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

PLANNING AND ZONING COMMISSION APPLICATION

(Code Section 153.232)

I. PLEASE CHECK THE TYPE OF APPLICATION:

- ☐ Informal Review
- ☐ Concept Plan (Section 153.056(A)(1))
- ☑ Preliminary Development Plan / Rezoning (Section 153.053)
- ☐ Final Development Plan (Section 153.053(E))
- ☐ Amended Final Development Plan (Section 153.053(E))
- ☐ Standard District Rezoning (Section 153.018)
- ☐ Preliminary Plat (Section 152.015)
- ☐ Final Plat (Section 152.085)
- ☐ Conditional Use (Section 153.236)
- ☐ Corridor Development District (CDD) (Section 153.115)
- ☐ Corridor Development District (CDD) Sign (Section 153.115)
- ☐ Minor Subdivision
- ☐ Right-of-Way Encroachment
- ☐ 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): Discovery Blvd and Wall Street, Dublin, OH	
Tax ID/Parcel Number(s): 273-00180	**Parcel Size(s) (Acres):** 22.66
Existing Land Use/Development: Undeveloped land (~9.11 acres), Pond/ 11 Condos (~13.55 acres)	

IF APPLICABLE, PLEASE COMPLETE THE FOLLOWING:
Proposed Land Use/Development: Condo, Suburban Office, health care facility
Total acres affected by application: 9.11

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

Name (Individual or Organization): Coffman Partners, LLC	
Mailing Address: (Street, City, State, Zip Code) 330 W Spring Street Suite 200 Columbus, OH	
Daytime Telephone: 614 754 3000	**Fax:**
Email or Alternate Contact Information: ahackett@cranegroup.com	

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: Ganzhorn Real Estate Dublin, LLC	**Applicant is also property owner:** yes ☐ no ☑
Organization (Owner, Developer, Contractor, etc.): Developer/Buyer	
Mailing Address: (Street, City, State, Zip Code) 1322B Manning Parkway, Powell, OH 43065	
Daytime Telephone: 614 839 7828	**Fax:** 614 423 2956
Email or Alternate Contact Information: bakbar@ganzhorn.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:	
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 _____, the owner, hereby authorize _____ 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:	**Date:**

☑ 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 _____ day of _____, 20 _____

State of _____ Stamp or Seal

County of _____ Notary Public _____

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 Barmi Akbar ☒, 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: Barmi Akbar	**Date:** 6/24/13

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:	Applicant is also property owner: yes ☐ no ☐
Organization (Owner, Developer, Contractor, etc.):	
Mailing Address: (Street, City, State, Zip Code)	
Daytime Telephone:	Fax:
Email or Alternate Contact Information:	

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:	
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 Marsha Grigsby, Dublin City Manager, the owner, hereby authorize Michael Close / Tom Hart, Isaac Wiles Law Firm 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:	Date: 8/16/13

☐ 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 16th day of August, 2013

State of Ohio

County of Franklin

Notary Public

NOTARIAL SEAL STATE OF OHIO

JENNIFER L. DELGADO
NOTARY PUBLIC
STATE OF OHIO
Comm. Expires
January 02, 2018

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 _____, 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:	Date:

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 Barmi Akbar, 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:	Date: 6/24/13

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

I Barmi Akbar, 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:	Date: 6/24/13

Subscribed and sworn to before me this 24th day of June, 20 13

State of Ohio

County of Franklin

Notary Public Anna M. Dodge

Stamp or Seal

ANNA M. DODGE
NOTARY PUBLIC • STATE OF OHIO
Recorded in Franklin County
My commission expires Apr. 24, 2015

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:	

The Village at Coffman Park Condominium Association
4020 Venture Court
Columbus, Ohio 43228
614 / 777-9325

June 24, 2013

Dublin Planning Commission Members
Dublin City Staff
c/o Mike Close
Ganzhorn Real Estate Dublin, LLC

RE: Ganzhorn Real Estate Dublin, LLC Planning and Zoning Commission Application

To Whom It May Concern:

This letter serves as support by The Village at Coffman Park Condominium Association for Ganzhorn Real Estate Dublin, LLC to file its application for the proposed development covering 22.66 total acres, including existing condominium property. The development application includes a rezoning request to create a PUD with specific subareas. Of the newly delineated subareas, 6.37 acres are proposed for future condo development, with the remaining approximately 5.03 acres to be developed by Ganzhorn Real Estate Dublin, LLC. These proposed changes impact land owned by Coffman Partners LLC.

Please call Ben Hale at (614) 221-4255 or me at (614) 777-9325 if you have any questions or need additional information.

The Village at Coffman Park Condominium Association

By: _____
Charles J. Ruma, President

cc: Tim Kelton, Representative for Coffman Partners LLC