## 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 # ZOS-029 STATE OF OHIO COUNTY OF FRANKLIN Being first duly cautioned and sworn (NAME) John Schwarck of (COMPLETE ADDRESS) 6000 Riverside Drive, Dublin, Ohio 43017 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 Friendship Village of Dublin, Ohio, Inc. 6000 Riverside Drive Dublin, Ohio 43017 SIGNATURE OF AFFIANT Subscribed to me in my presence and before me this SIGNATURE OF NOTARY PUBLIC My Commission Expires: This Project Disclosure Statement experes RETINETAL STATE OF CHANGE AT LAW

NOTARY PUBLIC, STATE OF CHAO My commission has no expiration date Section 147.03 R.C. Notary Seal Here

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