Sample Architectural Review Board Application

Page 1

CITY OF DUBLIN.

Land Use and Long Range Planning
5800 Shier-Rings Road
Dublin, Ohio 43016-1236

Phone/ TDD: 614-410-4600
Fax: 614-410-4747
Web Site: www.dublin.oh.us

ARCHITECTURAL REVIEW BOARD APPLICATION
(Code Sections 153.170-153.187)

TO EXPIRE _____

NOTE: **Applicants are highly encouraged to contact Land Use and Long Range Planning for assistance and to discuss the ARB review process prior to submitting a formal application. Any ordinary maintenance that does not involve a change in building material color, texture, design or arrangement (such as repainting a house the same color or repairing siding with like materials and style) does not require ARB approval.**

FOR OFFICE USE ONLY:			
Amount Received: NO FEE REQUIRED	Application No:	ARB Date(s):	ARB Action:
Receipt No: NO FEE REQUIRED	MIS Fee No: NO FEE REQUIRED	Date Received:	Received By:
Type of Request:			

N. S. E. W (Circle) Side of:		
Distance from Nearest Intersection:	FEET,	N. S. E. W (Circle) from Nearest Intersection
Nearest Intersection:	AND	

I. PROPERTY INFORMATION: ***This section must be completed.***

Property Address:	
Tax ID/Parcel Number:	Parcel Size: (Acres)

II. PROPOSED EXTERIOR SITE ALTERATIONS: ***Please check all that apply.***

- ☐ New Construction
- ☐ Building Addition
- ☐ Demolition
- ☐ Signage and Lighting
- ☐ Re-painting
- ☐ Landscaping (Non-Residential)
- ☐ Re-siding
- ☐ Roof, Door or Window Replacements or Additions
- ☐ Gutter and Downspout Replacements or Additions
- ☐ External Mechanical Equipment (AC units, vents, HVAC, etc.)
- ☐ Parking, Paving and other Hard Surfaces
- ☐ Other (please list) _____

Architectural Review Board Application Page 1 of 4 Revised 01-07-05

Page 2

III. **DESCRIBE IN DETAIL ALL PROPOSED SITE ALTERATIONS CHECKED IN SECTION II:**

Please attach additional sheets if necessary:

IV. **EXPLAIN HOW THE PROPOSED ARCHITECTURAL OR SITE ALTERATIONS MEET THE DESIGN RECOMMENDATIONS OF *THE OLD DUBLIN DESIGN GUIDELINES* AND OTHER APPLICABLE CODE REQUIREMENTS:**

Please attach additional sheets if necessary:

Page 3

V. PLEASE SUBMIT THE FOLLOWING: ***Please submit all plans in large (24x36) and small (11x17) format.***

- ☐ **ONE (1) ORIGINAL SIGNED AND NOTARIZED APPLICATION AND SEVEN (7) COPIES** with agent authorization completed and notarized
- ☐ **EIGHT (8) COPIES OF A LEGAL DESCRIPTION OF THE PROPERTY** that consists of _____ pages
- ☐ **EIGHT (8) COPIES OF A TAX PARCEL ID MAP** indicating surrounding property owners and parcel numbers for all parcels within 300 feet of the site.
- ☐ **EIGHT (8) COPIES OF A SCALED, SITE/STAKING PLAN SHOWING:**
  - a. North arrow and bar scale.
  - b. Location, size and dimensions of all existing and proposed conditions and structures (significant natural features, landscaping, structures, additions, decks, access ways, parking).
  - c. Property lines and dimensions of the lot.
  - d. Size of the site in acres/square feet.
  - e. All setbacks, street centerlines, rights-of-way, easements, and other information related to the site.
  - f. Location, number, length, width and surface of all existing and proposed parking spaces.
  - g. Use of land and location of structures on adjacent properties.
- ☐ **EIGHT (8) COPIES OF THE FOLLOWING SCALED PLANS (IF APPLICABLE):**
  - a. Grading Plan.
  - b. Landscaping Plan.
  - c. Lighting Plan.
  - d. Utility and/or Stormwater Plan.
  - e. Tree Survey, Tree Preservation and Tree Replacement Plans.
- ☐ **EIGHT (8) COPIES OF SCALED, ARCHITECTURAL ELEVATIONS (IF APPLICABLE)** with proposed colors and materials noted.
- ☐ **FOR SIGNS, EIGHT (8) COPIES OF SCALED DRAWINGS INDICATING:**
  - a. Location of signs and sign type (wall, ground, projecting, or window).
  - b. Sign dimensions, including letter sizes and proposed distance from sign to grade.
  - c. Copy layout and lettering styles (fonts) of signage.
  - d. Materials and manufacturer to be used in fabrication.
  - e. Total area of sign face (including frame).
  - f. Type of illumination.
- ☐ **MATERIAL/COLOR SAMPLES** (swatches, photos, plans, or product specifications). Include manufacturer name and number.

VI. CONTIGUOUS PROPERTY OWNERS: ***Please attach additional sheets if necessary.***

It is the policy of the City of Dublin to notify surrounding property owners of pending applications under public review. List all neighboring property owners within 150 feet of the perimeter of the property. Information must be in accordance with the County Auditor's current tax list. Electronic copies of lists are encouraged.

PROPERTY OWNER (*not Mortgage Company or Tax Service*)	MAILING ADDRESS	CITY/STATE/ZIP CODE

VII. PROPERTY OWNER: ***This section must be completed.***

Current Property Owner:	
Mailing Address: (Street, City, State, Zip Code)	
Daytime Telephone:	Fax:
Email or Alternate Contact Information:	

Page 4

VIII. REPRESENTATIVE(S) OF OWNER: ***Please complete if applicable. Attach additional sheets for multiple representatives.***

Representative: (Tenant, Architect, Designer, Contractor, etc.)	
Mailing Address: (Street, City, State, Zip Code)	
Daytime Telephone:	Fax:
Email or Alternate Contact Information:	
Who is the PRIMARY CONTACT PERSON for this application?	

IX. AUTHORIZATION TO VISIT THE PROPERTY: Site visits to the property by City representatives are essential to process this application. The Owner, as notarized below, hereby authorizes City representatives to visit, photograph and post a notice on the property described in this application.

X. AUTHORIZATION FOR OWNER'S REPRESENTATIVE(S): ***Please complete if applicable. This section must be notarized.***

I _____, the owner, hereby authorize _____ to act as my representative(s) in all matters pertaining to the processing and approval of this application, including modifying the project. I agree to be bound by all representations and agreements made by the designated representative.

Signature of Current Property Owner:	**Date:**

Subscribed and sworn to before me this _____ day of _____, 20 _____

State of _____

County of _____ Notary Public

XI. APPLICANT'S AFFIDAVIT: ***This section must be completed and notarized.***

I _____, the owner 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 Owner or Authorized Representative:	**Date:**

Subscribed and sworn to before me this _____ day of _____, 20 _____

State of _____

County of _____ Notary Public

NOTE: FAX CONFIRMATION WILL FOLLOW THE SUBMISSION OF THIS APPLICATION