

# CITY OF POWELL

## APPLICATION FOR ADMENDING AN APPROVED FINAL DEVELOPMENT PLAN



ALL ITEMS ON THIS APPLICATION MUST BE COMPLETED

Application Fee: \$550

**Applicant:** Verona, LLC \_\_\_\_\_

Address: 148 West Schrock Road \_\_\_\_\_

City / State / Zip: Westerville, Ohio 43081 \_\_\_\_\_

Phone No: (614) 891-8564 \_\_\_\_\_ Cell Phone No: (614) 207-7741 \_\_\_\_\_ Fax No: (614) 891-2045 \_\_\_\_\_

**Property Owner: Same as above** \_\_\_\_\_

Address: \_\_\_\_\_

Phone No: \_\_\_\_\_ Cell Phone No: \_\_\_\_\_ Fax No: \_\_\_\_\_

**Plan Preparer: Stantec Consulting Services, Inc.** \_\_\_\_\_

Address: 1500 Lake Shore Drive, Suite 100 \_\_\_\_\_

City / State / Zip: Columbus, Ohio 43204 \_\_\_\_\_

Phone No: (614) 486-4383 \_\_\_\_\_ Cell Phone No: (614) 348-0765 \_\_\_\_\_ Fax No: (614) 486-4387 \_\_\_\_\_

**Property Address: 4594 West Powell Road** \_\_\_\_\_

Lot Number/Subdivision: Verona \_\_\_\_\_ Zoning District/Use: SFPRD \_\_\_\_\_ Acreage: 113.5 Ac \_\_\_\_\_

The following must be included with this application. ONLY COMPLETE APPLICATIONS WILL BE ACCEPTED.

1. Legal Description of the property.
2. Vicinity Map as required.
3. Written Text explaining nature of amendment being requested.
4. Amended Final Development Plan drawing(s) (site plan, elevation drawings, etc.) needed to show proposed amendment.
5. Provide any other information that may useful to the Planning and Zoning Commission or City Staff in the space below or attach additional pages.
6. 15 copies of all drawings, text, any other items, and application.

We are requesting to revise the rear yard setback requirement to be 30 feet for a primary structure, 5 feet for an accessory structure, and 12 feet for swimming pools.

**APPROVAL SHALL EXPIRE AND MAY BE REVOKED IF CONSTRUCTION DOES NOT BEGIN  
WITHIN TWO (2) YEARS FROM THE DATE OF ISSUANCE OF APPROVAL.**

I agree to grant the City of Powell Staff and the Planning and Zoning Commission members considering this application access to the property subject of this application for the purposes of reviewing this application and posting public notice for this application.

Signature of Applicant: \_\_\_\_\_ Date: \_\_\_\_\_

Approved  Disapproved

Date Application Filed: \_\_\_\_\_

\_\_\_\_\_  
Signature of Zoning Administrator

Payment and Receipt Number: \_\_\_\_\_