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): 4140-4150 Tuller Road, Suites 122, 130 & 131, Dublin, Ohio 43017	
Tax ID/Parcel Number(s): 273-008381-00	**Parcel Size(s) (Acres):** 10.023 acres
Existing Land Use/Development: BSD/Office-Residential	

IF APPLICABLE, PLEASE COMPLETE THE FOLLOWING:
Proposed Land Use/Development: Conditional Use, Religious or Public Assembly
Total acres affected by application: 10.023 acres

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

Name (Individual or Organization): Tulspec Properties, L.C.	
Mailing Address: (Street, City, State, Zip Code) Tulspec Properties, L.C., c/o Lambrecht Properties, 1000 N Opdyke Road, Suite A, Auburn Hills, Michigan 48326	
Daytime Telephone:	**Fax:**
Email or Alternate Contact Information: jim@lambrechtproperties.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: Scott Engebretson	Applicant is also property owner: yes ☐ no ☑
Organization (Owner, Developer, Contractor, etc.): Vineyard Columbus	
Mailing Address: (Street, City, State, Zip Code) 6000 Cooper Road, Westerville Ohio 43081	
Daytime Telephone: 614-259-5255	Fax:
Email or Alternate Contact Information: Scott.Engebretson@vineyardcolumbus.org	

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:
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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 Jim Lambrecht, the owner, hereby authorize Scott Engebretson 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: Jim Lambrecht	Date: 6-10-16

☐ 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 10TH day of JUNE, 20 16

State of MICHIGAN

County of OAKLAND Notary Public Sharon M. Dulchesky

Stamp or Seal

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 Jim Lambrecht, 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: Jim Lambrecht	Date: 6-10-16

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.

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Signature of applicant or authorized representative:	Date: 6/16/16

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

I Scott Engebretson, 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.

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State of Ohio

County of Franklin

Notary Public

ELIZABETH MCKINLEY WATKINS, ATTY.
NOTARY PUBLIC • STATE OF OHIO
My commission has no expiration date
Section 147.03 O.R.C.

NOTARIAL SEAL STATE OF OHIO

FOR OFFICE USE ONLY			
Amount Received:	Application No:	P&Z Date(s):	P&Z Action:
Receipt No:	Map Zone:	Date Received:	Received By:
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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:	

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SHARON M. DULCHAVSKY
Notary Public, Macomb County, MI
Acting in Oakland County, MI
My Commission Expires: June 20, 2019

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NOTARY PUBLIC • STATE OF OHIO
My commission has no expiration date
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NOTARIAL SEAL STATE OF OHIO

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