



A610801C

February 2009

PLANNING AND ZONING COMMISSION APPLICATION

(Code Section 153.232)

I. PLEASE CHECK THE TYPE OF APPLICATION:

<input type="checkbox"/> Informal Review	<input type="checkbox"/> Final Plat (Section 152.085)
<input type="checkbox"/> Concept Plan (Section 153.056(A)(1))	<input checked="" 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 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.

CITY OF DUBLIN

Land Use and Long Range Planning
5600 Silver Rings Road
Dublin, Ohio 43016-1235

Phone/ TDD: 614-410-4620
Fax: 614-410-4747
Web Site: www.dublin.oh.us

II. PROPERTY INFORMATION: This section must be completed.

Property Address(es): 7195 Coffman Road	
Tax ID/Parcel Number(s): 273-001799-00	Parcel Size(s) (Acres): 5.9 acres
Existing Land Use/Development: Church with stealth telecom site	

IF APPLICABLE, PLEASE COMPLETE THE FOLLOWING:

Proposed Land Use/Development: T-Mobile modifying stealth antennas at site
Total acres affected by application: n/a

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

Name (Individual or Organization): Dublin Baptist Church
Mailing Address: (Street, City, State, Zip Code) 7195 COFFMAN RD Dublin, Ohio 43017
Daytime Telephone: 614 889 2307 Fax:
Email or Alternate Contact Information: N/A

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.

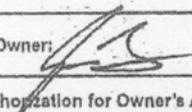
Name: Ronald A. Gainar, Esq.	Applicant is also property owner: yes <input type="checkbox"/> no <input checked="" type="checkbox"/>
Organization (Owner, Developer, Contractor, etc.): Agent for T-Mobile	
Mailing Address: (Street, City, State, Zip Code) 2515 Red Fox Pass, Willoughby Hills, Ohio 44094	
Daytime Telephone: 216-276-3331	Fax: 440-918-0881
Email or Alternate Contact Information: gainar@att.net	

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.

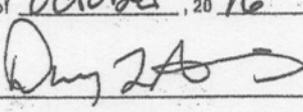
Name: Ronald A. Gainar, Esq.	
Organization (Owner, Developer, Contractor, etc.): Consultant	
Mailing Address: (Street, City, State, Zip Code) 2515 Red Fox Pass, Willoughby Hills, Ohio 44094	
Daytime Telephone: 216-276-3331	Fax: 440-918-0881
Email or Alternate Contact Information: gainar@att.net	

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, Dublin Baptist Church, the owner, hereby authorize Ronald A. Gainar, Esq. 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.

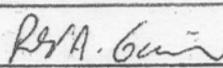
Signature of Current Property Owner:  Jason Lehotsky
Business Facilities Manager
Dublin Baptist Church
Date: 10/20/16

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 20 day of October, 2016
State of Ohio
County of Cuyahoga Notary Public 

DARCEY L ADAMS, Notary Public
In and for the State of Ohio
My Commission Expires February 26, 2020

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>Ronald A. Gainar</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>10-21-16</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. *N/A*

I, Ronald A. Gainar, 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: *R.A. Gainar* Date: 10-21-16

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

I, Ronald A. Gainar, 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: *R.A. Gainar* Date: 10-21-16

Subscribed and sworn to before me this 21 day of October, 2016
 State of Ohio
 County of Medina Notary Public *Darcey L Adams*

DARCEY L ADAMS, Notary Public
 In and for the State of Ohio
 My Commission Expires February 26, 2020

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:	