

I. REVIEW REQUESTED:





II. PROPERTY INFORMATION: Provide information about the property including existing and proposed development.

PLANNING APPLICATION

This is the general application form for Boards and Commissions. In addition, applicants should submit a checklist with the requirements for the application type indicated below. Attach additional sheets if necessary.

 □ Administrative Appeal □ Administrative Departure □ Amended Final Development Plan 	Property Address(es): 113 S. HIGH STREET DUBLIN, OHIO 43017	
 □ Amended Final Development Plan - Sign □ Architectural Review Board □ Basic Development Plan Review 	Tax ID/Parcel Number(s) (List All):	Parcel Size(s) in Acres (List Each Separately):
☑ Basic Bevelopment Flan Review ☑ Basic Site Plan Review □ Building Code Appeal	273-000034-00	0.253 ACRES
☐ Community Plan Amendment ☐ Concept Plan	Existing Land Use/Development:	Existing Zoning District:
□ Conditional Use ☑ Development Plan Review - Bridge Street District	COMMERCIAL, OFFICE	BSD, HISTORIC COTTAGE COMMERCIAL
☐ Development Plan Review - West Innovation District☐ Demolition	Proposed Land Use/Development:	Proposed Zoning District:
□ Final Development Plan □ Final Plat	COMMERCIAL, OFFICE	BSD, HISTORIC COTTAGE COMMERCIAL
□ Informal Review		
□ Master Sign Plan	III. CURRENT PROPERTY O	
☐ Minor Modification	person(s) or organization(s) who own the property proposed for	
□ Minor Project Review	development.	
☐ Minor Subdivision		
 □ Non-Use (Area) Variance □ Preliminary Development Plan/PUD Rezoning □ Preliminary Plat 	Name (Individual or Organization): U CREM HOLDINGS	
☑ Fremmary Plat ☑ Site Plan Review - Bridge Street District	Malling Address (Street City State	710\.
☐ Site Plan Review - West Innovation District ☐ Site Plan Review - West Innovation District	Mailing Address (Street, City, State, ZIP):	
□ Special Permit	113 S. HIGH STREET DUBLIN, OHIO 43017	
□ Standard District Rezoning	2002m, 01110 1100 11	
☐ Use Variance		
□ Waiver Review		
□ Wireless Communications Facility		
☐ Zoning Code Amendment	Email/Phone Number: MARK.FARNHAM@LPL.CC KELLY.D.BURKE@LPL.CC	

For questions or more information, please contact Planning at 614.410.4600 | www.dublinohioUSA.gov



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IV. APPLICANT(S): Complete this section if the person/organization representing the applicant/ property owner is different from the applicant.

Not Applicable PLANNING		
Name (Individual or Organization):		
Mailing Address (Street, City, State, ZIP):		
Phone Number:		
Email:		
V. REPRESENTATIVE(S): Complete this section if the person/ organization representing the applicant/ propapplicant (such as the project manager or property owner's legal council).	erty owner is different from the	
□ Not Applicable		
Name (Individual or Organization): DAN MORGAN (BEHAL SAMPSON DIETZ)		
Mailing Address (Street, City, State, ZIP): 990 M.3RD AVENUE, COLUMBUS, OH 43212		
Phone Number: 614-464-1933		
Email: DMORGAN@BSDARCHITECTS.COM		
VI. PROPERTY OWNER'S AUTHORIZATION OF APPLICANT(S)/ AUTHORIZED REPRESENTAL listed in Section III must authorize the Applicant listed in Section IV and/or the Authorized Representative listed in Owner's behalf with respect to this application. Not Applicable	ATIVE: The Property Owner Section V to act on the	
I KELLY BURKE & MAKK FARNIMM the property owner, hereby authorize DAN M To act as my representative(s) in all matters pertaining to the processing and approval of this application, include application. I agree to be bound by all representations and agreements made by the designated representative (list	ding modification to the	
Original Signature of Property Owner (listed in Section II):	Date: /0/17/17	
Subscribed and sworn before me this 17th day of October, 2017 State of Ohio County of Franklin Notary Public Cindud Maion My Commission Expires 7-14-2020 Section 147.03 R.C.		
VII. AUTHORIZATION TO VISIT THE PROPERTY: Site visits to the property by City representative are application. The Property Owner/ Applicant/ Authorized Representative (listed in Section II), hereby authorizes City photograph, and post a notice on the property described in this application. This is optional, but strongly recomme	v representatives to enter.	
I KELLY BURKE MAKE FARNHAM, the property owner or authorized representative , hereby authorize City representatives to enter, photograph and post a notice on the property described in the application.		
Original Signature of Property Owner or Authorized Representative	Date: 6/17/17	

□ Original Document Attached

I KELLY BINKE JM ARK FARNHAM the property 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 best of my knowledge and belief.

Original Signature of Property Owner or Authorized Representative

Date: |0/17/17

Subscribed and sworn before me this 17th day of 10th

County of Franklin

Notary Public



Cindy L. Marion
Notary Public, State of Ohio
My Commission Expires 7 - 14 - 2020
Section 147.03 R.C.

FOR OFFICE USE ONLY:

Case Title: BSD-HC - 113 S. HIGH ST OFFICE BUILDING	Date Received:
Case Number: 17 - 110 ARB - BPK	10/17/17
Amount Received: 511 40 . OO	Next Decision Due Date (If Applicable):
Receipt Number: 5219	(II Applicable).
Reviewing Body (Circle One): ART ARB BZA CC PZC	Final Date of Determination:
Map Zone: D - (
Determination or Action:	Related Cases:
Ordinance Number (If Applicable):	



