



BOARD OF ZONING ADJUSTMENT APPLICATION

City of Columbus, Ohio • Department of Building & Zoning Services
757 Carolyn Avenue, Columbus, Ohio 43224 • Phone: 614-645-7433 • www.columbus.gov

OFFICE USE ONLY

Application Number: #11310-00000-00501
Date Received: 6 SEP. 2011
Commission/Group: UAC/UARB
Existing Zoning: _____ Application Accepted by: AF Fee: \$1,900
Comments: _____

TYPE(S) OF ACTION REQUESTED

(Check all that apply)

Variance Special Permit

Indicate what the proposal is and list applicable code sections. State what it is you are requesting.

Propose to build expanded dining room/meeting space at existing sorority house. We request to increase the permitted floor area ratio to 83% and to allow the increase in square footage with no additional parking required beyond the existing 7 parking spaces.

Refer to Columbus Zoning Code sections 3312.53 and 3372.567(A)(c).

LOCATION

1. Certified Address Number and Street Name 200 East 17th Avenue
City Columbus State OH Zip 43201
Parcel Number (only one required) 010005450

APPLICANT: (IF DIFFERENT FROM OWNER)

Name Rowland Design (represented by Brent Roberts)
Address 701 East New York Street City/State Indianapolis, IN Zip 46202
Phone # 317-636-3980 Fax # 317-263-2073 Email broberts@rowlanddesign.com

PROPERTY OWNER(S):

Name Buckeyephi Corporation (represented by president Andrea Mindell)
Address 22130 Fairmount Boulevard City/State Shaker Heights, OH Zip 44118
Phone # 216-346-2473 Fax # _____ Email amindell@live.com
 Check here if listing additional property owners on a separate page.

ATTORNEY / AGENT (CHECK ONE IF APPLICABLE)

Attorney Agent

Name _____
Address _____ City/State _____ Zip _____
Phone # _____ Fax # _____ Email: _____

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.
For all questions regarding this form and fees please call: 614-645-4522
Please make all checks payable to the Columbus City Treasurer



CITY OF COLUMBUS

DEPARTMENT OF BUILDING AND ZONING SERVICE

One Stop Shop Zoning Report Date: Thu Sep 15 2011

Zoning General Inquiry: 614-645-8637

SITE INFORMATION

Address: 200 E 17TH AVE COLUMBUS OH 43201

Mailing Address: 420 W PATRICK ST

FREDERICK MD 21701

Owner: PHIA E INC

Parcel Number: 010005450

ZONING INFORMATION

Zoning: ORIG, Multi-family, AR4
effective 2/27/1928, Height District H-35

Council Variance: N/A

Board of Zoning Adjustment (BZA): N/A

Graphic Commission: N/A

Area Commission: University Area Commission

Planning Overlay: University/Impact

Historical District: N/A

Historical Site: No

Overlay: N/A

Flood Zone: OUT

Airport Noise Environ: N/A

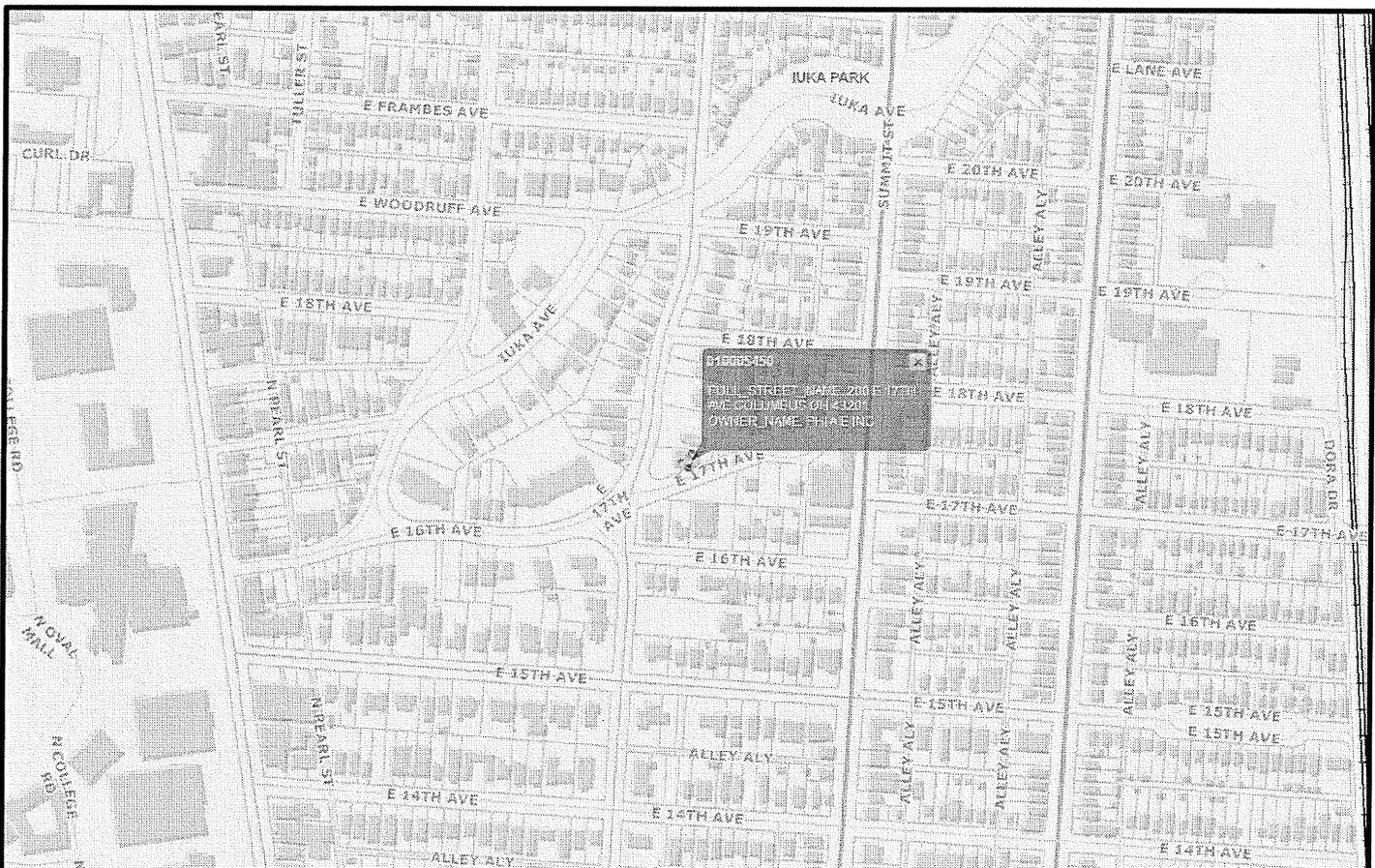
PENDING ZONING ACTION

Zoning: N/A

Board of Zoning Adjustment (BZA): N/A

Council Variance: N/A

Graphic Commission: N/A





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AFFIDAVIT

STATE OF OHIO
COUNTY OF FRANKLIN

Being first duly cautioned and sworn (1) NAME _____
of (1) MAILING ADDRESS _____

deposed 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 _____
for which the 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 (4) Buckeyephi Corporation
AND MAILING ADDRESS 22130 Fairmount Boulevard, Shaker Heights, OH 44118

APPLICANT'S NAME AND PHONE # (5) Brent Roberts 317-636-3980
(same as listed on front of application)

AREA COMMISSION OR CIVIC GROUP (5) UARB, Dan Ferdelman, 109 N. Front St., Columbus OH 43215
AREA COMMISSION ZONING CHAIR OR UAC Zoning Committee, Susan Keeny, 358 King Ave, Columbus, OH 43201
CONTACT PERSON AND ADDRESS _____

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:

(6) PROPERTY OWNER(S) NAME (6A) ADDRESS OF PROPERTY (6B) PROPERTY OWNER(S) MAILING ADDRESS

SEE ATTACHED PAGE

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

SIGNATURE OF AFFIANT (8) [Signature]
Subscribed to me in my presence and before me this 13TH day of SEPTEMBER, in the year 2011

SIGNATURE OF NOTARY PUBLIC (8) [Signature]
My Commission Expires: APRIL 13, 2019 ALICE M LANGRECK
STATE: INDIANA
COUNTY: MARION

Notary Seal Here

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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 (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:
 1. That special circumstances or conditions apply to the subject property that does not apply generally to other properties in the same zoning district.
 2. That the special circumstances or conditions are not the result of the actions of the property owner or applicant.
 3. That the special circumstances or conditions make it necessary that a variance be granted to preserve a substantial property right of the applicant which is possessed by owners of other property in the same zoning district.
 4. That 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 the 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:

The property at 200 East 17th Avenue is primarily characterized by its teardrop shape. The narrow end of the property abuts the alley and therefore serves as parking access. Due to the location of the existing structure, the narrow end allows 7 stacked parking spaces with no opportunity for additional. The teardrop shape of the property also affects the Floor Area Ratio. If the property were rectangular and had the same frontage on Indianola Avenue, the Floor Area Ratio would be reduced. Several neighboring properties do have rectangular lots with similar street frontage along Indianola Avenue.

The neighboring properties will not be affected by the variance because the addition does not increase the occupancy of the facility. As with all fraternities and sororities, the chapter hosts all members for meetings and dinners on a weekly basis. The proposed addition simply provides more space for an activity that has been occurring for many years.

Signature of Applicant _____ Date _____

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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
Buckeyephi Corporation	22130 Fairmount Boulevard, Shaker Heights, OH 44118

SIGNATURE OF AFFIANT

Subscribed to me in my presence and before me this 6th day of September, in the year 2011

SIGNATURE OF NOTARY PUBLIC

My Commission Expires:

4-25-14

Notary Seal Here

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