



City of Hilliard
 3800 Municipal Way
 Hilliard, Ohio 43026
 Telephone (614) 876-7361
 Fax: (614) 529-6017
 www.hilliardohio.gov

APPLICATION #

2015 LEVEL "A" SITE PLAN APPLICATION

- a. Required application fee: \$100 (payable to City of Hilliard).
- b. One original complete application **with original signed and notarized property owner's signature.**
- c. **One copy** of all required plans to scale on paper not larger than 22-inch-by-34-inch.
- d. **One** reproducible **electronic copy** of all required plans to scale AND all application materials via compact disc (CD) media.
- e. Plot plan **to scale** showing property lines, easements, building footprint, and other information associated with the site.
- f. Legal description and all other documents required for the application.

LEVEL "A" SITE PLAN REQUIREMENTS:

ONE (1) SET OF PLANS TO SCALE on paper not larger than 22-inch-by-34-inch:

- a. The site and all land 500 feet beyond the boundaries
- b. North arrow and bar scale
- c. Existing conditions (Roads, buildings, vegetation, topography, jurisdictional boundaries, utilizes, etc.)
- d. Proposed Uses (Regional transportation system, densities, number of dwellings, building/unit types, square footages, parkland/open space, utilities, etc.)
- e. Existing zoning district boundaries
- f. Size of the site in acres/square feet
- g. All property lines, street rights-of-way, easements and other information related to the location of the proposed boundaries
- h. Landscape plan (tree preservation, tree replacement and table identify existing and proposed plant material including botanical name, common name, installation size, and spacing)
- i. All building elevations to scale (dimensions, material colors, roof pitch, mechanicals including ground-and-roofing mounted, etc.)
- j. Color rendering or color building elevations of proposed building or building addition
- k. Storm water management plan and grading plan (conceptual plans may satisfy this requirement)
- l. Site lighting plan (including location and types of fixtures and light sources)
- m. Signage (including existing and proposed sign location and elevation drawing in color)

ONE (1) sample board of exterior building material including colors name of manufacturer.

PROPERTY INFORMATION

Applicant/Business is known as:	Property Address:
Tax ID Number/District Parcel Number:	Parcel Size (Acres):
	Current Zoning District:
Property Location (if property address is not listed above):	
Specify Conditional Use or Describe Requested Review:	

FOR OFFICE USE ONLY		Date Received:
Amount Received:	Receipt Number:	

PROPERTY OWNER INFORMATION

Name of Current Property Owner(s) :		
Mailing Address (Street, City, State, Zip Code)		
Daytime Telephone Number:	Fax Number:	e-mail Address:

I. CONTACT INFORMATION FOR OWNER'S AUTHORIZED REPRESENTATIVE

Name of Contact Person (Ex. Attorney, Architect, etc.)		
Mailing Address (Street, City, State, Zip Code)		
Daytime Telephone Number:	Fax Number:	e-mail Address:

IV. AUTHORIZATION TO VISIT THE PROPERTY

Site visits to the property are necessary by City representatives in order to process this application. By completing and submitting this application, the Property Owner/Applicant hereby authorizes City representatives to visit, photograph, and post a notice on the property described in this application.

V. OWNER AUTHORIZATION FOR REPRESENTATIVE

I, _____, the Property Owner listed above, hereby authorize _____ to act as my representative and agent in all matters pertaining to the processing and approval of this application including modifying the project, and I agree to be bound by all representations and agreements made by the designated agent.	
Signature of Current Property Owner (listed above):	Date:
Subscribed and sworn to before me this ____ day of _____, 20____. Notary Public _____	

VI. APPLICANT'S AFFIDAVIT – (PLEASE PRINT)

STATE OF _____	COUNTY OF _____
I, _____, the applicant or the authorized representative, have read and understand the contents of this application. The information contained in this application, attached exhibits and other information submitted is complete and in all respects true and correct, to the best of my knowledge and belief.	
Signature of Applicant or Authorized Representative:	Date:
Subscribed and sworn to before me this ____ day of _____, 20____. Notary Public _____	