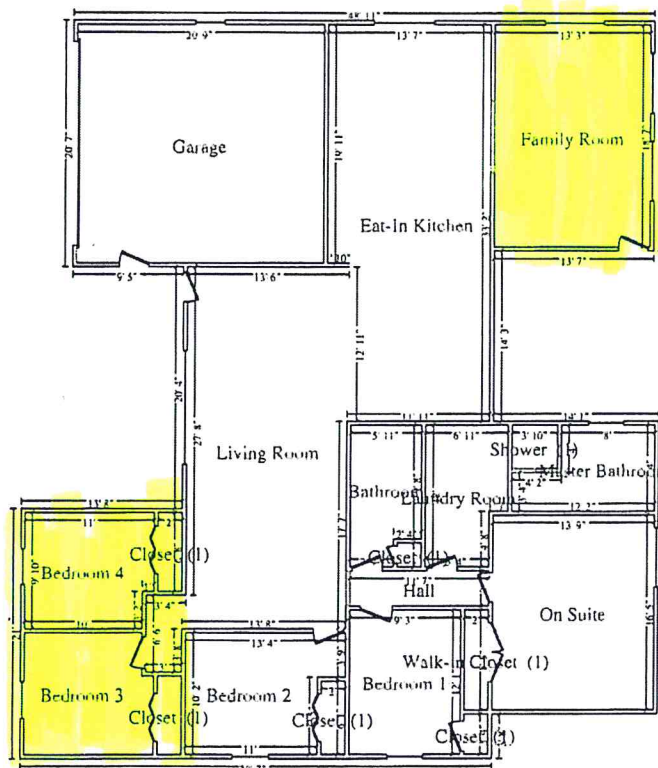


64 ft



SKETCH I - Main Level

← 100 ft →



← 36 ft →

36' to the edge of road

15 ft



CR 500 East

SKETCH1 - Level 2

