1	Dublin
	- OHIO. USA

Case # _	-	

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.

Sept.	I. REVIEW REQUESTED:
	☐ Administrative Appeal
	☐ Administrative Departure
	□ Amended Final Development Plan
	□ Amended Final Development Plan - Sign
	□ Architectural Review Board
	☐ Basic Development Plan Review
	☐ Basic Site Plan Review
	□ Building Code Appeal
	☐ Community Plan Amendment
100	□ Concept Plan
	□ Conditional Use
	☐ Development Plan Review - Bridge Street District
	☐ Development Plan Review - West Innovation District
	□ Demolition
	☐ Final Development Plan
3.	□ Final Plat
	Informal Review
***	☐ Master Sign Plan
	□ Minor Modification
	☐ Minor Project Review
	☐ Minor Subdivision
	□ Non-Use (Area) Variance
	☐ Preliminary Development Plan/PUD Rezoning
	□ Preliminary Plat
	☐ Site Plan Review - Bridge Street District
	☐ Site Plan Review - West Innovation District
	☐ Special Permit
	☐ Standard District Rezoning
	☐ Use Variance
	☐ Waiver Review
	☐ Wireless Communications Facility
	☐ Zoning Code Amendment
	724

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

Property Address(es): 30 and 32 S. High Street				
Tax ID/Parcel Number(s)	Parcel Size(s) In Acres			
(List All):	(List Each Separately):			
(30 S. High) 273-00008-00	(30 S. High) 0.12			
(32 S. High) 273-000089-00	(32 S. High) 0.13			
Existing Land Use/Development:	Existing Zoning District:			
(30 S. High) Office	Bridge Street Historic			
(32 S. High) General Store	Commercial			
Proposed Land Use/Development:	Proposed Zoning District:			
(30 S. High) Office	Bridge Street Historic			
(32 S. High) Restaurant	Commercial			

III. CURRENT PROPERTY OWNER(S): Indicate the person(s) or organization(s) who own the property proposed for development.

Name (Individual or Organization):	
Bluebird Consulting Group LLC	
Mailing Address (Street, City, State, ZIP):	
200 S. High Street	
Dublin, Ohio 43017	
Email/Phone Number:	
sst@tackettweb.com	



IV. APPLICANT(S): Complete this section if the person/organizatio				
□ Not Applicable				
Name (Individual or Organization): Sharon Tackett (Briefing Hondhith) Stoup MPSON DIETZ				
Mailing Address (Street, City, State, ZIP): 200 S. High Street, Dublin, OH 43017				
Phone Number: 614-438-4895 or 614-507-1146				
Email: SStotackett web, com				
V. REPRESENTATIVE(S): Complete this section if the person/ organization representing the applicant/ property owner is different from the applicant (such as the project manager or property owner's legal council).				
□ Not Applicable				
Name (Individual or Organization): Dan Morgan (behal sampson dietz)				
Mailing Address (Street, City, State, ZIP): 990 W. 3rd Avenue, Columbus, OH 43212				
Phone Number: 614-464-1933				
Email: dmorgan@bsdarchitects.com				
VI. PROPERTY OWNER'S AUTHORIZATION OF APPLICANT(S)/ AUTHORIZED REPRESENTATIVE: The Property Owner listed in Section III must authorize the Applicant listed in Section IV and/or the Authorized Representative listed in Section V to act on the Owner's behalf with respect to this application.				
□ Not Applicable				
I Sharon Tackett (Blueblird Consulting Group) To act as my representative(s) In all matters pertaining to the processing and approval of this application, including modification to the application. I agree to be bound by all representations and agreements made by the designated representative (listed in Sections III and/or IV).				
Original Signature of Property Owner (listed in Section II): 1 Date: 4/10/18				
Subscribed and sworn before me this day of April 20 8 State of April 20 8 County of Granklin Notary Public ALSHARARI RAWAHNEH Notary Public, State of Ohio My Comm. Expires 10-03-2021 Recorded in the County of Franklin				
VII. AUTHORIZATION TO VISIT THE PROPERTY: Site visits to the property by City representative are essential to process the application. The Property Owner/ Applicant/ Authorized Representative (listed in Section II), hereby authorizes City representatives to enter, photograph, and post a notice on the property described in this application. This is optional, but strongly recommended.				
I, 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: 1 Date: 4/10/18				

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



EVERYTHING GROWS HERE.

VIII. APPLICANT'S AFFIDAVIT OF ACKNOWLEDGMENT: This section must be completed with an original signature and notarized.

☐ Original Document Attached				
I Sharon Tackell (Divebild Consulting Group) , 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: 4/10/18			
Subscribed and sworn before me this day of	ALSHARARI RAWAHNEH Notary Public, State of Ohio My Comm. Expires 10-03-2021 ecorded in the County of Franklin			
FOR OFFICE USE ONLY:				
Case Title:	Date Received:			
Case Number:				
Amount Received:	Next Decision Due Date (If Applicable):			
Receipt Number:	(Triple of the second of the			
Reviewing Body (Circle One): ART ARB BZA CC PZC	Final Date of Determination:			
Map Zone:				
Determination or Action:	Related Cases:			

Ordinance Number (If Applicable):

