

PLANNING AND ZONING COMMISSION APPLICATION

(Code Section 153.232)



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

I. PLEASE CHECK THE TYPE OF APPLICATION:

| | |
|--|---|
| <input type="checkbox"/> Informal Review | <input type="checkbox"/> Final Plat (Section 152.065) |
| <input type="checkbox"/> Concept Plan (Section 153.056(A)(1)) | <input type="checkbox"/> Conditional Use (Section 153.236) |
| <input type="checkbox"/> Preliminary Development Plan / Rezoning (Section 153.053) | <input type="checkbox"/> Corridor Development District (CDD) (Section 153.115) |
| <input checked="" type="checkbox"/> Final Development Plan (Section 153.053(E)) | <input type="checkbox"/> Corridor Development District (CDD) Sign (Section 153.115) |
| <input type="checkbox"/> Amended Final Development Plan (Section 153.053(E)) | <input type="checkbox"/> Minor Subdivision |
| <input type="checkbox"/> Standard District Rezoning (Section 153.018) | <input type="checkbox"/> Right-of-Way Encroachment |
| <input type="checkbox"/> Preliminary Plat (Section 152.016) | <input type="checkbox"/> Other (Please Specify): _____ |

Please utilize the applicable *Supplemental Application Requirements* sheet for additional submittal requirements that will need to accompany this application form.

II. PROPERTY INFORMATION: This section must be completed.

| | |
|---|--|
| Property Address(es): 6470 Post Road | |
| Tax ID/Parcel Number(s): 273-003959 | Parcel Size(s) (Acres): 5.33 Acres |
| Existing Land Use/Development: Vacant | |

IF APPLICABLE, PLEASE COMPLETE THE FOLLOWING:

| |
|--|
| Proposed Land Use/Development: 80 Unit Assisted Living and Memory Care Facility |
| Total acres affected by application: 2.02 Acres |

III. CURRENT PROPERTY OWNER(S): Please attach additional sheets if needed.

| | |
|--|--------------------------|
| Name (Individual or Organization): Dublin Senior Community LSP, LLC | |
| Mailing Address: 1516 S. Boston, Ste. 301 (Street, City, State, Zip Code) Tulsa, OK. 74119 | |
| Daytime Telephone: 918-592-4400 | Fax: 918-584-1294 |
| Email or Alternate Contact Information: | |

IV. APPLICANT(S): This is the person(s) who is submitting the application if different than the property owner(s) listed in part III. Please complete if applicable.

| | | |
|--|-------------------|---|
| Name: Michael L. Bettinger, P.S. | | Applicant is also property owner: yes <input type="checkbox"/> no <input checked="" type="checkbox"/> |
| Organization (Owner, Developer, Contractor, etc.): Design Services Company, Engineer | | |
| Mailing Address: (Street, City, State, Zip Code) 1716 Perrysburg-Holland Road, Holland, Ohio 43528 | | |
| Daytime Telephone: 419-865-8600 | Fax: 419-866-8835 | |
| Email or Alternate Contact Information: mbettinger@douglascompany.com | | |

V. REPRESENTATIVE(S) OF APPLICANT / PROPERTY OWNER: This is the person(s) who is submitting the application on behalf of the applicant listed in part IV or property owner listed in part III. Please complete if applicable.

| | |
|--|------|
| Name: Same as IV | |
| Organization (Owner, Developer, Contractor, etc.): | |
| Mailing Address: (Street, City, State, Zip Code) | |
| Daytime Telephone: | Fax: |
| Email or Alternate Contact Information: | |

VI. AUTHORIZATION FOR OWNER'S APPLICANT or REPRESENTATIVE(S): If the applicant is not the property owner, this section must be completed and notarized.

| | |
|---|---------------------|
| I, <u>John Domblaser, Senior Vice-President</u> , the owner, hereby authorize <u>Michael L. Bettinger</u> to act as my applicant or 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: <u>[Signature]</u> | Date: <u>5/2/13</u> |

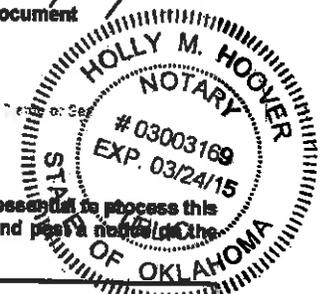
Check this box if the Authorization for Owner's Applicant or Representative(s) is attached as a separate document

Subscribed and sworn before me this 2nd day of May, 20 2013

State of Oklahoma

County of Tulsa

Notary Public Holly M Hoover



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

| | |
|--|---------------------|
| I, <u>Michael L. Bettinger</u> , the owner or authorized representative, hereby authorize City representatives to visit, photograph and post a notice on the property described in this application. | |
| Signature of applicant or authorized representative: <u>[Signature]</u> | Date: <u>5-8-13</u> |

VIII. UTILITY DISCLAIMER: The Owner/Applicant acknowledges the approval of this request for review by the Dublin Planning and Zoning Commission and/or Dublin City Council does not constitute a guarantee or binding commitment that the City of Dublin will be able to provide essential services such as water and sewer facilities when needed by said Owner/Applicant.

| | |
|---|---------------------|
| I, <u>Michael L. Bettinger</u> , the owner or authorized representative, acknowledge that approval of this request does not constitute a guarantee or binding commitment that the City of Dublin will be able to provide essential services such as water and sewer facilities when needed by said Owner/Applicant. | |
| Signature of applicant or authorized representative: <u>Michael L. Bettinger</u> | Date: <u>5-8-13</u> |

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

| | |
|--|---------------------|
| I, <u>Michael L. Bettinger</u> , 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 applicant or authorized representative: <u>Michael L. Bettinger</u> | Date: <u>5-8-13</u> |

Subscribed and sworn to before me this 8th day of May, 2013
 State of Ohio
 County of Lucas

Notary Public: Pamela M. Klatt
 PAMELA M. KLATT
 Notary Public - State of Ohio
 My Commission Expires February 3, 2018



| FOR OFFICE USE ONLY | | | |
|---|-----------------|--------------------------------|--------------|
| Amount Received: | Application No: | P&Z Date(s): | P&Z Action: |
| Receipt No: | Map Zone: | Date Received: | Received By: |
| City Council (First Reading): | | City Council (Second Reading): | |
| City Council Action: | | Ordinance Number: | |
| Type of Request: | | | |
| N, S, E, W (Circle) Side of: | | | |
| N, S, E, W (Circle) Side of Nearest Intersection: | | | |
| Distance from Nearest Intersection: | | | |
| Existing Zoning District: | | Requested Zoning District: | |

Senior Star Management Company
1516 S. Boston, Suite 301
Tulsa, OK 74119



Bank of Oklahoma N.A.
Tulsa, Oklahoma

2437

*** TWO THOUSAND EIGHT HUNDRED NINETY-FIVE AND XX / 100 DOLLARS

05/03/2013

\$2,895.00***

PAY TO THE
ORDER OF

CITY OF DUBLIN
LAND USE AND LONG RANGE PLANNING
5800 SHIER-RINGS RD
DUBLIN OH 43016

MEMO:

THIS DOCUMENT CONTAINS THE SIGNATURE OF THE PERSON WHO HAS THE RIGHT TO SIGN THIS CHECK

⑆002437⑆ ⑆103900035⑆ ⑆209920231⑆

DATE: 05/03/2013
PAYEE: CITY OF DUBLIN (dubct13)
5800 SHIER-RINGS RD
DUBLIN OH 43016

CK#: 2437

TOTAL: \$2,895.00***

BANK: smm-ope - Operating BOK 209920231

MEMO:

Invoice Date
05/02/2013

Invoice Number
LSP Zoning Fee

Amount
\$2,895.00
\$2,895.00