



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

**RECEIVED**  
 AUG 31 2015  
 GC PLANNING COMMISSION

**DEVELOPMENT PLAN  
 APPLICATION  
 FEE \$300.00**

Date Submitted \_\_\_\_\_

PROJECT INFORMATION		
PROJECT NAME <u>Lamplighter Senior Village II</u>		
PROPERTY LOCATION/ADDRESS <u>End of Lamplighter Dr. North of White Rd</u>		
PARCEL TAX ID # <u>040-012669-00</u>		
EXISTING ZONING <u>PUD - R</u>	PROPOSED ZONING <u>PUD - R</u>	
PROPERTY OWNER(S) <u>Morbitzer Elizabeth TTR</u>		
MAILING ADDRESS <u>1237 White Rd Grove City OH 43123</u>		
DAYTIME TELEPHONE ( ) <u>614-875-4304</u>	FAX NUMBER ( ) _____	E-MAIL _____

APPLICANT/AGENT		
NAME OF APPLICANT <u>Lamplighter Senior Housing II, LLC</u>		
MAILING ADDRESS <u>184 W. Main St Ashville OH 43103</u>		
DAYTIME TELEPHONE ( ) <u>740-983-4566</u>	FAX NUMBER ( ) <u>740-983-2932</u>	E-MAIL <u>tvalentine@lwassociates.net</u>
DESIGNATED CONTACT PERSON <u>Todd D. Valentine</u>		DAYTIME TELEPHONE ( ) <u>614-989-8414</u>

I, Todd D. Valentine, 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 Todd D. Valentine Date 8/25/15

Signature of Owner Elizabeth Morbitzer Date 8-27-15

FOR OFFICE USE ONLY			
DATE RECEIVED <u>8/31/15</u>	PAYMENT RECEIVED/AMOUNT <u>\$ 300.00</u>	RECEIVED BY <u>TP</u>	CHECK # _____
DATE SCHEDULED FOR PC <u>10/6/15</u>	APPROVED PLAN ATTACHED YES NO	TEXT INCLUDED YES NO	
PROJECT ID # <u>201508310058</u>		PLANNING COMMISSION ACTION APPROVED DISAPPROVED	