

ZONING/RE-ZONING APPLICATION

PLEASE NOTE: This application is not to be considered complete until all documents are received and approved by the Planning & Zoning Administrator.

Project/Property Address or Location:		Project Name/Business Name (if applicable):	
Parcel ID No.(s)	Current Zoning:	Total Acreage:	
Proposed Use/Reason for Request:			Proposed Zoning:
APPLICANT INFORMATION (primary contact)			
Name (please do not use a business name):		Address:	
E-Mail:		Phone No.	
ATTORNEY/AGENT INFORMATION			
Name:		Address:	
E-Mail:		Phone No.	
ADDITIONAL CONTACT INFORMATION (please list all applicable contacts)			
Names: -Contractor: -Developer: -Architect:		Contact Information (phone no./email):	
Property Owner Name: (if different from Applicant)		Contact Information (phone no./email):	

APPLICANT SIGNATURE BELOW CONFIRMS THE SUBMISSION REQUIREMENTS HAVE BEEN COMPLETED (see page 2)

I certify that the information on this application is complete and accurate to the best of my knowledge, and that the project as described, if approved, will be completed in accordance with the conditions and terms of that approval.

Applicant Signature: _____

Date: _____

INTERNAL USE ONLY

Zoning File No. _____
PC Meeting Date: _____
PC File No. _____

RECEIVED: _____
DATE: _____

PAID: _____
DATE: _____
CHECK#: _____

ZONING/RE-ZONING APPLICATION – SUBMISSION REQUIREMENTS

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STAFF USE - INTAKE	TO BE COMPLETED/SUBMITTED BY THE APPLICANT:	APPLICANT		STAFF USE	
		YES	N/A	YES	N/A
	1. Review Gahanna Code Section 1133 & 1152 for Limited Overlay & ROD Applicants (visit www.municode.com)				
	2. Pre-application conference with staff				
	3. Area map identifying the subject property in relation to surrounding properties.				
	4. Survey of property certified by registered surveyor (11x17" copy)				
	5. Legal description of property certified by registered surveyor (11x17" copy)				
	6. List of contiguous & directly across the street from property owners mailing address				
	7. Two (2) sets of pre-printed mailing labels for all contiguous & directly across the street from property owners				
	8. Limitation Text (Limited Overlay or ROD zoning applicants only)				
	9. Elevation Drawings (Limited Overlay or ROD zoning applicants only)				
	10. Traffic Impact Study (labeled as such) - if any use permitted in the requested zoning district could generate 100+ peak hour directional trips, or 1,000+ vehicle trips/day; the traffic study should contrast the daily peak hour trip generation rates for representative use in the requested zoning district.				
	11. Conceptual plan (labeled as such) - demonstrating that the site could be developed with representative uses permitted in the requested zoning district meeting requirements for setbacks, wetland buffers, access spacing, any requested service drives and other site design factors.				
	12. Site analysis plan (labeled as such) - illustrating existing conditions on the site and adjacent properties such as soil conditions; drainage patterns; views; existing buildings; any sight distance limitations; and relationship to other developed sites and access points in the vicinity of the property.				
	13. Environmental assessment (labeled as such) - describing site features & anticipated impacts created by the host of uses permitted in the requested zoning district.				
	14. Written statement on a separate sheet responding to the six (6) elements listed in Zoning Code Section 1133.03(b) . – the City's Land Use Plans can be found at www.gahanna.gov under the Planning & Development Department.				
	15. Application fee (in accordance with the Building & Zoning Fee Schedule)				
	16. Application & all supporting documents submitted in digital format				
	17. Application & all supporting documents submitted in hardcopy format				
	18. Zoning Sign posted on property in accordance with Zoning Code Section 1133.02 no less than 2 weeks prior to the public hearing date. Sign shall be consistent with diagram shown in 1133.02 – the City Logo is available online by visiting www.gahanna.gov under the Zoning Division				
	19. Authorization Consent Form Complete & Notarized (see page 3)				

INTERNAL USE ONLY

APPLICATION ACCEPTANCE

This application has been reviewed and is considered complete and is hereby accepted by the Zoning Division of the City of Gahanna and shall be forwarded to the City of Gahanna Planning Commission for consideration.

Planning & Zoning Administrator Signature: _____ Date: _____

AUTHORIZATION CONSENT FORM

(must sign in the presence of a notary)

If you are filling out more than one application for the same project & address, you may submit a copy of this form with additional applications.

AUTHORIZATION FOR OWNER'S APPLICANT OR REPRESENTATIVE(S)

If the applicant is not the property owner, this section must be completed and notarized.

I, _____, the owner of the subject property listed on this application, hereby authorize _____ 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 terms and agreements made by the designated representative.

Property Owner Signature: _____ Date: _____

AUTHORIZATION TO VISIT THE PROPERTY

I, _____, the owner of the subject property listed on this application, hereby authorize City representatives to visit, photograph and post notice *(if applicable)* on the property as described in this application.

Property Owner Signature: _____ Date: _____

NOTARY

Subscribed and sworn to before me on this _____ day of _____, 20_____.

State of _____ County of _____

Stamp or Seal

Notary Public Signature: _____

AGREEMENT TO COMPLY AS APPROVED

I, _____, the contractor/applicant of the subject property listed on this application, hereby agree that the project will be completed as approved and any proposed changes to the approved plans shall be submitted for review and approval to the Zoning Division staff.

Contractor/Applicant Signature: _____ Date: _____

NOTARY

Subscribed and sworn to before me on this _____ day of _____, 20_____.

State of _____ County of _____

Stamp or Seal

Notary Public Signature: _____

SAVE APPLICATION