



**CITY OF GROVE CITY**  
 4035 Broadway  
 Grove City, Ohio 43123  
 (614) 277-3000  
 Fax (614) 277-3011  
 www.ci.grove-city.oh.us

**SPECIAL USE PERMIT  
 APPLICATION  
 FEE \$100.00**

Date Submitted 10-18-10

PROJECT INFORMATION		
BUSINESS NAME <u>THREE REDNECKS AND A DREAM LLC</u>		
BUSINESS ADDRESS <u>4346 BROADWAY G.C.</u>		
PARCEL TAX ID # <u>25-312754</u>		
EXISTING ZONING		
PROPERTY OWNER(S) <u>DANIEL J MKOTTO</u>		
MAILING ADDRESS <u>13745 WOODS GRASSUM RUN RD MT. STERLING OH 43143</u>		
DAYTIME TELEPHONE ( ) <u>614-949-6474</u>	FAX NUMBER ( )	E-MAIL

APPLICANT/AGENT		
NAME OF APPLICANT <u>JAMES T SPOHN</u>		
MAILING ADDRESS <u>2325 BROOKBANK DR GROVE CITY OH 43123</u>		
DAYTIME TELEPHONE ( ) <u>614-207-1964</u>	FAX NUMBER ( )	E-MAIL <u>jimm4spohn3@hotmail.com</u>
DESIGNATED CONTACT PERSON	DAYTIME TELEPHONE ( )	

I, JAMES T SPOHN, the applicant or the applicant's duly authorized agent, have read and understand the contents of this submittal. The information contained, including attached exhibits, is complete and true/correct, to the best of my knowledge. This request conforms to the requirements of Section 1135.08.

Site visits to the property may be necessary by City representatives. The Owner/Applicant hereby authorizes representatives to visit and/or photograph the property described in this application.

Signature of Applicant [Signature] Date 10-16-10

Signature of Owner [Signature] Date 10-16-10

FOR OFFICE USE ONLY		
DATE RECEIVED	PAYMENT RECEIVED/AMOUNT	CHECK NUMBER
RECEIVED BY	DATE SCHEDULED FOR PLANNING COMMISSION	
PROJECT ID #	PLANNING COMMISSION ACTION APPROVED _____ DISAPPROVED _____	