



PROJECT ID# _____

Grove City Planning Commission PRELIMINARY DEVELOPMENT PLAN APPLICATION

Please provide the requested information and submit to:

DEVELOPMENT DEPARTMENT
4035 BROADWAY
GROVE CITY, OHIO 43123
614-277-3004

grovecityohio.gov/development

PROJECT / PROPERTY INFORMATION

PROJECT NAME: The Residences at Brown's Farm/ The Cottages at Brown's Farm

PROJECT LOCATION: 5273 Haughn Road
STREET ADDRESS (OR NEAREST INTERSECTION WITH DISTANCE AND DIRECTION)

PARCEL ID NUMBER: 160-00184 ACREAGE AFFECTED BY THIS APPLICATION: 68.545 acres

EXISTING ZONING: Rural Development EXISTING LAND USE: Agricultural

PROPOSED ZONING: PIID-R PROPOSED LAND USE: Senior targeted condos & apartments

PROPERTY OWNER INFORMATION

Note: Property ownership information is to reflect how the property is held in accordance with the Franklin County Auditor's Office.

Joseph and Marcia Brown, 5801 Bethel Ave. #187, Munice, IN 47304
Name Address City, State, Zip
614-875-4895 (Kacie Waugh- attorney for Browns)
Phone Fax Email

APPLICANT INFORMATION

Note: The applicant is the person(s) or entity seeking approval of this application.

Jonathan Wilcox Partner Wilcox Communities
Name Title Company / Organization
250 W. Old Wilson Bridge Rd., #140, Columbus, OH 43085
Address City State, Zip
614-340-1050 jonathan@wilcoxcommunities.com
Phone Fax Email

AUTHORIZED REPRESENTATIVE Check box if same as Applicant

Note: The authorized representative is the person(s) or entity representing the applicant. As the authorized representative you have the proper authority to speak, represent and make commitments on behalf of the applicant. The City does not take any responsibility for the lack of communication between the authorized representative, applicant or related parties.

Jackson B. Reynolds III Attorney Smith & Hale LLC
Name Title Company / Organization
37 W. Broad St., #460, Columbus, OH 43215
Address City State, Zip
614-221-4255 614-221-4409 Jreynolds@smithandhale.com
Phone Fax Email

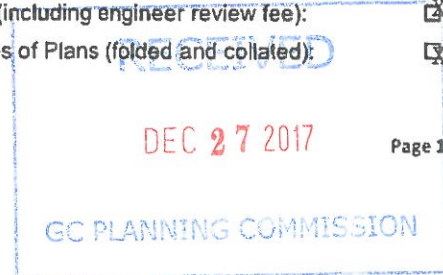
Attorney
Relationship to the Applicant: (e.g. legal counsel, engineer, architect, land planner, contractor, etc.)

SUBMITTAL REQUIREMENTS

Instructions: All blanks/boxes must be completed or checked in order for the application submittal to be considered complete. The Engineering Review Fee is calculated in accordance with the City's Fee Recovery Policy. The submittal shall include the required number of copies (properly folded and collated) and contain all required supplementary documentation. Submitted materials shall be accurate, measurable and shall address all required checklist items contained within the attached supplemental requirements.

	Fee Calculation
Application Fee:	\$ 150.00
Engineering Review Fee:	+ \$ 1557.52
Total Submittal Fee:	= \$ 1607.52

Submittal Items	(check box)
Completed Application (signed and notarized):	<input checked="" type="checkbox"/>
Submittal Fee (including engineer review fee):	<input checked="" type="checkbox"/>
Ten (10) Copies of Plans (folded and collated):	<input checked="" type="checkbox"/>



PROPERTY OWNER AUTHORIZATION OF APPLICANT SUBMITTAL AND SITE VISIT(S)

I, Joseph D. Brown, the current property owner hereby authorize the applicant Wilcox Communities to submit this application. I agree to be bound by all representations and agreements made by the applicant and/or their authorized representative.

Additionally, as the current property owner, knowing that site visits to the property may be necessary, I hereby authorize City representatives to visit and/or photograph the property described in this application.

Signature of Current Property Owner: [Signature] Date: 12/22/17

STATE OF OHIO, COUNTY OF FRANKLIN

The above individual(s), being first duly sworn, deposes on oath and says that he/she has read the foregoing affidavit subscribed by him/her, knows the contents thereof, and that the statements therein are true.

SUBSCRIBED AND SWORN TO before me this 22 day of December, 2017
Catherine E. Jones
 Official Seal and Signature of Notary Public
CATHERINE E. JONES, NOTARY PUBLIC
 Resident of Delaware County, Indiana
 My Commission Expires 9/9/2024

Applicant's / Authorized Representative's Affidavit

I, Jackson B. Reynolds III, the applicant or authorized representative, have read and understand the contents of this application. The information contained in this application, attached exhibits and other information submitted is complete and in all respects true and correct, to the best of my knowledge and belief.

Signature of Applicant or Authorized Representative: _____ Date: _____

STATE OF OHIO, COUNTY OF FRANKLIN

The above individual(s), being first duly sworn, deposes on oath and says that he/she has read the foregoing affidavit subscribed by him/her, knows the contents thereof, and that the statements therein are true.

SUBSCRIBED AND SWORN TO before me this _____ day of _____, 20____.

 Official Seal and Signature of Notary Public

FOR OFFICE USE ONLY		
DATE RECEIVED:	RECEIVED BY:	PAYMENT AMOUNT:
TENTATIVE PC MEETING DATE:	PC RECOMMENDATION	CHECK NUMBER:
PROJECT ID NUMBER:	CITY'S REVIEW ENGINEER:	