



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

RECEIVED
 JUL 17 2015
 GC PLANNING COMMISSION

**LOT SPLIT
 APPLICATION
 FEE \$50.00**

Date Submitted _____

PROJECT INFORMATION		
PROJECT NAME <u>Lot Split</u>		
PROPERTY LOCATION <u>4807 Nicholas Point DR Grove City Ohio</u>		
PARCEL TAX ID # <u>040-013833-00</u>		
EXISTING ZONING <u>Vacant Platted Residential Land</u>		
PROPERTY OWNER ('S) <u>Shakira Bouy</u>		
MAILING ADDRESS <u>4795 Nicholas Point DR. Grove City Ohio</u>		
DAYTIME TELEPHONE (215) 313-7183	FAX NUMBER ()	E-MAIL <u>shakirabouy@gmail.com</u>

APPLICANT/AGENT		
NAME OF APPLICANT <u>SHAKIRA BOUY</u>		
MAILING ADDRESS <u>4795 Nicholas Point DR Grove City Ohio</u>		
DAYTIME TELEPHONE (219) 313-7183	FAX NUMBER ()	E-MAIL <u>shakirabouy@gmail.com</u>
DESIGNATED CONTACT PERSON <u>SHAKIRA BOUY</u>	DAYTIME TELEPHONE <u>(215) 313-7183</u>	

I, Shakira Bouy, 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 Shakira Bouy Date 7/16/15

Signature of Owner Shakira Bouy Date 7/16/15

FOR OFFICE USE ONLY		
DATE RECEIVED <u>07/17/15</u>	PAYMENT RECEIVED/AMOUNT <u>\$50.00</u>	CHECK NUMBER
RECEIVED BY <u>KS</u>	DATE SCHEDULED FOR PLANNING COMMISSION	
PROJECT ID # <u>201507170052</u>	PLANNING COMMISSION ACTION APPROVED _____ DISAPPROVED _____	