



**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:

<input type="checkbox"/> Informal Review	<input checked="" type="checkbox"/> Final Plat (Section 152.085)
<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 152.015)	<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): 10799 Drake Road	
Tax ID/Parcel Number(s): 600-344-05-092-000 600-344-05-093-000	Parcel Size(s) (Acres): 6.08 ac 5.67 ac
Existing Land Use/Development: Residential	

**IF APPLICABLE, PLEASE COMPLETE THE FOLLOWING:**

Proposed Land Use/Development: Single Family Residential, 18 lots
Total acres affected by application: 11.7 ac, 12 acres as amended by the vacation of Drake Road

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

Name (Individual or Organization): M/I Homes of Central Ohio, LLC	
Mailing Address: 3 Easton Oval, Suite 340 Columbus, Ohio 43219 (Street, City, State, Zip Code)	
Daytime Telephone: 614-418-8023	Fax: 614-418-8317
Email or Alternate Contact Information: jfrancis@mihomes.com	

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**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: William Adams	Applicant is also property owner: yes <input type="checkbox"/> no <input checked="" type="checkbox"/>
Organization (Owner, Developer, Contractor, etc.): Stansbury Muirfield LLC	
Mailing Address: 8824 Dunsinane Drive, Dublin OH 43017 (Street, City, State, Zip Code)	
Daytime Telephone: 614-286-5753	Fax: 614-793-0001
Email or Alternate Contact Information: statestreet@columbus.rr.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: Ben Hale, Jr	
Organization (Owner, Developer, Contractor, etc.): Smith and Hale (attorney)	
Mailing Address: 37 West Broad Street, Suite 460, Columbus, OH 43215 (Street, City, State, Zip Code)	
Daytime Telephone: 614-221-4255	Fax: 614-221-4409
Email or Alternate Contact Information: bhale@smithandhale.com	

**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>Jason Francis</u> , the owner, hereby authorize <u>William Adams</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: 	Date: 1/29/14

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, <u>Jason Francis</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: 	Date: 1-29-14

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**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>Jason Francis</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><i>Jason Francis</i></u>	Date: 1-29-14

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

I <u>Jason Francis</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><i>Jason Francis</i></u>	Date: 1-29-14

Subscribed and sworn to before me this 29th day of January, 20 14

State of Ohio

County of Franklin

Notary Public

*Mary C. Dalbey* Stamp or Seal

Mary C. Dalbey  
Notary Public, State of Ohio  
My Commission Expires 10-27-2014



FOR OFFICE USE ONLY			
Amount Received: <u>\$2940</u>	Application No: <u>14-009</u>	P&Z Date(s):	P&Z Action:
Receipt No: <u>472319</u>	Map Zone: <u>5</u>	Date Received: <u>1-31-14</u>	Received By: <u>CDH</u>
City Council (First Reading):		City Council (Second Reading):	
City Council Action:		Ordinance Number: <u>50-13</u>	
Type of Request: <u>Final Development Plan</u>			
N, S, E, W (Circle) Side of: <u>Drake Road</u>			
N, S, E, W (Circle) Side of Nearest Intersection: <u>Springburn Drive</u>			
Distance from Nearest Intersection: <u>200</u>			
Existing Zoning District: <u>PUD</u>		Requested Zoning District: <u>/</u>	

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