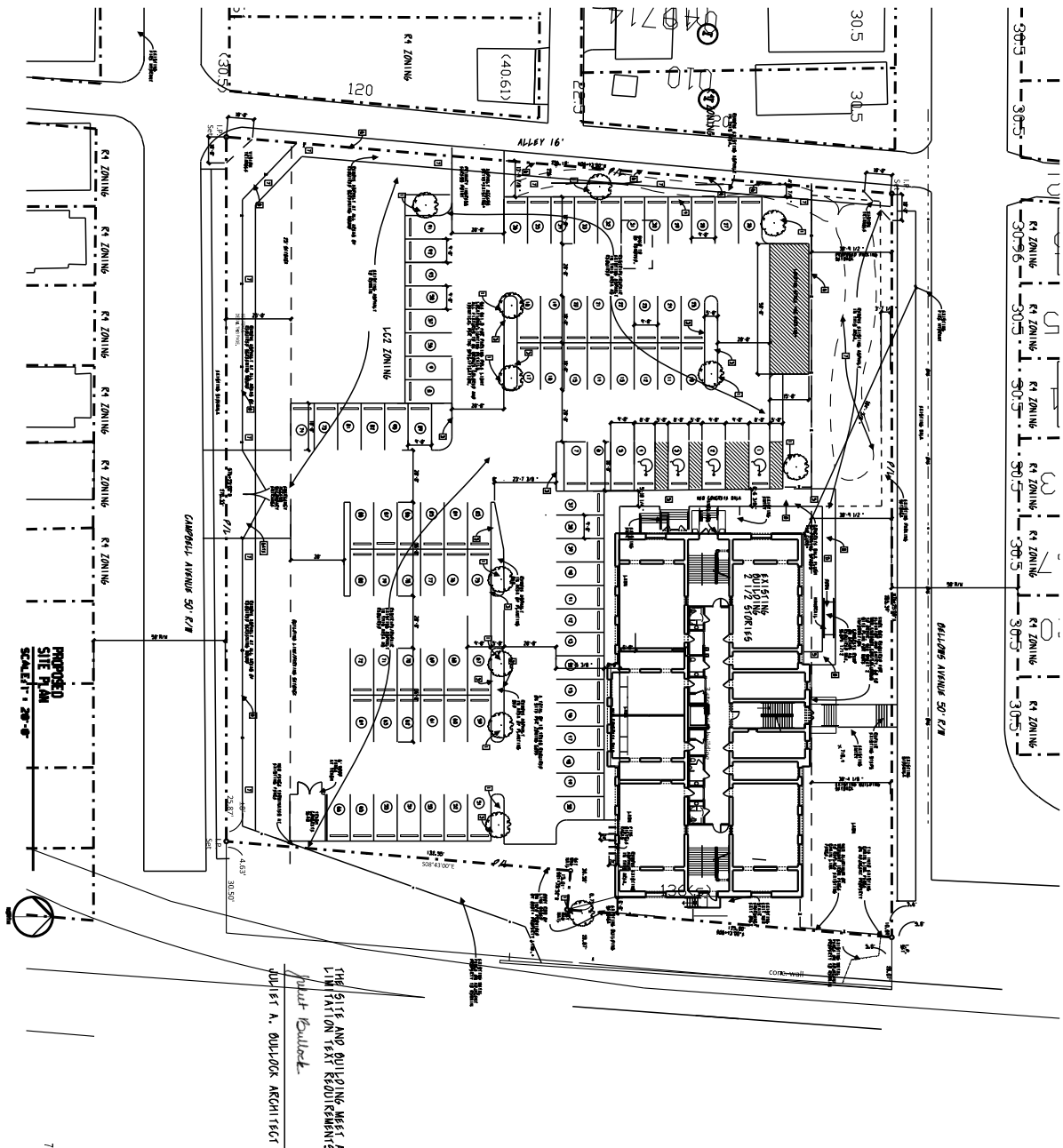
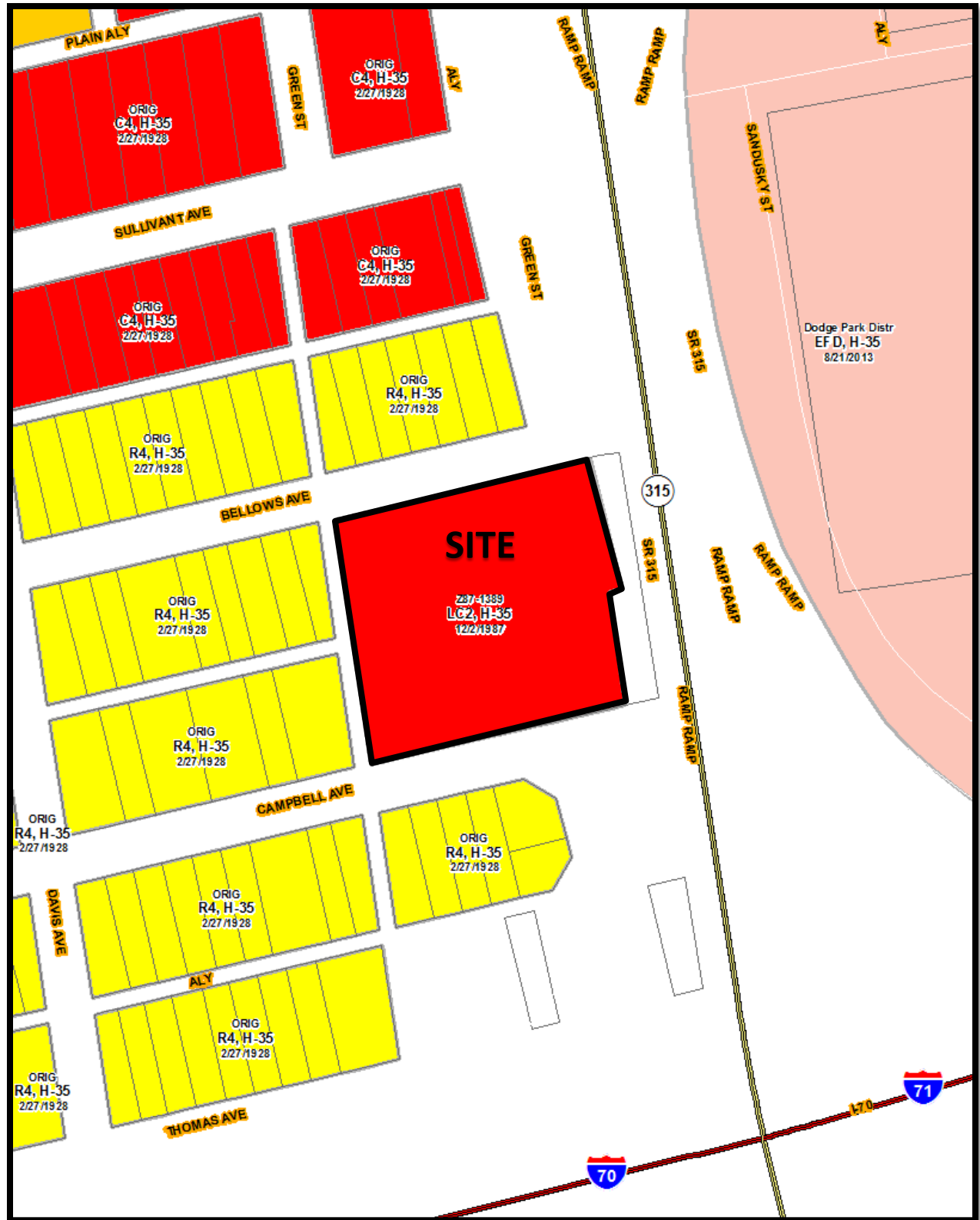


JULIE BULLOCK ARCHITECTS
1182 WYANDOTTE RD
COLUMBUS OH 43212
614.855.0944

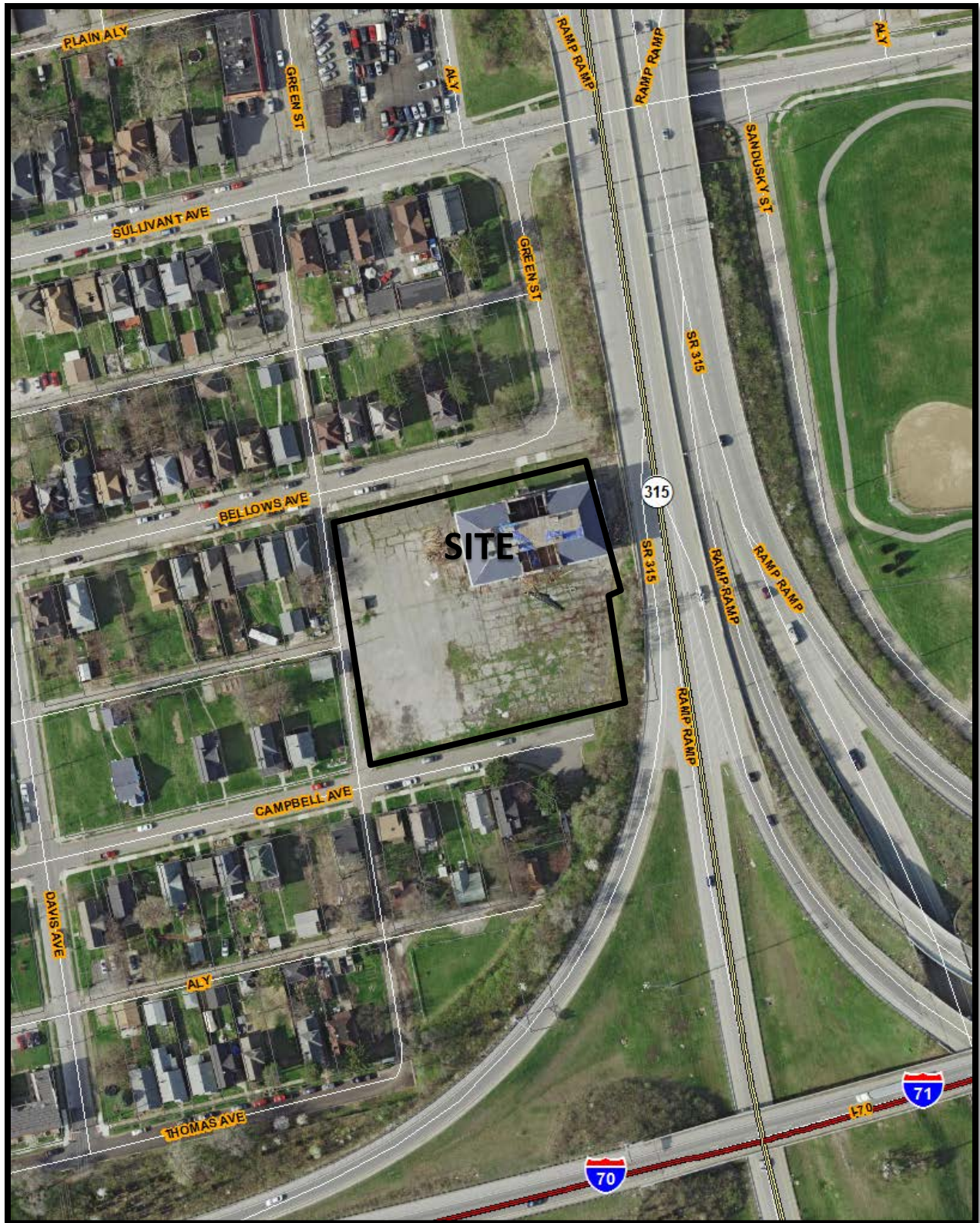


Z87-1389A Final Received 7/17/2019

7/17/19
725 Bellows Avenue
Columbus Ohio

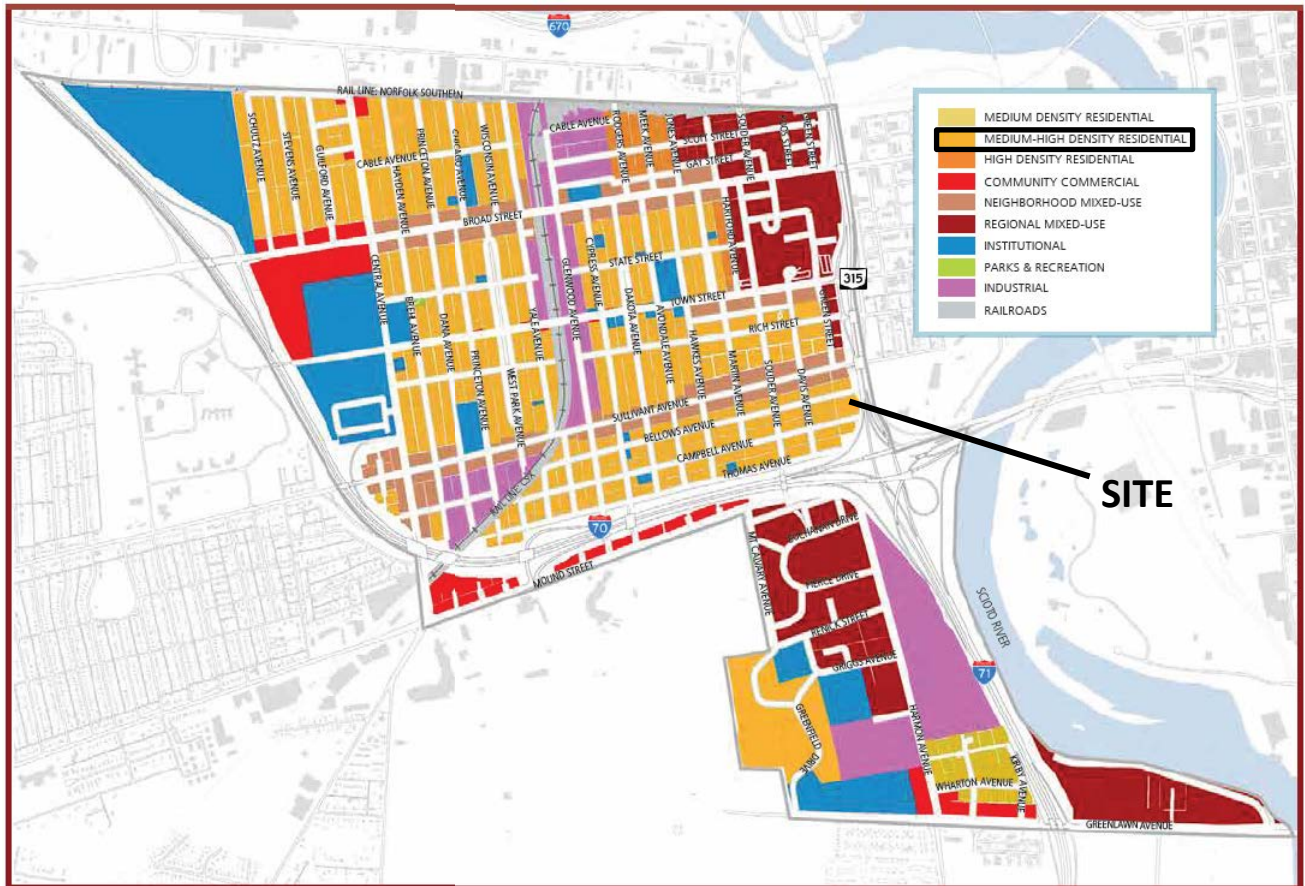


Z87-1389A
725 Bellows Ave.
Approximately 1.63 acres
L-C-2



Z87-1389A
725 Bellows Ave.
Approximately 1.63 acres
L-C-2

West Franklinton Plan (2014)



Z87-1389A
725 Bellows Ave.
Approximately 1.63 acres

FOR USE BY: AREA COMMISSION / COMMUNITY GROUP / HISTORIC ARCHITECTURAL REVIEW
(PLEASE PRINT)

Case Number:

ZA 19-006 (Z87-1389A)

Address:

725 Bellows Ave

Group Name:

Fran/Clinton Area Commission

Meeting Date:

Sept 10, 2019

Specify Case Type:

- ☐ BZA Variance / Special Permit
☐ Council Variance
☒ Rezoning
☐ Graphics Variance / Plan / Special Permit

Recommendation:

(Check only one and list basis
for recommendation below)

- ☒ Approval
☐ Disapproval

NOTES:

Approved As Presented

Vote:

15 yes 1 no 1 ABSTAIN

Signature of Authorized Representative:

William B. Warner

SIGNATURE

Zoning Chair

RECOMMENDING GROUP TITLE

614-581-6419

DAYTIME PHONE NUMBER

Please e-mail this form to the assigned planner within 48 hours of your meeting day; or FAX to Zoning at 614-645-2463; or MAIL to: Assigned Planner, City of Columbus, Department of Building & Zoning Services, 111 N. Front St, Columbus, OH 43215.



Council Variance Application

111 North Front Street, Columbus, Ohio 43215

Phone: 614-645-4522 • www.columbus.gov • zoninginfo@columbus.gov

PROJECT DISCLOSURE STATEMENT

All parties having a 5% or more interest in the project that is the subject of this application should be listed.

THIS PAGE MUST BE FILLED OUT COMPLETELY AND NOTARIZED. Do not indicate 'NONE' in the space provided.APPLICATION #: 287-1389ASTATE OF OHIO
COUNTY OF FRANKLIN

Being first duly cautioned and sworn (NAME) Yhekijel Levi
 of (COMPLETE ADDRESS) 139 E. Main St Ste 103 Columbus, Ohio 43215
 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 in the following format:

Name of business or individual (include contact name and number)
 Business or individual's address
 City, State, Zip Code
 Number of Columbus based employees
 (Limited to 4 lines per box)

1. <u>Yhekijel Levi</u> <u>139 E Main St Ste 103</u> <u>Columbus, Ohio 43215</u>	2.
3.	4.

☐ Check here if listing additional parties on a separate page.

SIGNATURE OF AFFIANT

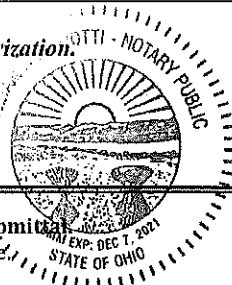
Subscribed to me in my presence and before me this 16th day of July, in the year 2019

SIGNATURE OF NOTARY PUBLIC

My Commission Expires:

12/07/2021*This Project Disclosure Statement expires six months after date of notarization.*

Notary Seal Here



PLEASE NOTE: Incomplete information will result in the rejection of this submission.
 Applications must be submitted by appointment. Call 614-645-4522 to schedule.
 Please make all checks payable to the Columbus City Treasurer