PROJECT DISCLOSURE STATEMENT



THIS PAGE MUST BE FILLED OUT COMPLETELY AND NOTARIZED. Do not indicate 'NONE' in the space provided.	
STATE OF OHIO COUNTY OF FRANKLIN	APPLICATION # _ CVO4-018
Being first duly cautioned and sworn (NAME) of (COMPLETE ADDRESS) 37 5 50 deposes and states that (he/she) is the APPLICAN is a list of all persons, other partnerships, corpor subject of this application and their mailing address.	NT, AGENT or DULY AUTHORIZED ATTORNEY FOR SAME and the following rations or entities having a 5% or more interest in the project which is the
NAME COM	IPLETE MAILING ADDRESS
TOAN WEGAN ?	37 E. BRUADINGY AND
	MOSTERVICLE OF 43081
CHAPLES SANTER	1330 Mc (og RD
	(ornuisa) OH 43930
-	
444	
-	
	\wedge
SIGNATURE OF AFFIANT	
Subscribed to me in my presence and before me	this $\sqrt{30}$ day of April , in the year 2004
SIGNATURE OF NOTARY PUBLIC	V. M.
My Commission Expires:	
This Project Disclosure Staten	nent expires six months after date of notarization.
Notary Seal Here	James V. Manlace, Atty. At Law Notary Public State of Ohio
	My Commission Has No Explication SECTION 147 60 addition

page 8 — Council Variance Packet