



**Grove City Planning Commission  
LOT SPLIT APPLICATION**

RECEIVED

MAY 25 2018

GC PLANNING COMMISSION  
grovecityohio.gov/development

Please provide the requested information and submit to:

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

**PROJECT / PROPERTY INFORMATION**

PROJECT NAME: Pinnacle 402/403 Lot Split - Combine  
 PROJECT LOCATION: 4804 Bell Classic Drive  
STREET ADDRESS (OR NEAREST INTERSECTION WITH DISTANCE AND DIRECTION)  
 PARCEL ID NUMBER: 040-013717-00 ACREAGE AFFECTED BY THIS APPLICATION: .084  
 EXISTING ZONING: R EXISTING LAND USE: Vacant Platted Res Land  
 PROPOSED ZONING: R PROPOSED LAND USE: Vacant Platted Res Land

**PROPERTY OWNER INFORMATION**

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

Pinnacle Land Holdings 1500 Pinnacle Club Drive 43123  
 Name Address City, State, Zip  
614-207-7607 Phone Fax  
CIMINELLO5@AOL.COM Email

**APPLICANT INFORMATION**

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

SAME  
 Name Title Company / Organization  
 Address City State, Zip  
 Phone Fax Email

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 and related parties.

**AUTHORIZED REPRESENTATIVE**

Check box if same as Applicant

ANTHONY JOSEPH CIMINELLO PROJECT MANAGER Ciminello's Inc.  
 Name Title Company / Organization  
567 Lazell Road Westerville OH 43081  
 Address City State, Zip  
614-778-7743 Phone Fax  
Anthony Ciminello@gmail.com Email

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 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	Submittal Items	(check box)
Application Fee:	\$ 50.00	Completed Application (signed and notarized):	<input type="checkbox"/>
		Submittal Fee:	<input type="checkbox"/>
		Ten (10) copies of plans (folded and collated):	<input type="checkbox"/>

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

I JOSEPH A CIMINELLO, the current property owner hereby authorize the applicant ANTHONY CIMINELLO 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: 5/22/18

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

**APPLICANT'S / AUTHORIZED REPRESENTATIVE'S AFFIDAVIT**

I ANTHONY CIMINELLO, 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: [Signature] Date: 5/23/18

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 25th day of May, 2018.

[Signature]  
Official Seal and Signature of Notary Public



**MOLLY FRASHER**  
Notary Public, State of Ohio  
My Commission Expires 02-05-2022

FOR OFFICE USE ONLY		
DATE RECEIVED:	RECEIVED BY:	FEES/PAYMENT AMOUNT:
TENTATIVE PC MEETING DATE:	PC RECOMMENDATION:	CHECK NUMBER:
PROJECT ID NUMBER:		