



FOR USE BY: AREA COMMISSION / COMMUNITY GROUP / HISTORIC ARCHITECTURAL REVIEW  
**STANDARDIZED RECOMMENDATION FORM**

Group Name Westland Area Commission

Meeting Date April 20, 2005

- Specify Case Type
- BZA Variance
  - BZA Special Permit
  - Council Variance
  - Rezoning
  - Graphics
  - Graphics Special Permit

Case Number 202-034A + CV05-019

- Recommendation (Check only one)
- Approval
  - Disapproval
  - Conditional Approval (please list conditions below)  
(Area Commissions, see note below\*)

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\*Ordinances sent to council will contain only a recommendation for "approval" or "disapproval". If a recommendation for "conditional approval" is sent, the conditions should be concise and specific. Staff will determine whether conditions are met when the final ordinance is prepared unless a revised response indicating "approval" has been received. If staff determines that conditions have not been met, your group's recommendation will be listed as "disapproval".

Vote 14-1

Signature of Authorized Representative [Signature]

SIGNATURE  
Chairman  
RECOMMENDING GROUP TITLE

644-9159  
DAYTIME PHONE NUMBER

Please FAX this form to Zoning at (614) 645-2463 within 48 hours of your meeting day,  
OR MAIL to Zoning, City of Columbus, Building Services Division, 757 Carolyn Avenue, Columbus, Ohio 43224