

CITY OF WELLSTON
PLANNING AND ZONING COMMISSION APPLICATION

Please Check Appropriate Box(es)

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| <input type="checkbox"/> Preliminary Site Plan (Fee \$50 + \$10/Acre) | <input type="checkbox"/> Final Site & Architectural Review (Fee \$50 + \$10/Acre) |
| <input type="checkbox"/> Architectural Review/Re-Imaging (Fee \$50) | <input checked="" type="checkbox"/> Rezoning (Fee \$100 + \$10/Acre) |
| <input type="checkbox"/> Preliminary Subdivision (Fee \$100 + \$5/Lot) | <input type="checkbox"/> Final Subdivision (Fee \$200 + \$10/Lot) |
| <input type="checkbox"/> Miscellaneous Review (Fee \$25): Type: _____ | |

PROJECT INFORMATION (Please Print)

Project Address: _____ Zoning: _____

Parcel Number(s): _____

COMPLETE BELOW AS APPLICABLE (Please Print)

Proposed Use: _____

Building Area: _____ Lot Acreage: _____

Number of Sublots: _____ Acreage in Sublots: _____

Acreage in Open Space or Village Green: _____ Proposed Zoning Classification: _____

NAME AND ADDRESS OF APPLICANT: (Print Full Address)

Company Name: _____

Contact Person: _____

Street Address: _____

City: _____ State: _____ Zip Code: _____

Phone Number: _____ Cell Number: _____

Fax Number: _____ Email Address: _____

APPLICANT SIGNATURE: _____ **DATE:** _____

NAME AND ADDRESS OF PROPERTY OWNER: (Authorization required if different than Applicant)

Company Name: _____

Contact Person: _____

Street Address: _____

City: _____ State: _____ Zip Code: _____

Phone Number: _____ Cell Number: _____

Fax Number: _____ Email Address: _____

The undersigned Owner agrees that the above person (Applicant) shall, for the sole purpose(s) set forth herein, have the full authority to act as an agent for the Property Owner shall be, for all purposes set forth herein, deemed an agent in the direct employment of the above-referenced for the following purposes (provide a complete description of the scope of the agency relationship): and shall have full power and authority to act in the name of the above-referenced, make application(s), receive information and notices, represent, and bind same in any matters falling within the scope of the purpose(s) set forth herein above.

OWNER SIGNATURE: _____ **DATE:** _____

Staff Use Only:

Fee Paid Notice Sign Given to Applicant Meeting Date: _____

Zoning Commission meetings are at 4 p.m. on the first floor of the Municipal Building in Conference Room, 2nd Wednesday of the Month

Received By: _____

Wellston Municipal Building, 203 East Broadway Street, Wellston, Ohio 45692 www.cityofwellston.org

Department of Zoning Phone 740-384-3482 \ Fax 740-384-3357 \ Email: CODE@cityofwellston.org

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THE FOLLOWING ITEMS SHALL BE ADDRESSED AS PART OF THE APPLICATION:

<p>Data:</p> <p>Letter Addressing the City Engineer’s Comments per the informal review</p> <p>Name of Development</p> <p>Name & Address of Developer and Owner (If Different)</p> <p>North Arrow, Date and Number of Sheets</p> <p>Scale 1" = 50' or Larger</p> <p>Existing topography at 2’ contour intervals of the property to be rezoned and extending at least 300’ outside of the proposed site, including property lines, easements, street right-of-way, existing structures, trees and landscaping features existing thereon</p> <p>The proposed vehicular and pedestrian traffic patterns.</p> <p>Size, Location & Type of Vehicular Ingress & Egress for Site & Existing Drives Adjacent within 50' of the Site</p> <p>The location of all existing and all proposed structures.</p>	<p>Proposed assignment of use and subdivision of land including private land and common land.</p> <p>Preliminary plans of all structural types.</p> <p>A tree management plan showing the location, size and species of existing trees of at least five (5) inches in caliper measured fifty-four (54) inches above the ground to be preserved and preliminary drawings showing proposed landscape treatment.</p> <p>Deed restriction and protective covenants.</p> <p>A schedule for construction and cost estimates.</p> <p>Regional location map.</p> <p>Population impact evaluation.</p> <p>Market Report.</p> <p>Traffic impact evaluation.</p> <p>Utilities impact evaluation.</p> <p>Drainage impact evaluation.</p> <p>Such other relevant information the Planning Commission may require</p>
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COMMENTS:

NOTES: A total of 19 copies of the plans are required. NO SHEET SHALL EXCEED 42” IN SIZE. 14 Copies can be submitted as 11” x 17” if they are legible. The other five (5) sets are required to be full size. A digital copy of all plans and documents shall also be submitted. This can be either via email (10 MB maximum), DVD, flash drive or other means. It is suggested and encouraged that the Applicant schedules a pre-application conference with the Planning and Zoning Inspector and the City Engineer prior to site plan submittal for Planning and Zoning Commission review. Additional or revised information for tabled agenda items need to be submitted at least ten (10) working days prior to the Planning and Zoning Commission meeting. Questions can be directed to the Planning and Zoning Development at (740)384-3842.