

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.

I. REVIEW REQUESTED:
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 Concept Plan Conditional Use Development Plan Review - Bridge Street District Development Plan Review - West Innovation District Demolition Final Development Plan Final Plat Informal Review Master Sign Plan Minor Modification Minor Project Review Minor Subdivision Non-Use (Area) Variance Preliminary Plat
□ Informal Review
□ Master Sign Plan
□ Minor Modification
☐ Minor Project Review
☐ Minor Subdivision
□ Non-Use (Area) Variance
X 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

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

Property Address(es): 7050 & 7055 Oak Park B.			
Tax ID/Parcel Number(s) (List All): 3900280140400 3900280140950	Parcel Size(s) in Acres (List Each Separately): Reserve A 1.733 AC. +/- Reserve D 1.735 AC. +/-		
Existing Land Use/Development: Vacant	Existing Zoning District: PUD - Commercial		
Proposed Land Use/Development: Single Family Residential	Proposed Zoning District: PUD- Residential		

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

Name (Individual or Organization): Oak Park Dublin LLC.
Mailing Address (Street, City, State, ZIP): Atlantic Realty Development Corp. Attn: William K Hayes II 90 Woodbridge Center Drive Suite 600 Woodbridge, NJ. 07095
Email/Phone Number: BillyH@AtlanticRDC.com (732)-750-1111

IV. APPLICANT(S): Complete this section if the person/organization representing the applicant/ property owner is different from the applicant. **Not Applicable** Name (Individual or Organization): Christopher T. Cline c/o Haynes, Kessler, Myers & Postalakis Mailing Address (Street, City, State, ZIP): 300 West Wilson Bridge Rd. #100 Worthington, OH 43085 Phone Number: (614)-764-0681 Email: ctc@BHMLaw.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): Same as Above Mailing Address (Street, City, State, ZIP): Phone Number: Email: 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** , the **property owner**, hereby authorize Christophia Cure William K Hayes II 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): Date: day of OCTOBOX Subscribed and sworn before me this DEBORAH A LACOVARA SARABI OF SEAL State of A Notary Public of New Jersey County of Notary Public My Commission Expires 9/25/22 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. William K Hayes II , 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:



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

□ Original Document Attached			
I, the <b>property owner</b> or <b>authorized representative</b> , 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: /o/g/19			
Subscribed and sworn before me this At day of OCOBIC , 20 19 State of Notary Public			
FOR OFFICE USE ONLY:			
Case Title:	Date Received:		
Case Number:			
Amount Received:	Next Decision Due Date		
Receipt Number:	(If Applicable):		
Reviewing Body (Circle One): ART ARB BZA CC PZC	Final Date of Determination:		
Map Zone:			
Determination or Action:	Related Cases:		
Ordinance Number (If Applicable):			