

**APPLICATION FOR VARIANCE - HOUSING BOARD OF APPEALS**

**Section 1: Applicant Information**

Name of Applicant: LYNN MARIE OLSON  
 Address of Applicant: 1121 BYDDING Rd. ANN ARBOR, MI 48103  
 Daytime Phone: 734 276-1706  
 Fax: \_\_\_\_\_  
 Email: FIRE SPIRITLO @NETSCAPE.NET  
 Applicant's relationship to property: AGENT FOR SHARON BURACK

**Section 2: Property Information**

Address of Property: 2915 KIMBERLY RD. ANN ARBOR, MI 48104  
 Zoning Classification: RESIDENTIAL  
 Tax ID# (if known): \_\_\_\_\_  
 \*Name of Property Owner: SHARON BURACK

*\*If different than applicant, a letter of authorization from the property owner must be provided.*

**Section 3: Request Information**

Variance

Chapter(s) and Section(s) from which a variance is requested:

BUILDING CH. 105  
CODE, SECTION 8:504(4)(B)2  
CH. 105  
 " " 8:504(4)(B)4

*Example: 2003 Building Code, Section 5:26*

Required dimension:

6'-0" CEILING CLEARANCE

9" TREAD DEPTH

*Example: 7' Ceiling Clearance*

PROPOSED dimension:

CURRENT DIMENSION 5'7"

CURRENT DIMENSION 8" TREAD DEPTH

*Example: 6' 5" under landing*

Give a detailed description as to what kind of work you want to do that you would need this variance for (attach additional sheets if necessary)

I WOULD NOT WANT TO DO ANY WORK TO CHANGE CURRENT DIMENSIONS.  
I WOULD LIKE TO LEAVE ORIGINAL STAIRS AND CEILING AS THEY ARE.

**Section 4: Variance Request**

The City of Ann Arbor Housing Board of Appeals has the powers granted by State law and Building Codes. A variance may be granted by the Housing Board of Appeals only in cases involving practical difficulties or unnecessary hardships when **ALL** of the following is found **TRUE**. Please provide a complete response to each item below. These responses, together with the required materials in Section 5 of this application, will form the basis for evaluation of the request by staff and the Housing Board of Appeals.

1. Are there hardships or practical difficulties to complying with the Code? Are these hardships or practical difficulties an exception or unique to the home compared to other homes in the City? YES, IT WOULD CAUSE A HUGE FINANCIAL HARDSHIP. PRACTICALLY,

THE TENANTS CURRENTLY OCCUPYING THE SECOND FLOOR BEDROOMS WOULD NOT HAVE ACCESS TO THEIR LIVING QUARTERS. THE HARDSHIPS/DIFFICULTIES WOULD NOT BE AN EXCEPTION OR UNIQUE COMPARED TO OTHER HOMES IN THE NEIGHBORHOOD. HOWEVER, IT WOULD CHANGE THE UNIQUE AND ORIGINAL PHYSICAL CHARACTERISTICS OF THE HOME THAT GIVES IT APPEAL.

2. Are the hardships or practical difficulties more than mere inconvenience, inability to obtain a higher financial return, or both? YES. IT WOULD REQUIRE ME TO PROVIDE ALTERNATIVE LIVING ARRANGEMENTS FOR THE TENANTS. THIS WOULD BE AN ADDITIONAL FINANCIAL BURDEN ADDED TO THE COST OF RECONSTRUCTION. MY INABILITY TO OBTAIN A HIGHER FINANCIAL RETURN WOULD NOT BE AFFECTED.

3. What effect will granting the variance have on the neighboring properties? \_\_\_\_\_

THERE WOULD BE NO EFFECT THAT I KNOW OF ON THE NEIGHBORING PROPERTIES.

4. What physical characteristics of your property in terms of size, shape, location or topography prevent you from using it in a way that is consistent with the Code?

THERE IS NOTHING THAT WOULD PREVENT ME FROM USING IT IF CONSISTENT WITH THE CODE.

5. Is the condition which prevents you from complying with the ordinance self-imposed? How did the condition come about? IT WAS NOT SELF-IMPOSED. THE

CONDITION WAS NOTED BY THE HOUSING INSPECTOR AS A CODE VIOLATION. HE ALSO NOTED... "OBTAIN A VARIANCE FROM THE HOUSING BOARD OF APPEALS". THE TREAD DEPTH AND CEILING HEIGHT ARE THE ORIGINAL SIZE AND DIMENSIONS WHEN ORIGINALLY CONSTRUCTED IN 1948 AND HAVE REMAINED THE SAME SINCE I PURCHASED IT IN 1994.

### Section 5: Required Materials

The following materials are required for all variance requests. Failure to provide these materials will result in an incomplete application and will delay staff review and Housing Board of Appeals consideration of the request. The materials listed below must accompany the application and constitute an inseparable part of the application. All materials must be provided on **8 1/2" by 11" sheets.**

- State proposed use of property, size of lot and size and type of proposed changes.
- Building floor plans showing interior rooms, including dimensions.
- Photographs of the property and any existing buildings involved in the request.
- Any other graphic or written materials that support the request.

LETTER OF AUTHORIZATION

To: HOUSING BOARD OF APPEALS CITY OF ANN ARBOR, MI

DATE: 2-26-, 2013

FROM: SHARON BURACK, PROPERTY OWNER 2915 KIMBERLY RD, ANN ARBOR, MI 48104

HOME ADDRESS: 2912 ELEVENTH ST. #5 SANTA MONICA, CA 90405

I, THE PROPERTY OWNER, HEREBY AUTHORIZE AND GIVE MY PERMISSION TO: LYNN MARIE OLSON, MY AGENT FOR ABOVE PROPERTY, TO APPEAR BEFORE THE HBA WITH THE APPLICATION REQUESTING A VARIANCE.

SHARON BURACK  
NAME

STATE OF CALIFORNIA

COUNTY OF Los Angeles

*Sharon Burack*  
SIGNATURE

SUBSCRIBED AND SWORN TO (OR AFFIRMED) BEFORE ME ON THIS

26 DAY OF February, 2013, BY  
DATE MONTH  
Sharon Burack  
NAME OF SIGNER

PROVED TO ME ON THE BASIS OF SATISFACTORY EVIDENCE TO BE THE PERSON WHO APPEARED BEFORE ME.

SIGNATURE *[Signature]*  
SIGNATURE OF NOTARY PUBLIC



**Section 6: Acknowledgement**

**SIGNATURES MUST BE SIGNED IN PRESENCE OF NOTARY PUBLIC**

I, the applicant, request a variance from the above named Chapter(s) and Section(s) of the Code for the stated reasons, in accordance with the materials attached hereto

734-276-1706

Phone Number

Firespirit10@notarype.net

Email Address

*Lynn M. Olson*

Signature

LYNN M. OLSON

Print Name

I, the applicant, hereby depose and say that all of the aforementioned statements, and the statements contained in the materials submitted herewith, are true and correct.

*Lynn M. Olson*

Signature

Further, I hereby give City of Ann Arbor Planning & Development Services unit staff and members of the Housing Board of Appeals permission to access the subject property for the purpose of reviewing my variance request.

*Lynn M. Olson*

Signature

On this 18 day of February, 2013, before me personally appeared the above named applicant and made oath that he/she has read the foregoing application by him/her subscribed and knows the contents thereof, and that the same is true as to his/her own knowledge except as to those matters therein stated to be upon his information and belief as to those matters, he/she believes them to be true.

*Angelina Scheideman*

Notary Public Signature

Aug 05 2015

Notary Commission Expiration Date

Angelina Scheideman

Print Name

ANGELINA SCHEIDEMAN  
Notary Public, State of Michigan  
County of Oakland  
My Commission Expires Aug. 05, 2015  
Acting in the County of Washtenaw

**Staff Use Only**

Date Submitted: \_\_\_\_\_ Fee Paid: \_\_\_\_\_

File No.: \_\_\_\_\_

Pre-Filing Review Person & Date: \_\_\_\_\_

Secondary Staff Review Person & Date: \_\_\_\_\_

Date of Public Hearing: \_\_\_\_\_

BBA Action: \_\_\_\_\_

**SECTION 5:**

**THE PROPOSED USE OF THIS PROPERTY IS: RENTAL**

**SIZE OF LOT: 130x99.04**

**SIZE AND TYPE OF PROPOSED CHANGES: NONE.** I WOULD LIKE TO KEEP THE ORIGINAL STAIRS UP TO THE SECOND FLOOR, KEEPING TREAD DEPTH AND HEADROOM ON STAIRS THE SAME.

ACCORDING TO THE CONTRACTOR IN ORDER TO IMPLEMENT THE PROPOSED CHANGES TO SATISFY THE CODE WOULD REQUIRE THAT I RIP APART HALF THE HOUSE.

I UNDERSTAND THE CODE IS MEANT FOR THE SAFETY OF THE TENANTS.

CURRENTLY THERE ARE 3 SMOKE ALARMS IN THE HOUSE, ONE AT TOP OF STAIRCASE, ONE AT THE BOTTOM AND 1 IN THE BASEMENT.

I WILL BE INSTALLING ONE IN EACH OF THE 3 BEDROOMS AND MOVE THE BASEMENT DETECTOR TO TOP OF STAIRCASE AS NOTED BY THE INSPECTOR.

I WOULD BE MORE THAN WILLING TO INSTALL INTERCONNECTED WIRELESS DETECTORS AT THE STAIRCASE LEADING TO THE 2<sup>ND</sup> FLOOR OR WHAT EVER YOUR RECOMMENDATIONS MIGHT BE AS CONTINGENT TO APPROVAL OF VARIANCE.

MORTGAGE SURVEY

**Certified to:** GREENTREE FINANCIAL CORPORATION

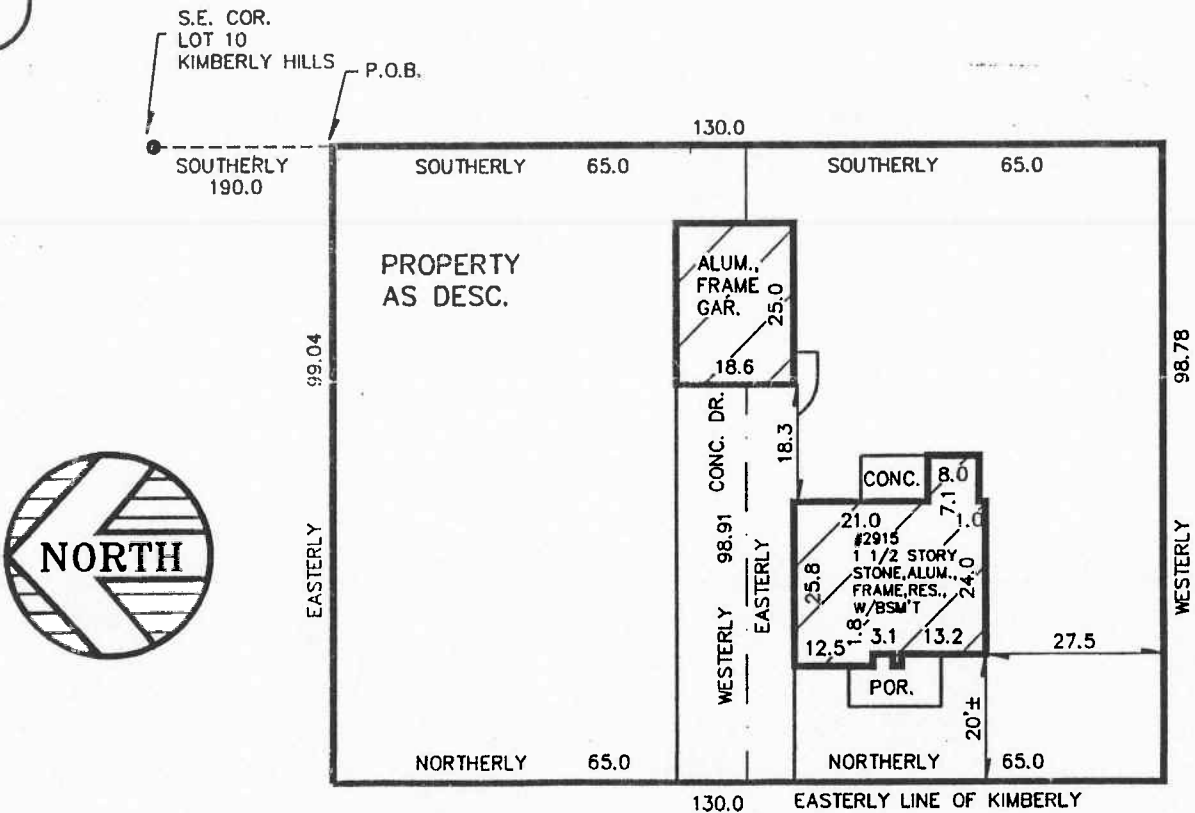
**Applicant:** SHARON BURACK

**Property Description:**

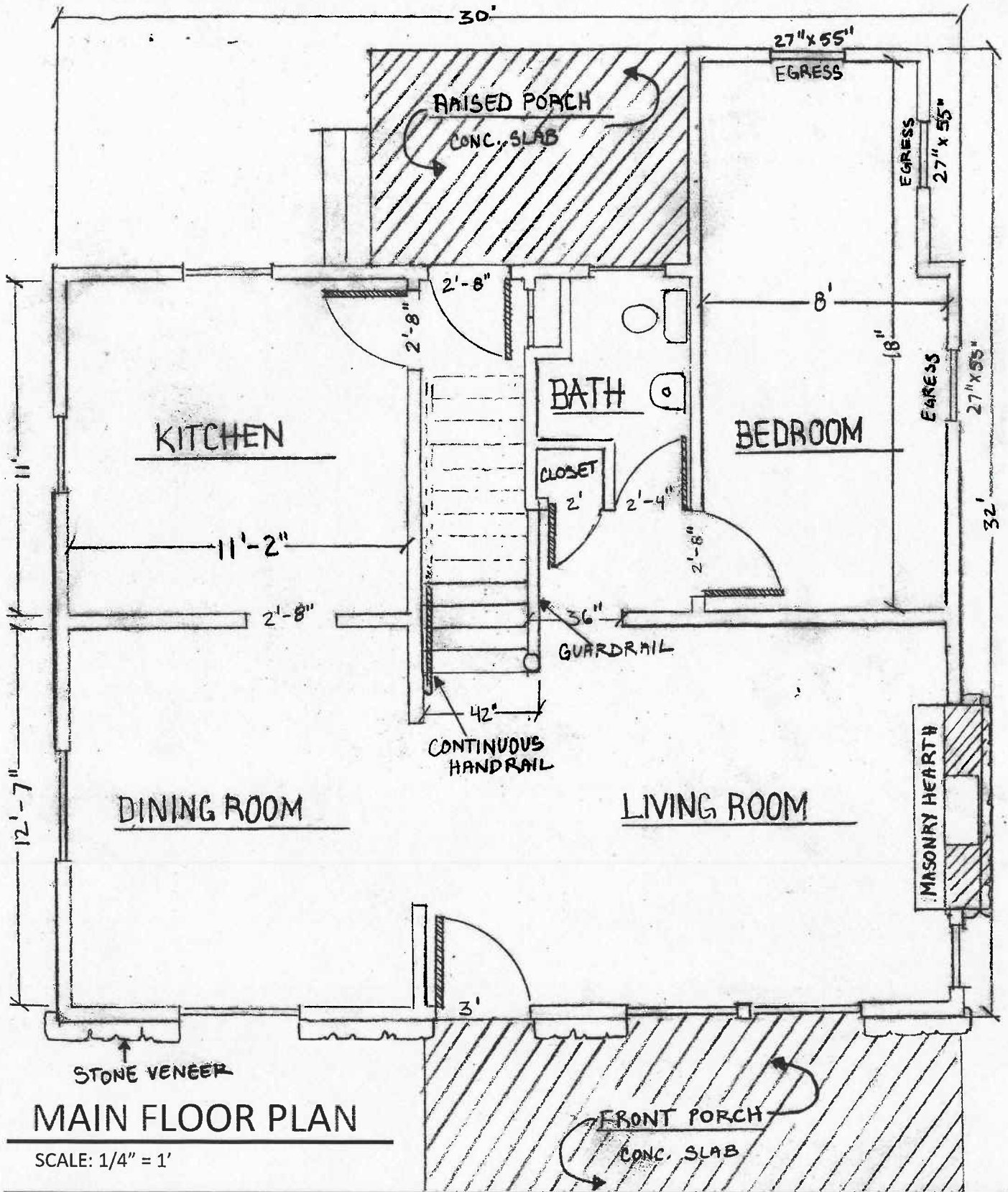
Land situated in the City of Ann Arbor, Washtenaw County, Michigan, described as follows:

Commencing at an iron pipe in the prolongation of the East line of Kimberly Hills 190 feet South of the SE corner of Lot 10 of Kimberly Hills; thence continuing Southerly 65 feet to an iron pipe; thence Westerly 98.91 feet to an iron pipe in the Easterly line of Kimberly Road; thence Northerly along said Easterly line 65 feet to an iron pipe; thence easterly 99.04 feet to the place of beginning, being a part of the southwest quarter of Section 3, Town 3 South, Range 6 East, Pittsfield Township, Washtenaw County, Michigan.

Also commencing at an iron pipe in the prolongation of the East line of Kimberly Hills 255 feet South of the Southeast corner of Lot 10, Kimberly Hills; thence continuing Southerly 65 feet to an iron pipe; thence Westerly 98.78 feet to an iron pipe in the Easterly line of Kimberly Road; thence Northerly along said Easterly line 65 feet to an iron pipe; thence Easterly 98.91 feet to the place of beginning, being a part of the southwest quarter of Section 3, T3S, R6E, Pittsfield Township, Washtenaw County, Michigan.




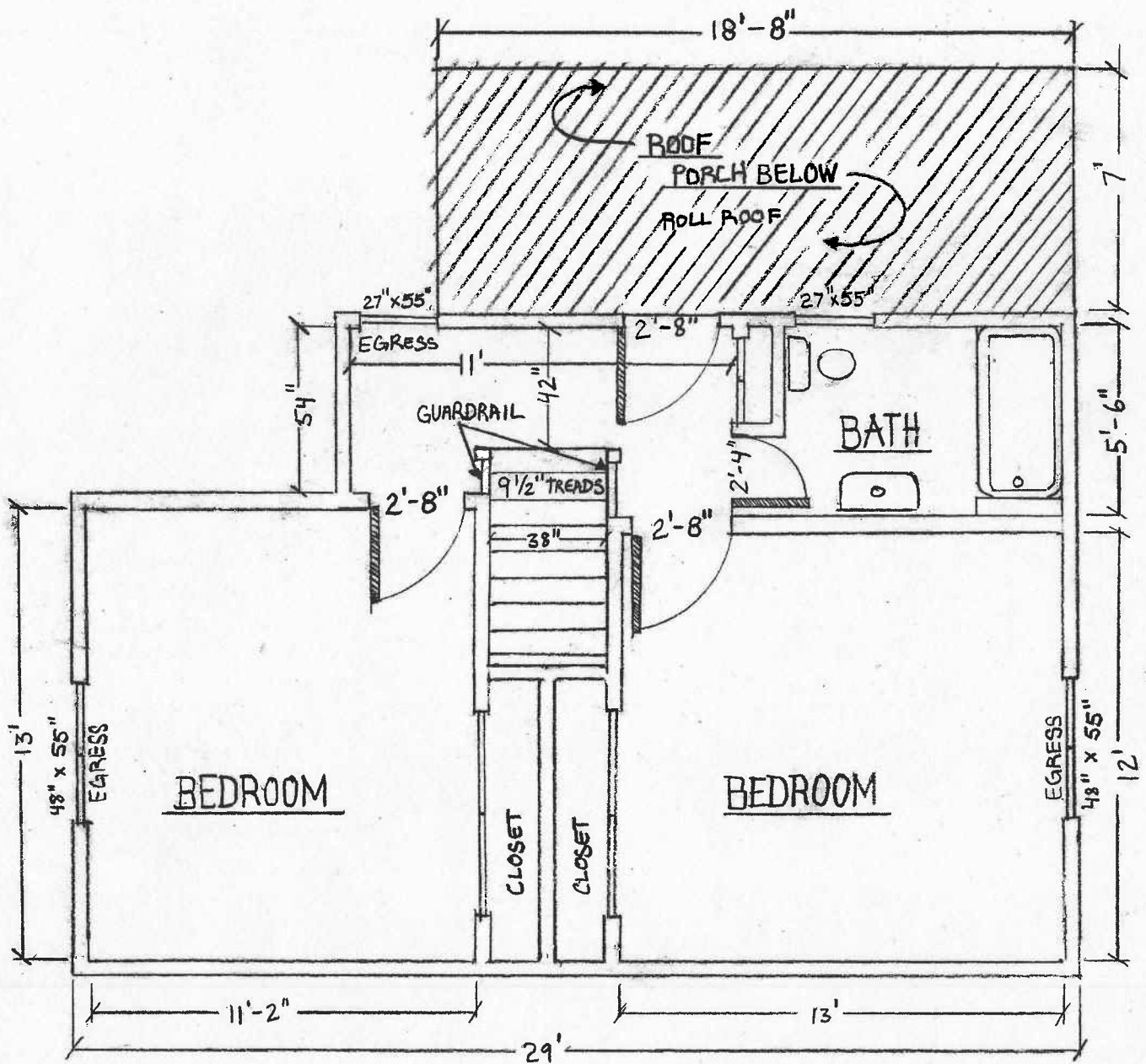
**KIMBERLY RD. 50FT. WD.**  
16' GRAVEL



# MAIN FLOOR PLAN

SCALE: 1/4" = 1'

<p><b>1</b> 2/22/13</p>	<p>PREPARED BY: <b>MATTHEW HADLEY</b> PH. 734-395-0676</p>	<p><b>2915 Kimberley</b> Ann Arbor, MI 48104 AS-BUILT FLOOR PLANS</p>	 <p>hadley craft, LC</p>
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## SECOND FLOOR PLAN

SCALE: 1/4" = 1'

2

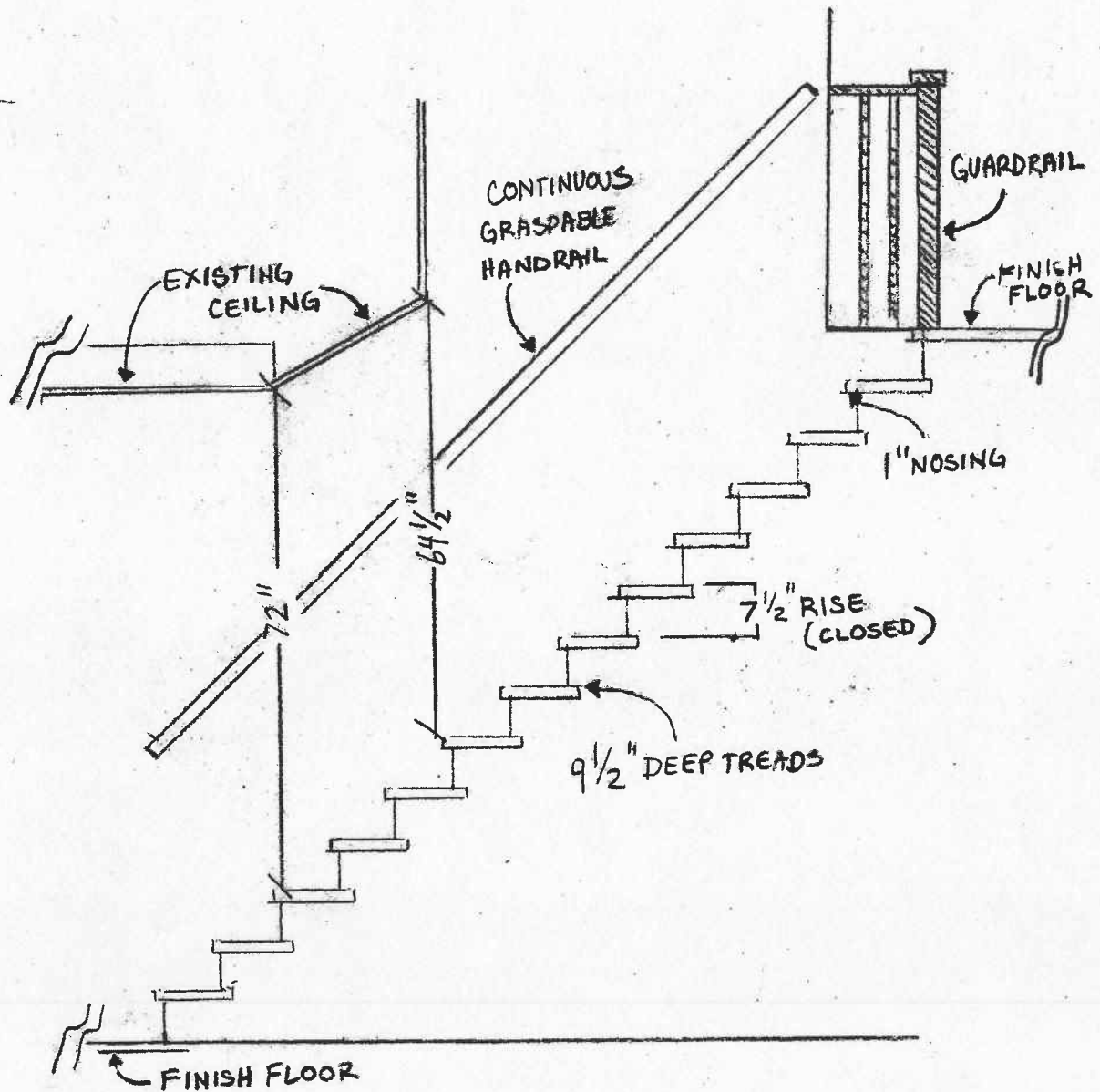
2/22/13

PREPARED BY:  
**MATTHEW HADLEY**  
 PH. 734-395-0676

2915 Kimberley  
 Ann Arbor, MI 48104  
 AS-BUILT FLOOR PLANS







## STAIRCASE SOUTH ELEVATION

SCALE: 1/2" = 1'

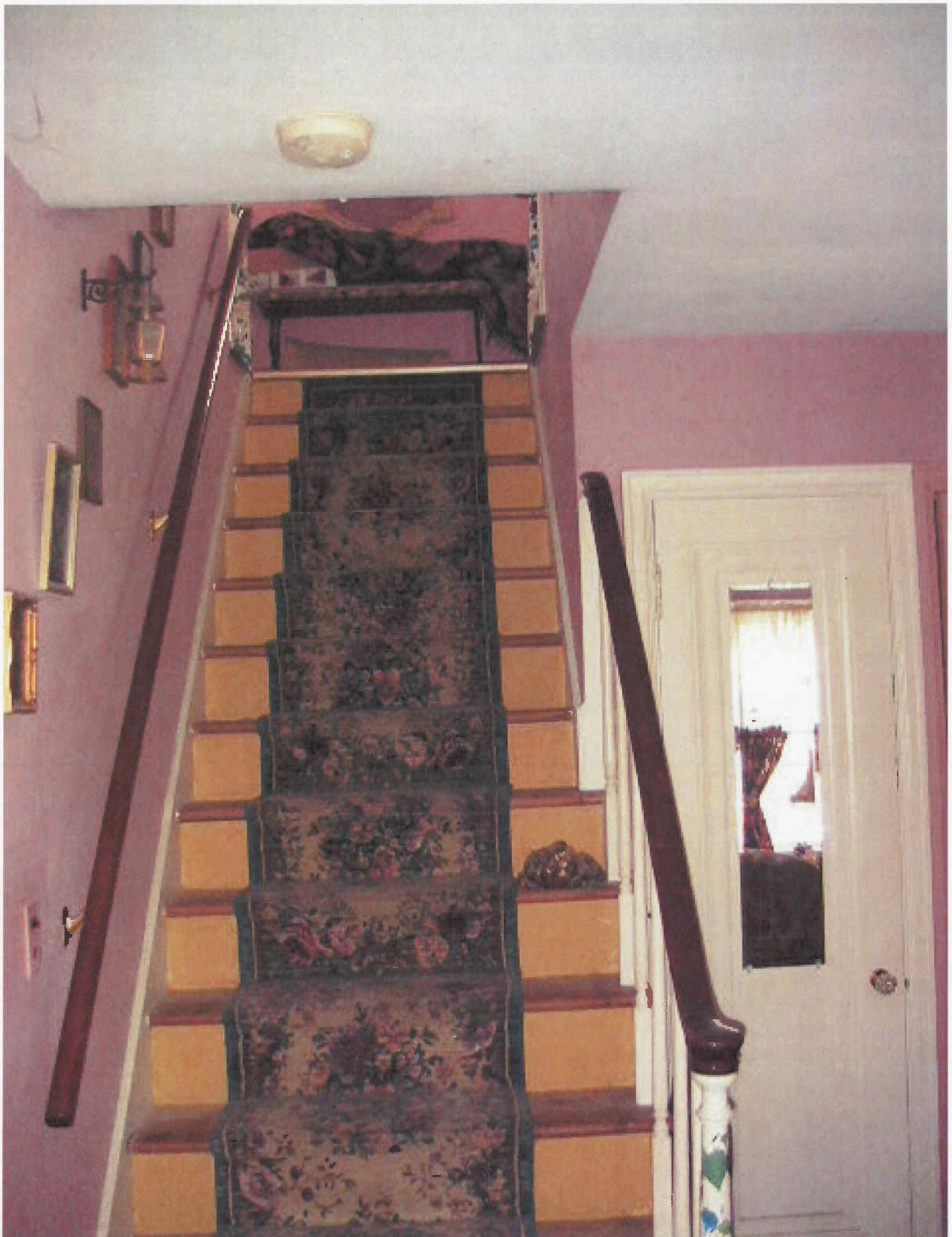
3

2/22/13

PREPARED BY:  
**MATTHEW HADLEY**  
 PH. 734-395-0676

2915 Kimberley  
 Ann Arbor, MI 48104  
 AS-BUILT FLOOR PLANS













## CITY OF ANN ARBOR

100 N. FIFTH AVE • ANN ARBOR, MI 48104  
(734) 794-6267

**Receipt Number: 2013-00046507**

Project Number	HBA13-001
Receipt Print Date:	03/06/2013
Address	2915 KIMBERLEY RD
Applicant	BURACK SHARON A
Owner	BURACK SHARON A
Project Description	Stair tread depth and ceiling hgt to 2nd floor

### FEES PAID

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**0010-033-3370-0000-4362**

**APPEAL FEES**

HBA	0010-033-3370-0000-4362	500.00
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<b>Total Fees for Account 0010-033-3370-0000-4362:</b>	<b>500.00</b>
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<b>TOTAL FEES PAID</b>	<b>500.00</b>
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DATE PAID: Wednesday, March 6, 2013

PAID BY: LOGOS

PAYMENT METHOD: CHECK 1727