



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

RECEIVED
 NOV 02 2015
GC PLANNING COMMISSION

METHOD OF ZONING CHANGE
REVERSION OF ZONING CLASSIFICATION
APPLICATION
FEE \$100.00

Date Submitted 11.2.2015

PROJECT INFORMATION		
PROJECT NAME <u>Home Road</u>		
PROPERTY LOCATION/ADDRESS <u>000 Home Road</u>		
PARCEL TAX ID # <u>040-008688</u>		
EXISTING ZONING <u>R-1</u>	PROPOSED ZONING <u>IND-1</u>	
PROPERTY OWNER(S) <u>Charles P. Gilbert Tr.</u>		
MAILING ADDRESS <u>3907 Carolyn Ave, Fairfax VA 22031</u>		
DAYTIME TELEPHONE <u>(614) 532-1596</u>	FAX NUMBER <u>()</u>	E-MAIL <u></u>

APPLICANT/AGENT		
NAME OF APPLICANT <u>Kirk Williams Company</u>		
MAILING ADDRESS <u>c/o Laura Macgregor Comek, 884</u>		
<u>300 E Broad St. 450 Columbus, Ohio 43215</u>		
DAYTIME TELEPHONE <u>(614) 560-1488</u>	FAX NUMBER <u>()</u>	E-MAIL <u>laura@comeklaw.com</u>
DESIGNATED CONTACT PERSON <u>Laura Macgregor Comek</u>		DAYTIME TELEPHONE <u>(614) 560 1488</u>

I, Laura Macgregor Comek, 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 by [Signature] Date 11.1.15

Signature of Owner by [Signature] Date 11.1.15

FOR OFFICE USE ONLY			
DATE RECEIVED <u>11/2/15</u>	PAYMENT RECEIVED/AMOUNT <u>\$100.00</u>	RECEIVED BY <u>mk</u>	CHECK # <u>122721</u>
DATE SCHEDULED FOR PC <u>12/8/15</u>	PUD FINDING MET YES ___ NO ___	APPROVED PLAN ATTACHED YES ___ NO ___	TEXT INCLUDED YES ___ NO ___
PROJECT ID # <u>201511020082</u>		PLANNING COMMISSION ACTION APPROVED ___ DISAPPROVED ___	

**PETITION TO CHANGE THE ZONING MAP OF THE
CITY OF GROVE CITY**

Per Section 1139.01, "Applications or petitions for change or amendment to existing districts in the City shall be made to the office of the Planning Commission and shall be accompanied with a fee of \$100.00, payable to the City of Grove City and shall be deposited in the General Fund. This fee is for the purpose of defraying the costs of preparing the necessary plats, maps, data, legislation and notices and all official publications required by the City and shall not be refundable even though the application is disapproved by the Planning Commission or Council. Applications under Sections 1135.01 to 1135.05 are included herein". (Ordinance C-49-01, Passed 8-6-01.)

We, the undersigned, hereby request the rezoning of the following described property and petition for changing the Zoning map:

LOCATION OF PROPERTY 000 Home Road
Parcel 040-008688

EXISTING ZONING RI **PROPOSED ZONING** IND 1

PETITIONER NAME (PLEASE PRINT) The Kirk Williams Company

PETITIONER'S SIGNATURE by: [Signature]

OWNER NAME (PLEASE PRINT) Charles P. Gilbert, Jr.

OWNER SIGNATURE by: [Signature]

DATE 11-1-15

METHOD OF ZONING CHANGE;
REVISION OF ZONING CLASSIFICATION
APPLICATION CHECKLIST

Per Section 1139.03 (a), "All requests for modifications of the use districts as established by the Zoning Code shall be submitted to the Planning Commission upon such forms as provided by the Planning Commission for that purpose and pursuant to such rules and regulations as shall be established by the Planning Commission. The Commission may, upon its own motion, recommend to Council changes in the use districts herein established. An applicant requesting a change in the use districts herein established shall file together with the request as hereandbefore described an affidavit with the Planning Commission. The Commission after hearing and consideration of such request shall forward its findings and recommendations to Council and provide a copy thereof to the applicant and other interested parties who shall request the same". (Ordinance C-49-01, Passed 8-6-01.)

The following checklist items are required to process a Zoning Request:

- N/A 1. For a Planned Unit Development (PUD) Rezoning Request, a copy of the letter from the Clerk of Council indicating City Council's approval or disapproval of the Preliminary Development Plan.
- / 2. A meets and bounds legal description for the area to be rezoned.
- / 3. A map (no larger than 11 x 17) outlining the said parcel or parcels to be rezoned.
- / 4. Listing of names and mailing addresses of all persons, corporations and entities contiguous to and across the street from the proposed zoning change.
- 5. Signature of Property Owner of Record *In Contract for Zoning*

Please be aware that no changes or alterations in applications shall be permitted, once processing has started. However, an application may be withdrawn upon written request from the petitioner, but in all such instances, the petitioners will forfeit the filing fee.

PETITIONER NAME (PLEASE PRINT)	<u>The Kirk Williams Co.</u>
PETITIONER'S SIGNATURE	<u>by. <i>[Signature]</i></u>
OWNER NAME (PLEASE PRINT)	<u>Charles P. Gilbert, Tr.</u>
OWNER SIGNATURE	<u>by. <i>[Signature]</i></u>
DATE	<u>11.1.15</u>