BZA16-179 2865 EAST 14TH AVE



DEPARTMENT OF DEVELOPMENT

Zoning Report

Site Information	
Address	2865 E FOURTEENTH AV
Mailing Address	2881 E 14TH AVE COLUMBUS OH 43219-2301
Owner	FLAHERTY J D JR
Parcel Number	010008013
In Columbus?	Yes
County	FRANKLIN

Zoning Information

Zoning	Z66-113, Manufacturing, M1, 12/14/1966, H-35
Historic District	None
Council Variance	None
Board of Zoning Adjustment (BZA) Variance	None
Commercial Overlay	None
Planning Overlay	I-670 Graphics Control
Graphics Variance	None
Area Commission	None
Historic Site	No
Flood Zone	Out
Airport Overlay Environs	Port Columbus International Airport

Pending Zoning Action

		 	 ······	 	
Zoning	None				
Board of Zoning Adjustment (BZA) Variance	None				
Council Variance	None				
Graphics Variance	None	 	 		

		B	ZA16-179
THE CITY OF COLUMBUS	Board of Zoning	Adjustment Appl	lication
onen ingen der sogel gegennen sinderen sind	757 Carolyn Avenue, Columbus, Ohio Phone: 614-645-7433 • www.bzs.colur	43224 nbus.gov	
Application Number: Application Accepted 1 Commission/Civic: Existing Zoning: Comments:		Date Received: Fee:	<u>16 Dec. 2016</u> 900
TYPE(S) OF ACTION REQU	UESTED (Check all that apply): rmit		
COLUMBUS A	nd list applicable code sections: B COMMERCIAL FBOFE 13219, ZOHING CODE LOADING SPACE		E. 14TH AVE.
LOCATION Certiñed Address: <u>2865</u>		City: COLUMBUE	3 <u>73219-230</u>
	ired): 010008012		
APPLICANT (If different fro Applicant Name:	ITE, WAGENENECHT Ph	one Number: <u>(014-917-71</u>	95 Ext.
	WEESTERN BD. NW Cit		0H_zip: 43110
	SS C. YAHOO, COM	Fax Number.	
PROPERTY OWNER(S) Name:	Check here if listing additional proper ERTYPh	ty owners on a separate page none Number: <u>(64' '(679' 56</u>	67_Ext:
Andress: 7.805 E.1	4TH AVE Cit	ty/State: COLUMPES, C	041. Zp. 43219-2301
Email Address: DPFC	CONSYSOHIO. COM	Fax Number: 64-2	52-2131
ATTORNEY/AGENT (Cher Name: KEITH E		10ne Number: <u>619 - 917 - 11</u>	<u>15 ext:</u>
Address: 7831 24511	WESTERN BD. NW CH	ty/State: CANAL WINCH	. <u>At zip: 43110</u>
Email Address: KEPWA	KG @ 4AHOO, COM	Fax Number:	
SIGNATURES (All signature	es must be provided and signed in blue ink)		
APPLICANT SIGNATURE	B. ATHADO		
PROPERTY OWNER SIGNAL	TURE The laser for		

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

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ATTORNEY / AGENT SIGNATURE

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COLUMBUS Board of Zoning Adjustment Application

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AFFIDAVIT	
STATE OF OHIO	·
COUNTY OF FRANKLIN	L'and to black the catt
Being first duly cautioned and sworn (1) NAME	KEATH E. WAGENENECHI
of (1) MAILING ADDRESS 7831 BACAL	
—	ent, 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	
	l permit or graphics plan was filed with the Department of Building and
Zoning Services, on (3)	INE TO BE FILLED OUT BY CITY STAFF)
SUBJECT PROPERTY OWNERS NAME	(4) VE FLAHEBITY
AND MAILING ADDRESS	28105 E. 19TH AVE.
	<u>COLUMBUS, OH 43219-2301</u>
	KEITLE INCEEDENE LET
APPLICANT'S NAME AND PHONE #	(N) Q17.7105
(same as listed on front application)	
AREA COMMISSION OR CIVIC GROUP	(5)
AREA COMMISSION ZONING CHAIR OR CONTACT PERSON AND ADDRESS	······································
OR CONTACT PERSON AND ADDRESS	
Att-the fillewing is a list of the manner and go	nplete mailing addresses, including zip codes, as shown on the County
	asprer's Mailing List, of all the owners of record of property within 125
	hich the application was filed, and all of the owners of any property within 125
	at the applicant or the property owner owns the property contiguous to the subject
	It me appread of the property owner owner on the property counterous to the publication
property: (6) PROPERTY OWNER NAME (6a) PRO	PERTY ADDRESS (6b) PROPERTY OWNER MAILING ADDRESS
(6) PROPERTI OWNER NAME (04) TRO	
(7) Check here if listing additional property own	ers on a separate page.
(8) SIGNATURE OF AFFIANT	Mr.
	12th day of December in the year 2016
Sworn to before me and signed in my presence this_	
1/2 / Comment	Notary Seal Here
(8) SIGNATURE OF NOTARY PUBLIC	My Compared and the Matthew Greenwood
	Notary Public, State of Ohio
· · · · · · · · · · · · · · · · · · ·	
PLEASE NOTE: Incomplete	e information will result in the pertion of this submittal.

Applications must be submitted by appointment. Call 614-642-4522 to schedule. Please make checks payable to the Columbus City Treasurer

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THE CITY OF COLUMBUS

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Board of Zoning Adjustment Application

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

STATEMENT OF HARDSHIP

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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 (except for those under the jurisdiction of the Graphics Commission and except for use variances under the jurisdiction of the Council). No variance shall be granted unless the Board finds that all of the following facts and conditions exist:
 - Special circumstances or conditions apply to the subject property that do not apply, generally, to other properties in the same zoning district.
 - 2. The special circumstances or conditions are not the result of the actions of the property owner or applicant.
 - 3. The special circumstances or conditions make it necessary that a variance br granted to preserve a substantial property right of the applicant which is possessed by owners of other property in the same zoning district.
 - 2. The grant of a variance will not be injurious to neighboring properties and will not be contrary to the public interest or the intent and purpose of this Zoning Code.
- B. In granting a variance, the Board may impose such requirements and conditions regarding the location, character, and other features of the proposed uses or structures as the Board deems necessary to carry out the intent and purpose of this Zoning Code and to otherwise safeguard public safety and welfare.
- C. Nothing in this section shall be construed as authorizing the Board to affect changes in the Zoning Map or to add to the uses permitted in any district.

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:

Date Signature of Applicant

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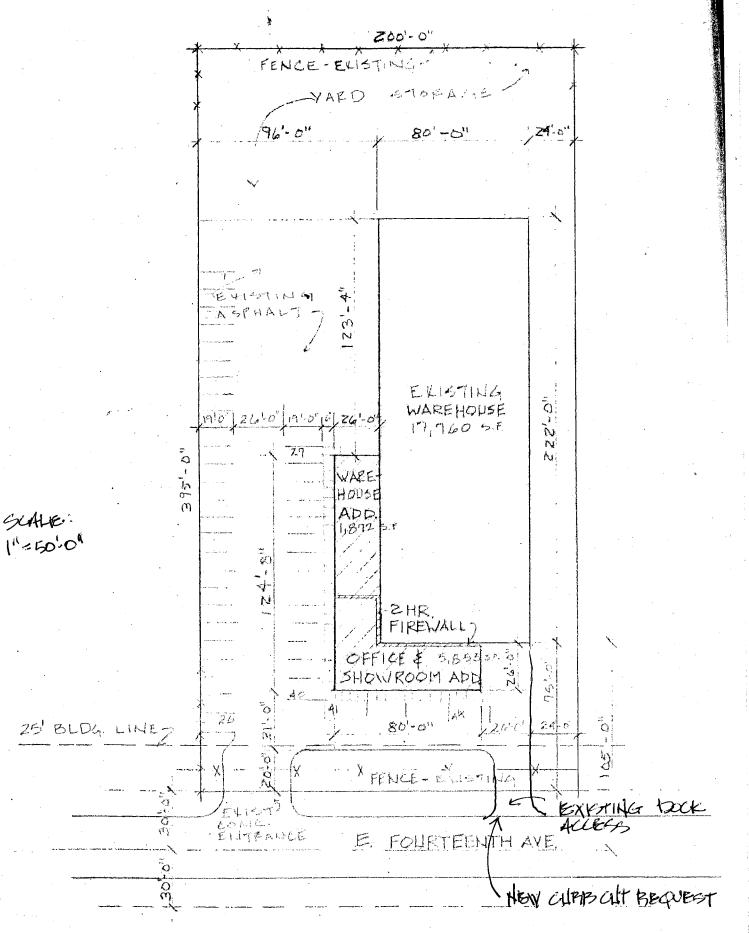
2865 EAST 14TH AVE CLARENCE E MINGO II FRANKLIN COUNTY AUDITOR MAP ID: S **DATE:** 12/14/16 46.23 393.85 ×812.5 AL ESTATE X812.6 V VDASS PARKING TER IN PB 42 pg 86 450.6 815.7 ×815.0 811.1 812.3 199.76 350 350 SERVICES 125.02 4n SUPPLY 엮 395.02 X813.3 NESTINE L 1 818 Ø j814 \$18 YE GES LLC 28 ×814.5 THIRTEENCH AVE <u>n-q</u> 40 Scale = 150Disclaimer Grid North 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.

Real Estate / GIS Department

BZA16-179

BZA16-179



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Board of Zoning Adjustment Application

nneterro e se se se A Brigger Bergiel 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) <u>FEATHER</u> WAGENERCHT of (COMPLETE ADDRESS) 78:31 FACIL (NEESTERN FRD, NW, CANAL WINCH, OH, 43110) 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
JO FLAHEBTY	28655 E. 14TH. AVE.
	COLUMBUS, OH. 43219-2301
	· · · · · · · · · · · · · · · · · · ·
SIGNATURE OF AFFLANT	w
Sworn to before me and signed in my presence this _/	IE A (D) (
	2ª day of December, in the year 2016
Malling	day of <i>December</i> , in the year <u>2016</u> Notary Seal Here
SIGNATURE OF NOTARY PUBLIC	

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