

Council Variance Application

111 N Front Street, Columbus, Ohio 43215 DEPARTMENT OF BUILDING Phone: 614-645-4522 * ZoningInfo@columbus.gov * www.columbus.gov/bzs

STATEMENT OF HARDSHIP

Columbus City Code Section 3307.10 - Variances by City Council.

City council may grant the following zoning variances:

- A. Permit a variation in the yard, height or parking requirements of any district only in conjunction with a change in zoning or a use variance and only where there are unusual and practical difficulties in the carrying out of the zoning district provisions due to an irregular shape of lot, topography, or other conditions, providing such variance will not seriously affect any adjoining property or the general welfare.
- B. Permit a use of the property not permitted by the zoning district established on the property if such use will not adversely affect the surrounding property or surrounding neighborhood and if council is satisfied that the granting of such variance will alleviate some hardship or difficulty which warrants a variance from the comprehensive plan.

Before authorizing any variance from the Zoning Code in a specific case, city council shall first determine that such variance will not impair an adequate supply of light and air to the adjacent property, unreasonably increase the congestion of public streets, increase the danger of fires, endanger the public safety, unreasonably diminish or impair established property values within the surrounding area, or in any other respect impair the public health, safety, comfort, morals or welfare of the inhabitants of the city.

In granting a variance pursuant to this section, council may impose such requirements and conditions regarding the location, character, duration, and other features of the variance proposal as council deems necessary to carry out the intent and purpose of this Zoning Code and to otherwise safeguard the public safety and welfare.

List all sections of Code to be varied and explain your reasoning as to why this request should be granted.

PLEASE NOTE: It is the applicant's responsibility to identify all variances required for the project. If any necessary variances are not included, a new application (and applicable fees) will be required.

I have read the foregoing and believe my application for relief from the requirements of the Zoning Code contains the necessary hardship, will not adversely affect surrounding property owners, and will comply with the variance(s) requested as detailed below (use separate page if needed or desired):

| Signature of Applicant | Castin Galerio | Date | 2/16/24 |
|------------------------|----------------|------|---------|
| | 10 10 | | |

Statement of Hardship

Dear Council and Community Members:

My name is Cristian Tiburcio and I have been working as a type B childcare provider in this neighborhood for 8 years. I'm licensed by the Ohio department of Job and family services to care for up to six children between the ages of three months old to twelve years old (Type B license). I'm requesting that my residency be granted a variance to expand to a 12 children program (Type A license). This will enable me to offer high-quality services to more families in my community and employ more qualified staff to work with me. That team member's hiring process will be comprehensive and conducted by me with the Ohio Department of Job and Family Services.

My program supports and celebrates diversity and inclusion where families from different backgrounds can rely on the safe services I provide. The expansion of the licensed children care program will allow me to support more parents/guardians with the ability to work and to know their child/children are being taken of in a high—quality, safe, nurturing, and loving environment. The staff members will support the community by reducing the unemployment rate of quality childcare workers.

By approving this request, it would not adversely impact my neighbors or the community. With the expansion, the program will continue not affecting air or light to the adjacent properties. There should not be additional congestion of public roads as result of granting my request since families already use public roads daily and some are within walking distance.

Zoning Variances for this Project:

3332.029 - SR, suburban residential district

Request a variance to permit a Type A Home Childcare facility for a maximum of twelve children within an existing unit dwelling.

3312.49 Required Parking

Request a variance from 6 required parking spaces to 2 parking spaces.

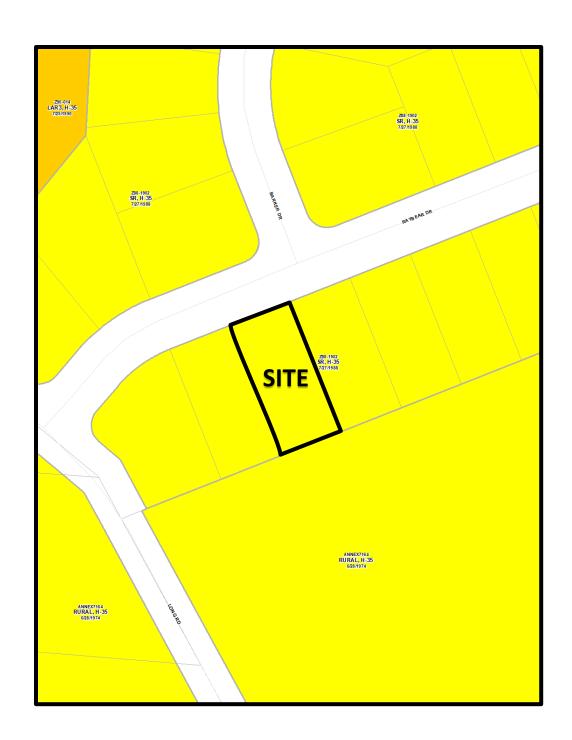
Thank you so much for your support in this matter

Cristian Tiburcio

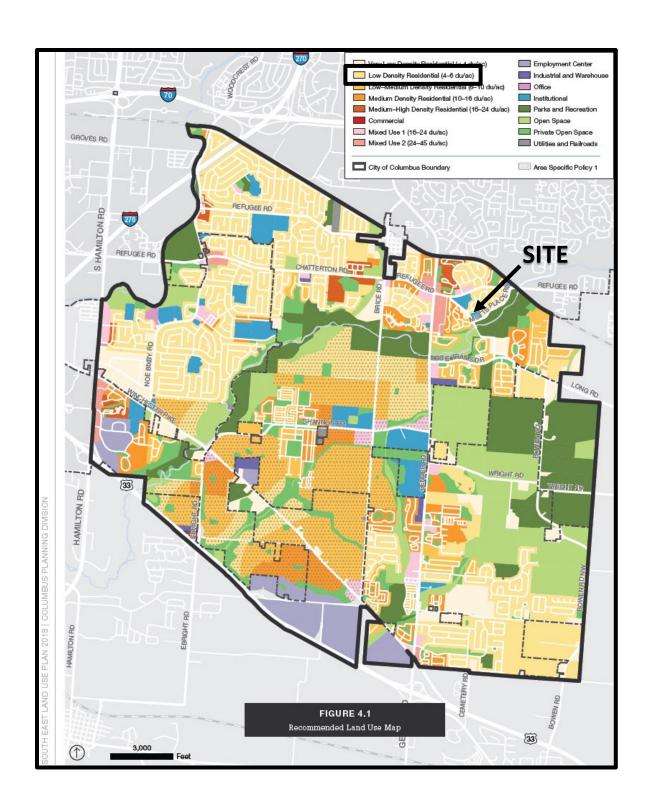
6779 Ray Bear DR

Canal Winchester

Ohio 43110



CV24-019 6779 Raybear Dr. Approximately 0.18 acres



CV24-019 6779 Raybear Dr. Approximately 0.18 acres



CV24-019 6779 Raybear Dr. Approximately 0.18 acres



Case Number

Address

DEPARTMENT OF BUILDING AND ZONING SERVICES

Standardized Recommendation Form

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FOR USE BY: AREA COMMISSION / NEIGHBORHOOD GROUP (PLEASE PRINT)

6779 RAYBEAR DRIVE

CV24-019

| Group Name | GREATER SOU | TH EAST AREA COMM | | |
|------------------------------------|---|---|-------------------|-------------------|
| Meeting Date | 4/23/2024 | | | |
| Specify Case Type | ✓ Council Varian☐ Rezoning | / Special Permit nce ance / Plan / Special Permit | `k ₁ ~ | |
| Recommendation (Check only one) | ☒ Approval☐ Disapproval | | | |
| LIST BASIS FOR RECO | MMENDATION: | | | 2 |
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| | | sheela 1 | absent | Diara Vietaria |
| | | Me) | \bigcirc | E 8 * |
| Vote | | 30 | | |
| Signature of Authorize | d Representative | - Vlast | Ul anec | -Chair |
| Recommending Group | Title | . 0 | Chair - | (- O |
| Daytime Phone Numbe | r | 619 | 1-658-16 | ,フ ひ |

Please e-mail this form to the assigned planner within 48 hours of meeting day; OR MAIL to: Zoning, City of Columbus, Department of Building & Zoning Services, 111 N Front Street, Columbus, Ohio 43215.



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AND ZONING SERVICES

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| TO THE SERVICES | |
|--|---|
| PROJECT DISCLOSURE STATEMENT | APPLICATION #: CV24-019 |
| Parties having a 5% or more interest in the project that is the sul | piect of this application. |
| | NOTARIZED. Do not indicate 'NONE' in the space provided. |
| THE PROPERTY OF THE PARTY IN TH | NOTATION DO NOT MANAGE TO THE SPACE PROTECTION |
| | |
| STATE OF OHIO COUNTY OF FRANKLIN | |
| Being first duly cautioned and sworn (NAME) Cristian Tibu | rcio |
| of (COMPLETE ADDRESS) 6779 Ray bear Dr Canal Wir | |
| | R DULY AUTHORIZED ATTORNEY FOR SAME and the following is |
| | naving a 5% or more interest in the project which is the subject of this |
| application in the following format: | |
| | |
| I . | Name of Business or individual (including contact name and number) |
| E | Business or individual's address; City, State, Zip Code |
| I I | Number of Columbus-based employees |
| 0 | Limited to 3 lines per box) |
| | |
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| Cristian Tiburcio | |
| 6779 Ray bear DR Canal Winchester Ohio 43110 | |
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| Check here if listing additional parties on a separate page. | |
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| IGNATURE OF AFFIANT ////WYWO'O WWW VOO | |
| worn to before me and signed in my presence thisda | ay of FEDNAN, in the year 2024 |
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| GNATURE OF NOTARY PUBLIC | My Commission Expires |
| | my Commission Expires |
| ASHLEY DOMINGUEZ NOTARY PUBLIC | |
| STATE OF OHIO | |
| Comm. Expires | |
| ASHLEY DOMINGUEZ NOTARY PUBLIC STATE OF OHIO Comm. Expires 08-12-2027 | |
| The Propert Discharge Statement armin | es six (6) months after date of notarization. |
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