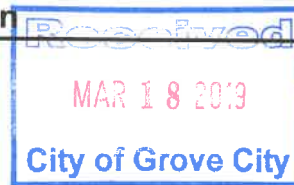




Grove City Planning Commission

LOT SPLIT 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/Cottages at Brown's Farm

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

PARCEL ID NUMBER: 040-016049/016050 ACREAGE AFFECTED BY THIS APPLICATION: 69± acres

EXISTING ZONING: PUD-R EXISTING LAND USE: Farm Land

PROPOSED ZONING: PUD-R PROPOSED LAND USE: Condominium/Apartment Development

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 & Marcia Brown 5801 W. Bethel Ave. #187 Muncie, IN 47304

Name Address City, State, Zip

(614) 875-4895 (Kacie Waugh - attorney for the Browns)

Phone Fax Email

APPLICANT INFORMATION

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

Jonathan Wilcox Wilcox Communities

Name Title Company / Organization

250 W. Old Wilson Bridge Rd., Suite 140 Worthington, OH 43085

Address City State, Zip

(614) 340-1050 jonathan@wilcoxcommunities.com

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

Jackson B. Reynolds, III Attorney Smith & Hale LLC

Name Title Company / Organization

37 W. Broad Street, Suite 460, Columbus, OH 43215

Address City State, Zip

(614) 221-4255 (614) 221-4409 jreynolds@smithandhale.com

Phone Fax Email

Legal Counsel

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, Kacie Waugh on behalf of the owners, 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: *Kacie Waugh* Date: 3-18-19

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 18th day of March

Diane E. Hickman
Official Seal and Signature of Notary Public



Diane E. Hickman
Notary Public, State of Ohio
My Commission Expires 04-22-2022

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: <u>03/18/19</u>	RECEIVED BY: <u>mh</u>	PAYMENT AMOUNT: <u>\$50.00</u>
TENTATIVE PC MEETING DATE: <u>03/20/19</u>	PC RECOMMENDATION	CHECK NUMBER: <u>11995</u>
PROJECT ID NUMBER: <u>201903180014</u>		

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

I Kacie Waugh on behalf of the owners, 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: _____ 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

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: Jackson B. Reynolds III Date: 3/18/19

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 18th day of March, 2019.

Natalie C. Timmons
Official Seal and Signature of Notary Public



Natalie C. Timmons
Notary Public, State of Ohio
My Commission Expires 09-04-2020

FOR OFFICE USE ONLY		
DATE RECEIVED: <u>03-18-19</u>	RECEIVED BY: <u>mk</u>	PAYMENT AMOUNT: <u>\$50.00</u>
TENTATIVE PC MEETING DATE: <u>03-20-19</u>	PC RECOMMENDATION:	CHECK NUMBER: <u>11995</u>
PROJECT ID NUMBER: <u>201903180014</u>		

**THE CITY OF GROVE CITY
SUBMITTAL REQUIREMENTS: LOT SPLIT**



PLEASE SUBMIT THE FOLLOWING FOR INITIAL STAFF REVIEW: All plans shall be stapled, folded and properly collated. In addition, staff may later request plans that incorporate review comments.

- One (1) original, signed application and nine (9) copies
- Appropriate fee (\$50)
- Ten (10) copies of the project narrative describing the nature of the project
- One (1) electronic copy of all application materials submitted on CD or DVD – all electronic data shall be compatible with Adobe Reader 5.0 or later
- Ten (10) copies of a metes and bounds legal description of the property
- Nine (9) copies (maximum sheet size 24 x 36) and one (1) copy (8½ x 14) of the survey drawing of the property
- If applicable, ten (10) copies of the proposed Development Standards Text
- Please note the following:** Twenty (20) additional copies of revised submittals, properly folded and collated, are required for the Planning Commission hearing

For additional information, contact the Grove City Development Department at 614-277-3004 or visit our website at www.grovecityohio.gov/development.