



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

RECEIVED
 APR 30 2014
 SPECIAL USE PERMIT
 APPLICATION COMMISSION
 FEE \$100.00

Date Submitted _____

PROJECT INFORMATION		
BUSINESS NAME 24-7 reptiles		
BUSINESS ADDRESS 4302 Broadway, grovecity, Ohio 43123		
PARCEL TAX ID # 040-001206		
EXISTING ZONING C-1		
PROPERTY OWNER(S) Jimmy L. Sigman		
MAILING ADDRESS 3812 Wynridge Ct. Grove City, OH 43123		
DAYTIME TELEPHONE (614) 871-2452	FAX NUMBER ()	E-MAIL

APPLICANT/AGENT		
NAME OF APPLICANT Christopher brodbeck		
MAILING ADDRESS 5106 harbor Blvd, Columbus, OH 43232		
DAYTIME TELEPHONE (614) 707 3750	FAX NUMBER ()	E-MAIL reptiles24-7@hotmail.com
DESIGNATED CONTACT PERSON	DAYTIME TELEPHONE ()	

I, Chris Brodbeck, 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 4/30/2014
 Signature of Owner [Signature] Date 4/30/2014

FOR OFFICE USE ONLY		
DATE RECEIVED 4/30/14	PAYMENT RECEIVED/AMOUNT 100-	CHECK NUMBER Cash
RECEIVED BY MR	DATE SCHEDULED FOR PLANNING COMMISSION 6/3/14	
PROJECT ID # 201404300021	PLANNING COMMISSION ACTION APPROVED _____ DISAPPROVED _____	