

Athens Township

Athens County, Ohio

APPLICATION FOR ZONING MAP AMENDMENT

Athens Township Zoning Resolution Article 13 and Ohio Revised Code §519.12, et seq.

Athens Township Zoning Resolution §13.02 (I) "...Amendments to the zoning resolution may be initiated by motion of the Township Zoning Commission, by the passage of a resolution by the Board of Township Trustees, or by the filing of an application by one or more of the owners or lessees of property within the area proposed to be changed or affected by the proposed amendment with the Township Zoning Commission..."

A **NON-REFUNDABLE** application fee of **one hundred fifty dollars (\$150.00)** is required to defray the cost of legal advertising, mailing of notification to affected adjacent property owners, filing any revised map with the Athens County Recorder, and other expenses incurred by Athens Township in the administration of the request.

Subject Address/Parcel ID #(s): A040240507400, A040240507400, A040240507300

Owner Name: Hopewell Health Centers, Inc., CEO Mark Bridenbaugh

Owner Address: 1049 Western Avenue P.O. Box 188 Chilicothe OH 45601
Street City State Zip code

Phone: (740) 773-1006 x2004 e-mail: mark.bridenbaugh@hopewellhealth.org

Applicant/Lessee Name (if different than Owner): RVC Architects, Inc.(applicant) contact: Colin Widdoes

Applicant/Lessee Address: 131 W. State St. Athens, OH 45701
Street City State Zip code

Phone: (740) 592-5615 e-mail: widdoes@rvcarchitects.com

Current Zoning district: (check one) R-1 R-2 R-3 B-1 B-2 LLR Current

land use: Open Space

Proposed Zoning district: (check one) R-1 R-2 R-3 B-1 B-2 LLR

Proposed land use: Business: Outpatient Health Clinic

APPLICATIONS FOR REZONING MUST CONTAIN THE FOLLOWING INFORMATION:

- 1. Signed and Completed Application, including all information required below.
- 2. Site plan drawn to scale illustrating:
 - a. Lot size/Acreage and parcel dimensions.
 - b. Location, size and current use of all existing buildings and structures (principal and accessory).
 - c. Location, size and proposed use of new buildings or structures (principal and accessory), if applicable.
- 3. **NON-REFUNDABLE** application fee of one hundred fifty dollars (\$150.00).

By my signature I hereby certify that the facts, statements, and information presented within this application and any documents attached hereto are accurate, true, and correct to the best of my knowledge and belief. I hereby understand and certify that any misrepresentation or omissions of any information required in this application may result in the application being delayed for review by Athens Township Zoning Commission. I hereby certify that I have read and fully understand all the information required in this application and all applicable requirements of the Athens Township Zoning Resolution.

Property Owner: Mark Bridenbaugh Signature Mark Bridenbaugh, CEO Printed Name 10-28-2021 Date

Applicant/Lessee: Colin Widdoes Signature Colin Widdoes, RVC Architects, Inc. Printed Name 10/20/21 Date
(if other than Owner)

RETURN APPLICATIONS TO THE OFFICE OF THE ATHENS TOWNSHIP BOARD OF TRUSTEES,
313 W. UNION STREET, ATHENS, OHIO 45701

FOR OFFICIAL USE ONLY

Application No: _____

Date received by Trustees: _____

Date forwarded to Zoning Commission: _____

Date forwarded to Athens County Regional Planning Commission for review: _____

Date of Athens County Regional Planning Commission recommendation: _____

Date of Zoning Commission hearing publication in newspaper: _____

Date notice sent to affected property owners: _____

Date of Zoning Commission Public Hearing: _____

Date of Zoning Commission recommendation to Trustees: _____

Date of Trustees hearing publication in newspaper: _____

Date of Trustees Public Hearing: _____

Date of Trustees decision: _____

Date of Owner or Lessee appeal to Athens County Court of Common Pleas (if applicable): _____

Date of citizen filing of referendum (if applicable): _____

Date of filing with Athens County Recorder: _____