



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

RECEIVED
 DEC 29 2014
 GC PLANNING COMMISSION

**DEVELOPMENT PLAN
 APPLICATION
 FEE \$300.00**

Date Submitted _____

PROJECT INFORMATION		
PROJECT NAME The Courtyards on Hoover		
PROPERTY LOCATION/ADDRESS 4883, 4895 Hoover Road		
PARCEL TAX ID # 040-0021-8-00, 040-004955-00		
EXISTING ZONING R-1	PROPOSED ZONING PUD-R	
PROPERTY OWNER(S) Emery and Carolyn Pestel		
MAILING ADDRESS 4883 Hoover Road, Grove City, OH 43213		
DAYTIME TELEPHONE () 614 377-8549	FAX NUMBER ()	E-MAIL chris4sold@icloud.com

APPLICANT/AGENT		
NAME OF APPLICANT Epcn Communities, Inc.		
MAILING ADDRESS 500 Stonehenge Parkway, Dublin, OH 43017		
DAYTIME TELEPHONE () 614 761-1010	FAX NUMBER () 614 761-11	E-MAIL jrhoades@epconcommunities.com
DESIGNATED CONTACT PERSON Joel Rhoades	DAYTIME TELEPHONE () 614 761-1010	

I, Joel Rhoades, 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. A completed checklist and required checklist items accompanies this application.

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 Joel Rhoades, Vice Pres. Date 12-1-14

Signature of Owner _____ Date _____

FOR OFFICE USE ONLY			
DATE RECEIVED 12/29/14	PAYMENT RECEIVED/AMOUNT \$300	RECEIVED BY KS	CHECK # 102459
DATE SCHEDULED FOR PC 2/3/15	APPROVED PLAN ATTACHED YES NO	TEXT INCLUDED YES NO	
PROJECT ID # 2014122900 76	PLANNING COMMISSION ACTION APPROVED DISAPPROVED		



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MAILING ADDRESS			500 Stonehenge Parkway, Dublin, OH 43017		
DAYTIME TELEPHONE ()	614 761-1010		FAX NUMBER ()	614 761-11	E-MAIL jrhoades@epconcommunities.com
DESIGNATED CONTACT PERSON		Joel Rhoades	DAYTIME TELEPHONE ()		614 761-1010

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Signature of Applicant	<i>Joel Rhoades, Vice Pres.</i>	Date	
Signature of Owner	<i>Carolyn K. Pestel</i>	Date	11-29-14
	<i>Emery F. Pestel</i>	Date	11-29-14

DATE RECEIVED	PAYMENT RECEIVED/AMOUNT	RECEIVED BY	CHECK #
DATE SCHEDULED FOR PC	APPROVED PLAN ATTACHED YES NO	TEXT INCLUDED YES NO	
PROJECT ID #	PLANNING COMMISSION ACTION APPROVED DISAPPROVED		