



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

ADMINISTRATIVE REVIEW APPLICATION

(Code Section 99.06, 153.037)

I. PLEASE CHECK THE TYPE OF APPLICATION:

<p>COIC Districts <i>Select District:</i></p> <p><input type="checkbox"/> HDP</p> <p><input type="checkbox"/> LDP</p> <p><input type="checkbox"/> I-VC</p> <p><input type="checkbox"/> I-CC</p> <p><input checked="" type="checkbox"/> Wireless Communication Facility</p>	<p>Application Type <i>(COIC Only)</i></p> <p><input type="checkbox"/> Pre-Application Review</p> <p><input type="checkbox"/> Development Plan Review</p> <p><input checked="" type="checkbox"/> Administrative Review</p> <p><input type="checkbox"/> Administrative Departures</p>
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Please utilize the applicable *Supplemental Application Requirements* sheet for additional submittal requirements.

II. PROPERTY INFORMATION: This section must be completed.

Property Address(es): 5127 Post Road, Dublin, OH 43017 (Building address is 5131 Post Rd)	
Tax ID/Parcel Number(s): 273-001976-00	Parcel Size(s) (Acres): 2.892 acres
Existing Land Use/Development: Business	Existing Zoning: City of Dublin

PLEASE COMPLETE THE FOLLOWING:

Describe the Existing Land Use/Development:

Business/Offices

Describe the Request:

Verizon Wireless is requesting permitting for 5127 Post Road rooftop cellular equipment modification project. The scope of the project is: swapping (12) antennas for (12) new antennas, upgrade (3) remote radio heads and install (6) remote radio heads on roof mount sectors, swap (1) sector OVP for (1) standard OVP, install (1) standard OVP and relocate (1) existing OVP, remove (1) 7/8" hybrid jumper and install (2) 1-5/8" hybrid cables from OVPs to Verizon shelter. There is existing stealthing panels on the rooftop. The equipment upgrade will continue to be contained behind the existing stealthing panels. +

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

Name (Individual or Organization): SLMC, LTD	
Mailing Address: (Street, City, State, Zip Code) 5131 Post Rd (Contact Douglas Sladoje)	
Daytime Telephone: (614)228-2388	Fax: 614-718-1250
Email or Alternate Contact Information: dsladoje@cooksladoje.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: Verizon Wireless (Todd Barhorst as Manager)	Applicant is also property owner: yes <input type="checkbox"/> no <input checked="" type="checkbox"/>
Organization (Owner, Developer, Contractor, etc.): Verizon Wireless	
Mailing Address: (Street, City, State, Zip Code) 7575 Commerce Court, Lewis Center, OH 43035	
Daytime Telephone: (614)738-9028	Fax:
Email or Alternate Contact Information: todd.barhorst@verizonwireless.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: Rodney Lafferty Jr. on behalf of Verizon Wireless	
Organization (Owner, Developer, Contractor, etc.): SBA Network Services	
Mailing Address: (Street, City, State, Zip Code) 301 Main Street, Suite A, Zanesville, OH 43701	
Daytime Telephone: (740)252-7410	Fax:
Email or Alternate Contact Information: RLafferty@sbsite.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>Mr. Douglas Sladoje, Esq</u> , the owner, hereby authorize <u>Rodney Lafferty Jr. on behalf of Verizon Wireless</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: <u>5/1/15</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 1st day of MAY, 2015

State of OHIO

County of FRANKLIN

Notary Public Catherine S. Grose



CATHERINE S. GROSE
 Notary Public State of Ohio
 My Commission Expires
 May 18, 2016

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>Mr. Douglas Sladoje, Esq</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: <u>5/1/15</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>Mr. Douglas Sladoje, Esq</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:	Date: <u>5/11/15</u>

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

I, <u>Rodney Lafferty Jr. on behalf of Verizon Wireless</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:	Date: <u>5-6-15</u>

Subscribed and sworn to before me this 6th day of May, 20 15

State of Ohio

County of Muskingum

Notary Public [Signature]



Stamp of Seal
 ROBERT T HARDMAN
 NOTARY PUBLIC - OHIO
 MY COMMISSION EXPIRES 11/4/18

FOR OFFICE USE ONLY			
Amount Received:	Application No:	ART Decision:	ART Action:
Receipt No:	Map Zone:	Date Received:	Received By:
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:			