



Application/Permit # \_\_\_\_\_ - \_\_\_\_\_

## Application for Rezoning Permit

85 Commerce Street, Lockbourne, Ohio 43137 • Phone: (614) 491-3161 • Fax: (614) 491-8070  
www.lockbourneohio.us

**ALL FEES ARE NON-REFUNDABLE • Please type or print all information**

### ZONING REQUEST

Existing Address (Franklin County Auditor) \_\_\_\_\_

Zip Code \_\_\_\_\_

Is this application being annexed into the Village of Lockbourne? \_\_\_\_ YES \_\_\_\_ NO

***If the site is currently pending annexation, the Applicant must show documentation of County Commissioner's adoption of the annexation petition.***

Parcel Number(s) \_\_\_\_\_

***Check here if listing additional parcel numbers on a separate page.*** \_\_\_\_ YES \_\_\_\_ NO

Acreage \_\_\_\_\_

Current Zoning District(s) \_\_\_\_\_

Proposed Use or Reason for Request \_\_\_\_\_

Proposed Height District \_\_\_\_\_

Requested Zoning District(s) \_\_\_\_\_

### APPLICANT

Applicant Name \_\_\_\_\_

Address \_\_\_\_\_

Email Address \_\_\_\_\_

Phone Number \_\_\_\_\_

City/State \_\_\_\_\_

Zip \_\_\_\_\_



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**Kendall Collins, Village Administrator**

### PROPERTY OWNER(S)

Applicant Name \_\_\_\_\_

Address \_\_\_\_\_

Email Address \_\_\_\_\_

Phone Number \_\_\_\_\_

City/State \_\_\_\_\_

Zip \_\_\_\_\_

\_\_\_\_\_ ***Check here if listing additional property owners on a separate page***

### ATTORNEY / AGENT (if applicable)

Applicant Name \_\_\_\_\_

Address \_\_\_\_\_

Email Address \_\_\_\_\_

Phone Number \_\_\_\_\_

City/State \_\_\_\_\_

Zip \_\_\_\_\_

### SIGNATURES AND ACKNOWLEDMENT

My signature below attests to the fact that the attached application and materials are complete and accurate to the best of my knowledge. I understand that the staff review of this application is dependent upon the accuracy of the information provided and that any inaccurate or inadequate information provided by me/my firm/etc. may delay the review of this application.

APPLICANT SIGNATURE \_\_\_\_\_ Date \_\_\_\_\_

PROPERTY OWNER \_\_\_\_\_ Date \_\_\_\_\_

SIGNATURE ATTORNEY / AGENT SIGNATURE

\_\_\_\_\_ Date \_\_\_\_\_



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### ZONING APPLICATION CHECKLIST

The application package must consist of all applicable items listed below (except for fees), submitted as a single digital PDF document (in addition to any MS Word document(s) as required below). Do not include checklists and instruction pages, etc.

- **The Application Form**
- **Notarized Affidavit Form and Label Sets** (see full instructions on form; some are provided here)
  - The "Proximity Report" listing the surrounding property owners can be obtained at the Franklin County Auditor's office. Similar reports can also be obtained on the applicable County Auditor website.
    - From the Franklin County Auditor's website, after having opened the subject property record, select the Mapping page and run a 125-foot Buffer Search around the property (including contiguously-owned property or across streets, alleys or rights of way), and generate the Proximity Report to obtain an Excel list of surrounding property owners.
  - The mailing labels are emailed with the application as an Avery #5160 formatted Word document. This document can serve as the "Proximity Report" referred to on page 4.
- **Notarized Project Disclosure Statement** (See instructions on form)
- **Legal Description of the Subject Property**

Current property survey to include acreage of the subject property and all metes and bounds, referencing the centerline intersection of two public streets. If more than one zoning district or multiple sub-areas are requested in this application, separate legal descriptions must be submitted for each district and/or sub-area. All legal descriptions must be submitted in digital format (MS Word document left justified, no indentations, in Times New Roman font, size 11).
- **Limitation / CPD / PUD Text**

All rezoning requests to Limited Overlay (L-C-4, L-AR-12, etc.) CPD, Commercial Planned Development, or PUD, Planned Unit Development Districts must include Limitation Overlay, CPD, or PUD Text. All texts must be submitted in digital format (MS Word document left justified, no indentations, in Times New Roman font, size 11 or higher).
- **Site Plan** (required for CPD, PUD, and Limited zoning districts committing to a plan)

Site plans must be drawn to Engineer's scale and provide applicable information.
- **Approved Annexation Petition from County**

A copy of the approved annexation petition is required for properties that are in annexation status at time of application.
- **Application Fees** (non-refundable)

Per the most current fee schedule approved by Village Council. Checks are to be made payable to: Village of Lockbourne.



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### AFFIDAVIT

STATE OF OHIO

COUNTY OF FRANKLIN

Being first duly cautioned and sworn (1) NAME \_\_\_\_\_

of (1) MAILING ADDRESS \_\_\_\_\_

hereby swears and affirms that (he/she) is the applicant, agent, or duly authorized attorney for same and the following is a list of the name(s) and mailing address(es) of all the owners of record of the property located at (2) PROPERTY ADDRESS \_\_\_\_\_ for which such zoning action is applied.

(3) SUBJECT PROPERTY OWNER'S NAME \_\_\_\_\_

AND MAILING ADDRESS \_\_\_\_\_

\_\_\_\_\_ Check here if listing additional property owners on a separate page

(4) APPLICANT'S NAME AND PHONE # \_\_\_\_\_

EMAIL ADDRESS \_\_\_\_\_

and that the attached document (5) is a list of the names and complete mailing addresses, including zip codes, as shown on the County Auditor's Current Tax List or the County Treasurer's Mailing List, of all the owners of record of property within 125 feet of the exterior boundaries of the property for which the application was filed, and all of the owners of any property within 125 feet of the applicant's or owner's property in the event the applicant or the property owner owns the property contiguous to the subject property.

SIGNATURE OF AFFIANT \_\_\_\_\_

Sworn to before me and signed in my presence this day of \_\_\_\_\_, \_\_\_\_\_.

(6) SIGNATURE OF NOTARY PUBLIC \_\_\_\_\_

Notary Seal Here

My Commission Expires \_\_\_\_\_



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APPLICATION #: \_\_\_\_\_

### THIS PAGE MUST BE FILLED OUT COMPLETELY AND NOTARIZED

Do not indicate '**NONE**' in the space provided.

Being first duly cautioned and sworn (1) NAME

\_\_\_\_\_

of (1) MAILING ADDRESS

\_\_\_\_\_

hereby swears and affirms (he/she) is the APPLICANT, AGENT, OR DULY AUTHORIZED ATTORNEY FOR SAME and the following is a list of all persons, other partnerships, corporations or entities having a 5% or more interest in the project which is the subject of this application in the following format:

\_\_\_\_\_

**SIGNATURE OF AFFIANT** \_\_\_\_\_

Sworn to before me and signed in my presence this day of \_\_\_\_\_, \_\_\_\_\_.

\_\_\_\_\_

**(6) SIGNATURE OF NOTARY PUBLIC**

Notary Seal Here

\_\_\_\_\_

My Commission Expires

### Zoning & Development Fees

Rezoning Residential – no fee

Rezoning Commercial, Industrial - \$1000 first acre, \$175 for each additional acre or part thereof