



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 6/1/2011

PROJECT INFORMATION		
BUSINESS NAME <u>DACT Automotive</u>		
BUSINESS ADDRESS <u>4419-4429 Broadway Grove City, OH 43123</u>		
PARCEL TAX ID #		
EXISTING ZONING		
PROPERTY OWNER(S) <u>LWB Investments LLC</u>		
MAILING ADDRESS <u>2578 Coral Ridge Ave Grove City, OH 43123</u>		
DAYTIME TELEPHONE (614) <u>374-3579</u>	FAX NUMBER ()	E-MAIL

APPLICANT/AGENT		
NAME OF APPLICANT <u>Scott Beavers</u>		
MAILING ADDRESS <u>2578 Coral Ridge Ave Grove City, OH 43123</u>		
DAYTIME TELEPHONE (614) <u>374-3579</u>	FAX NUMBER ()	E-MAIL
DESIGNATED CONTACT PERSON <u>Scott Beavers</u>	DAYTIME TELEPHONE <u>614 374-3579</u>	

I, Scott Beavers, 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 Scott Beavers Date 6/1/2011
 Signature of Owner Scott Beavers Date 6/1/2011

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 _____	