

**CITY OF COLUMBUS****DEPARTMENT OF BUILDING AND ZONING SERVICES****One Stop Shop Zoning Report** Date: Thu Aug 25 2016

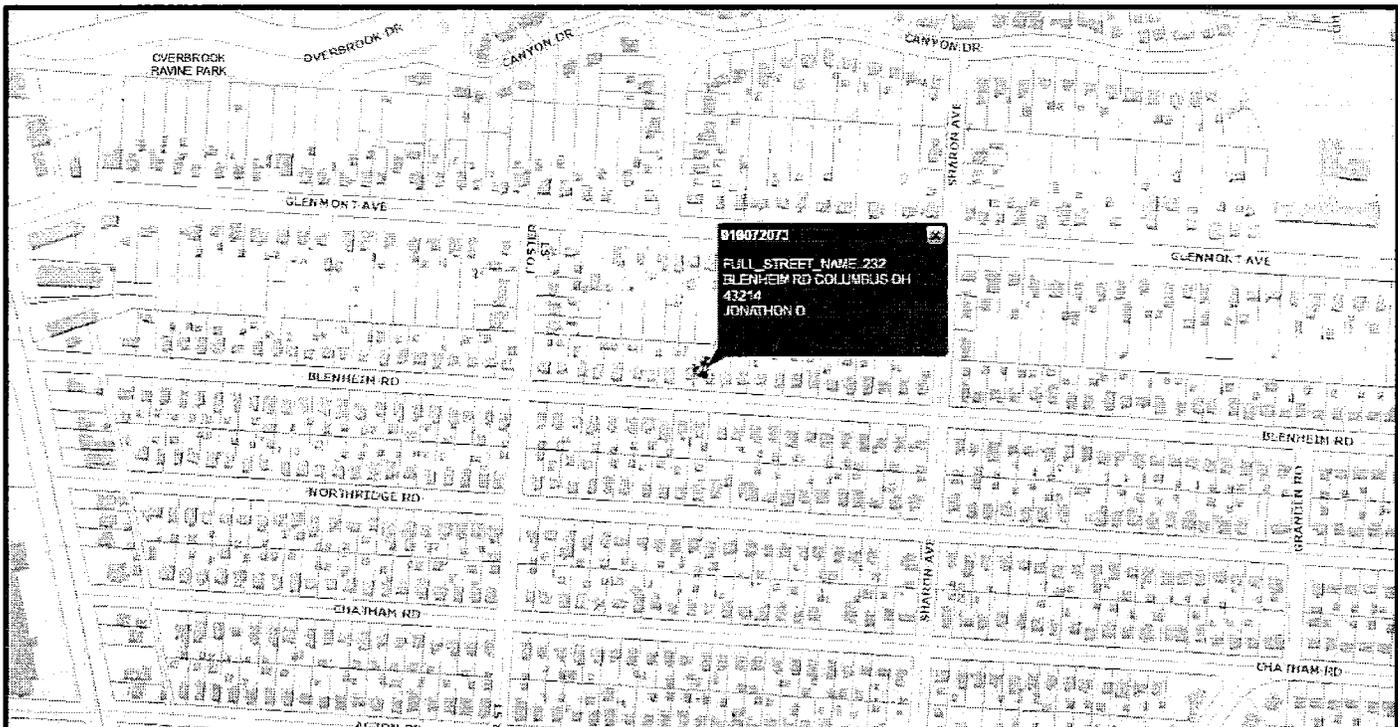
General Zoning Inquiries: 614-645-8637

SITE INFORMATION**Address:** 232 BLENHEIM RD COLUMBUS OH 43214**Mailing Address:** 8534 E KEMPER RD FL 2

CINCINNATI OH 45249-3701

Owner: BONTRAGER KARRIE A**Parcel Number:** 010072073**ZONING INFORMATION****Zoning:** ORIG, Residential, R3

effective 2/27/1928, Height District H-35

Board of Zoning Adjustment (BZA): N/A**Commercial Overlay:** N/A**Graphic Commission:** N/A**Area Commission:** Clintonville Area Commission**Planning Overlay:** N/A**Historic District:** N/A**Historic Site:** No**Council Variance:** N/A**Flood Zone:** OUT**Airport Overlay Environs:** N/A**PENDING ZONING ACTION****Zoning:** N/A**Board of Zoning Adjustment (BZA):** N/A**Council Variance:** N/A**Graphic Commission:** N/A

THE CITY OF COLUMBUS

ANDREW J. GIBTHER, MAYOR

Board of Zoning Adjustment Application

757 Carolyn Avenue, Columbus, Ohio 43224
Phone: 614-645-7433 • www.bzs.columbus.gov

DEPARTMENT OF BUILDING AND ZONING SERVICES

OFFICE USE ONLY

Application Number: BZA16-120
Date Received: 17 Aug. 2016
Application Accepted by: [Signature]
Fee: \$320
Commission/Civic:
Existing Zoning:
Comments:

TYPE(S) OF ACTION REQUESTED (Check all that apply):

- [X] Variance [] Special Permit

Indicate what the proposal is and list applicable code sections:

3332.38 (G) a garage shall not exceed 15' in height
We are requesting 4'2" variance to create storage above the garage

LOCATION

Certified Address: 232 Blenheim Rd City: Cols Zip: 43214

Parcel Number (only one required): 010-072073-00

APPLICANT (If different from Owner):

Applicant Name: Phone Number: Ext.:
Address: City/State: Zip:
Email Address: Fax Number:

PROPERTY OWNER(S) [] Check here if listing additional property owners on a separate page

Name: Karrie Bontager Phone Number: Ext.:
Address: 232 Blenheim Rd City/State: Cols Zip: 43214
Email Address: Fax Number:

ATTORNEY / AGENT (Check one if applicable): [] Attorney [] Agent

Name: Phone Number: Ext.:
Address: City/State: Zip:
Email Address: Fax Number:

SIGNATURES (All signatures must be provided and signed in blue ink)

APPLICANT SIGNATURE [Signature]
PROPERTY OWNER SIGNATURE [Signature]
ATTORNEY / AGENT SIGNATURE

PLEASE NOTE: Incomplete information will result in the rejection of this submittal.
Applications must be submitted by appointment. Call 614-645-4522 to schedule.
Please make checks payable to the Columbus City Treasurer

Board of Zoning Adjustment Application

757 Carolyn Avenue, Columbus, Ohio 43224
Phone: 614-645-7433 • www.bzs.columbus.gov

AFFIDAVIT

STATE OF OHIO
COUNTY OF FRANKLIN

Being first duly cautioned and sworn (1) NAME Robert Pomante
of (1) MAILING ADDRESS 3392 Trabue Rd, Cols OH 43204

deposes and states 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) per ADDRESS CARD FOR PROPERTY 232 Blenheim Rd, Cols OH 43214
for which application for a rezoning, variance, special permit or graphics plan was filed with the Department of Building and Zoning Services, on (3)

(THIS LINE TO BE FILLED OUT BY CITY STAFF)

SUBJECT PROPERTY OWNERS NAME AND MAILING ADDRESS (4) Karrie Bantrager
232 Blenheim Rd
Cols OH 43214

APPLICANT'S NAME AND PHONE # (same as listed on front application) Robert Pomante 614-262-1112

AREA COMMISSION OR CIVIC GROUP AREA COMMISSION ZONING CHAIR OR CONTACT PERSON AND ADDRESS (5) Clintonville Area Commission
Matt Cull 614-795-3137
614-469-1882

and that the following 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:

Table with 3 columns: (6) PROPERTY OWNER NAME, (6a) PROPERTY ADDRESS, (6b) PROPERTY OWNER MAILING ADDRESS. Multiple empty rows for listing owners.

(7) Check here if listing additional property owners on a separate page. [checked]

(8) SIGNATURE OF AFFIANT [Signature]

Sworn to before me and signed in my presence this 8th day of August, in the year 2016

(9) SIGNATURE OF NOTARY PUBLIC [Signature] My Commission Expires 5-28-2017 Notary Seal Here

PLEASE NOTE: Incomplete information will result in the rejection of this submittal. Applications must be submitted by appointment. Call 614-645-4522 to schedule. Please make checks payable to the Columbus City Treasurer

Board of Zoning Adjustment Application

DEPARTMENT OF BUILDING AND ZONING SERVICES

757 Carolyn Avenue, Columbus, Ohio 43224 Phone: 614-645-7433 • www.bzs.columbus.gov

STATEMENT OF HARDSHIP

APPLICATION #

3307.09 Variances by Board.

- A. The Board of Zoning Adjustment shall have the power, upon application, to grant variances from the provisions and requirements of this Zoning Code... B. In granting a variance, the Board may impose such requirements and conditions... C. Nothing in this section shall be construed as authorizing the Board to affect changes in the Zoning Map...

I have read Section 3307.09, Variances by Board, and believe my application for relief from the requirements of the Zoning Code satisfies the four criteria for a variance in the following ways:

- I am pushing my garage back to allow for more usable green space
-I need additional storage in the attic of the garage and will have stairs for access to be able to carry items that are larger than a pull down staircase access

Signature of Applicant

[Handwritten signature]

Date

8/8/16

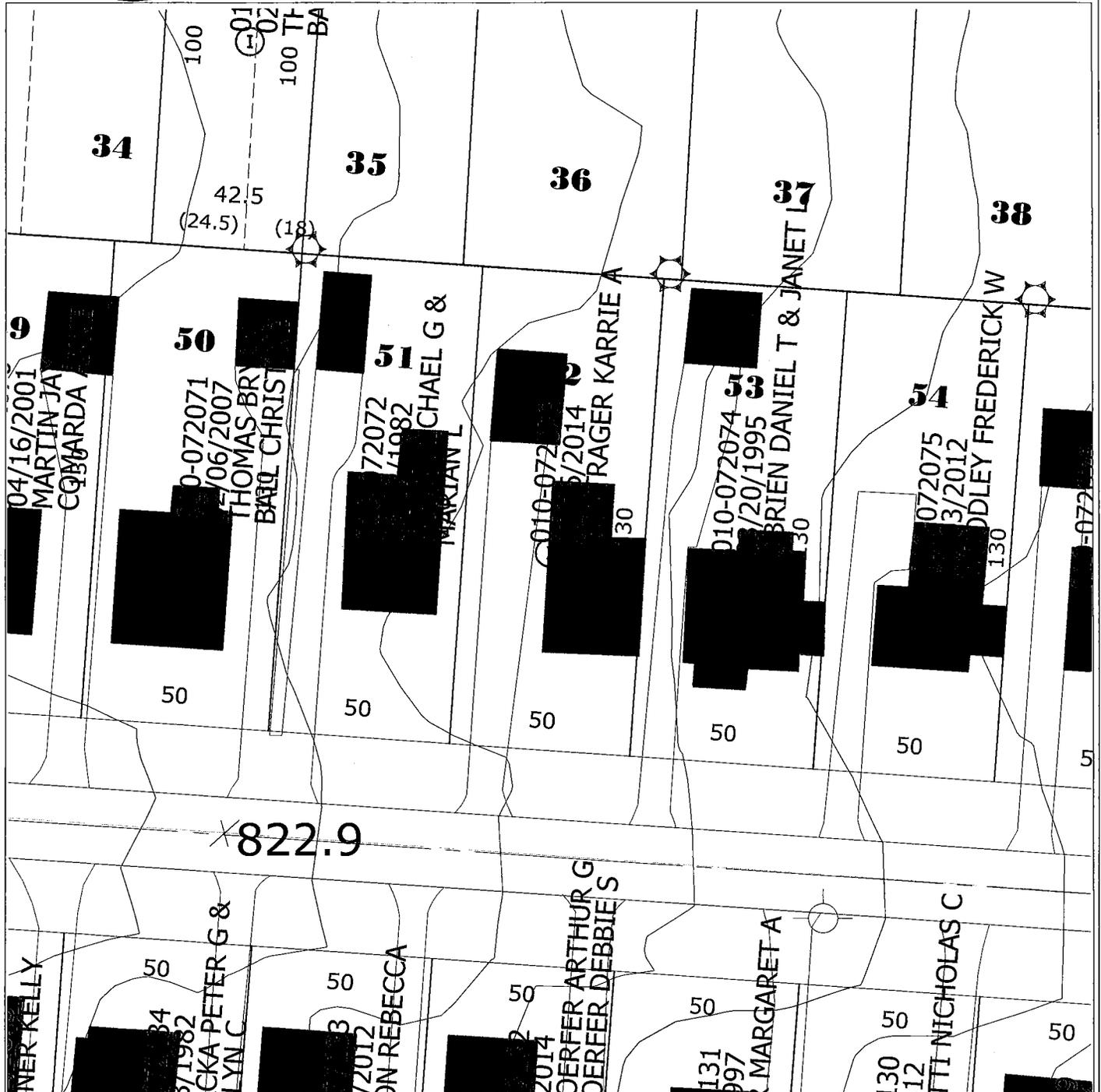
PLEASE NOTE: Incomplete information will result in the rejection of this submittal. Applications must be submitted by appointment. Call 614-645-4522 to schedule. Please make checks payable to the Columbus City Treasurer



CLARENCE E MINGO II FRANKLIN COUNTY AUDITOR

MAP ID: N

DATE: 8/11/16

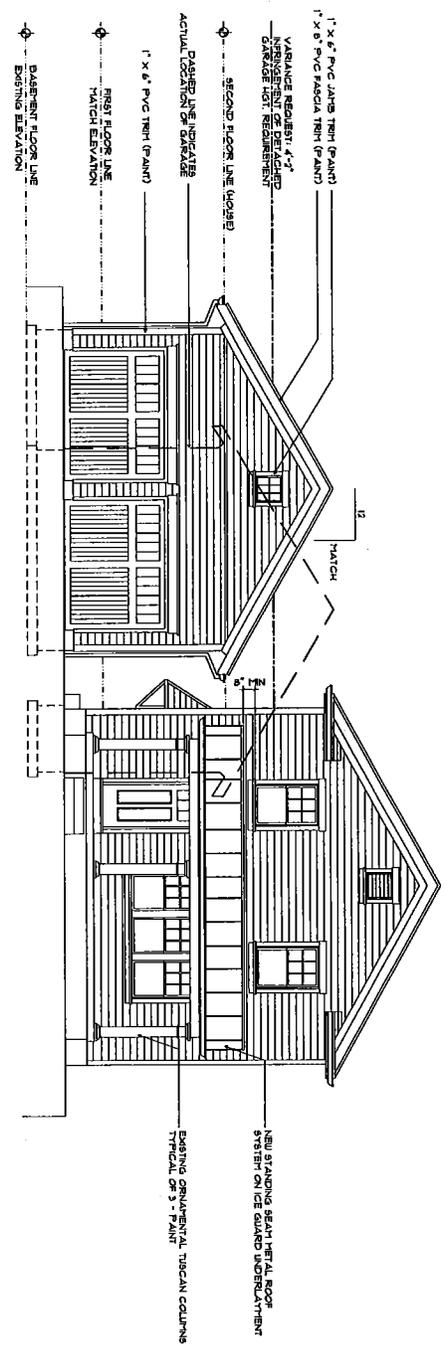


Disclaimer

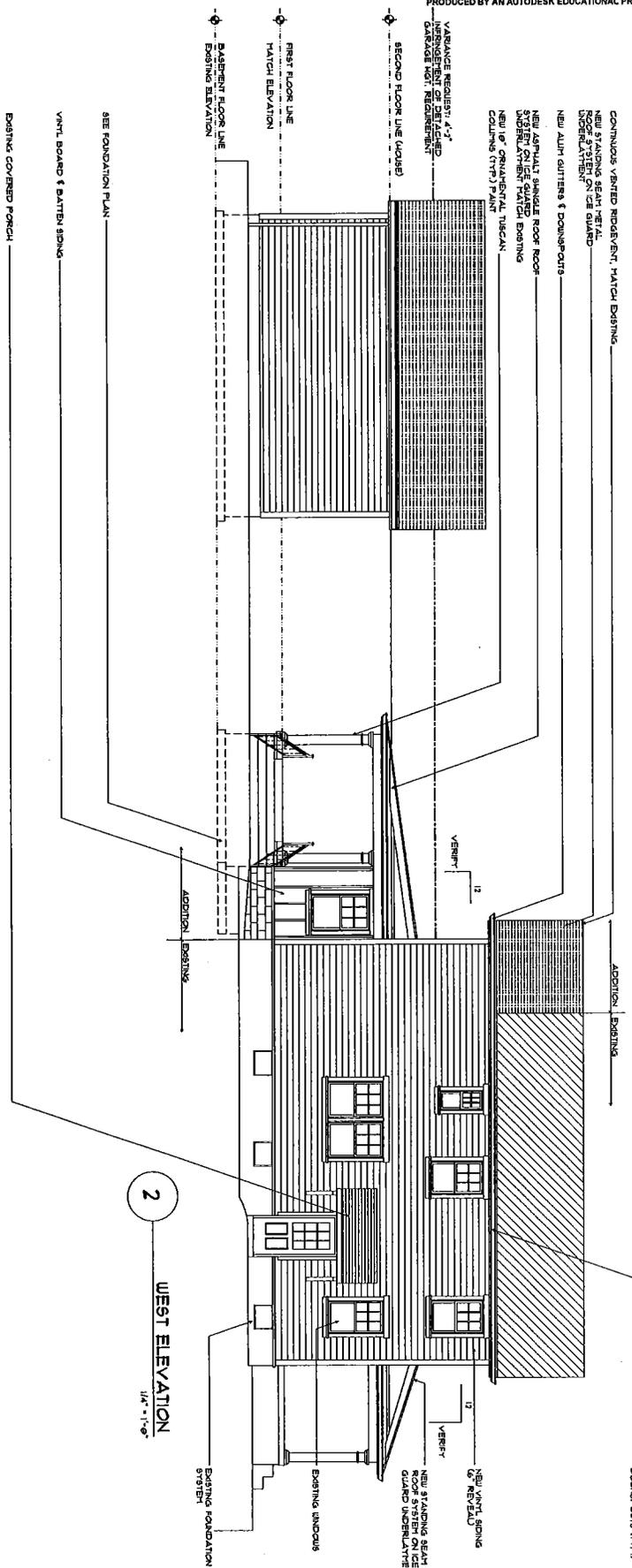
Scale = 40



This map is prepared for the real property inventory within this county. It is compiled from recorded deeds, survey plats, and other public records and data. Users of this map are notified that the public primary information sources should be consulted for verification of the information contained on this map. The county and the mapping companies assume no legal responsibilities for the information contained on this map. Please notify the Franklin County GIS Division of any discrepancies.



1 SOUTH ELEVATION
1/4" = 1'-0"



2 WEST ELEVATION
1/4" = 1'-0"

BONTRAGER RESIDENCE
232 BLENHEIM ROAD
COLUMBUS, OHIO

KEVIN S
HOFFMAN
ASSOCIATES
K S H
ARCHITECTS

COMPILED 1992
THE FOUNDING SPECIFICATIONS
OF THE ARCHITECTURAL BOARD
OF OHIO ARE HEREBY ACKNOWLEDGED
AND THE ARCHITECTS AND ARCHITECTS
ASSOCIATES OF OHIO ARE HEREBY
NOTIFIED OF THE ARCHITECTS
OFFICE OF THE ARCHITECTURAL BOARD
OF OHIO.

PREPARED BY
CONSULTANT
REVISIONS
DATE

EXTERIOR
ELEVATIONS NOTES

SHEET NO.
A401

PROJECT NO. KSH 1603

Board of Zoning Adjustment Application

757 Carolyn Avenue, Columbus, Ohio 43224
Phone: 614-645-7433 • www.bzs.columbus.gov

PROJECT DISCLOSURE STATEMENT

Parties having a 5% or more interest in the project that is the subject of this application.

THIS PAGE MUST BE FILLED OUT COMPLETELY AND NOTARIZED. Do not indicate 'NONE' in the space provided.

APPLICATION # _____

STATE OF OHIO
COUNTY OF FRANKLIN

Being first duly cautioned and sworn (NAME) _____
of (COMPLETE ADDRESS) _____

deposes and states that (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 and their mailing addresses:

NAME

COMPLETE MAILING ADDRESS

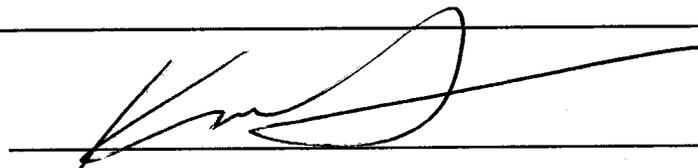
Karrie Bontrager

232 Blenheim Rd Columbus OH 43214

Pomante Contractors

3392 Trabue Rd Columbus OH 43204

SIGNATURE OF AFFIANT



Sworn to before me and signed in my presence this 8th day of August, in the year 2016


SIGNATURE OF NOTARY PUBLIC

5-28-2017
My Commission Expires

Notary Seal Here

PLEASE NOTE: Incomplete information will result in the rejection of this submittal.
Applications must be submitted by appointment. Call 614-645-4522 to schedule.
Please make checks payable to the Columbus City Treasurer