

CITY OF BEXLEY UNIFIED PLANNING APPLICATION

Application Cover Sheet: Basic Project Information & Certification

Purpose of Application (check all that apply):

- Architectural Review Conditional Use Demolition Planned Unit Dev. Rezoning Special Permit

Property & Project Information:

Property Address:

Brief Project Description:

Applicant Information:

Applicant Name:

Applicant Address: , ,

Applicant Email & Phone:

Property Owner Information:

Owner Name:

Owner Address: , ,

Owner Email & Phone:

Attorney/Agent Information:

Agent Name:

Agent Address: , ,

Agent Email & Phone:

- Completed Worksheets:** Project Worksheet (Sheet A) Architectural Review (Sheet B) Tree Commission (Sheet C)

Signatures:

The attached application package is complete and accurate to the best of my knowledge. I understand that the City staff review of this application is dependent upon the accuracy of the information provided and that any inaccurate or inadequate information provided by me/my firm/etc. may delay review.

Applicant Signature: Date:

Owner Signature: Date:

Agent Signature: Date:

Internal Use:

Application #: Board Referrals: ARB BZAP City Council Tree Commission

Staff Signature: Date:

Application Cover Sheet: Review Fee Worksheet

Estimated Valuation of Project: \$ 1,200,000

Minor Architectural Review (Ex. Roof, window, siding)

Based upon the valuation of the project:

- \$50.00 for 1st \$10,000 valuation	\$	<input type="text"/>
- \$5.00 for each additional \$10,000 valuation.	\$	<input type="text"/>

Major Architectural Review (Ex. New Construction, Additions, Garages, Decks, Pergola)

Based upon the valuation of the project:

- \$90.00 for the 1st \$10,000 valuation	\$	<input type="text"/>
- \$5.00 for each additional \$10,000 valuation	\$	<input type="text"/>
- \$600.00 cap	\$	<u>600.00</u>
- \$50.00 resubmittal fee	\$	<input type="text"/>

Variance Review

Single Family:	\$100.00	\$	<input type="text"/>
Commercial Property:	\$100.00	\$	<u>100.00</u>
Fences or Special Permits:	\$65.00	\$	<input type="text"/>
All others:	\$90.00	\$	<input type="text"/>

Zoning Fees

Rezoning:	- \$250.00 up to 1 acre site	\$	<input type="text"/>
	- \$60.00 for each additional acre (or part thereof)	\$	<input type="text"/>
Requests for amendment to PUD Plans:	\$300.00	\$	<input type="text"/>
Split of lot or existing parcel:	\$250.00	\$	<input type="text"/>
Replatting or new plat:	\$250.00	\$	<input type="text"/>

Sign Review and Architectural Review for Commercial Properties

Project Value	Fee	\$	<input type="text"/>
\$0 to \$5,000	\$100.00	\$	<input type="text"/>
\$5,001 to \$25,000	\$200.00	\$	<input type="text"/>
\$25,001 to \$75,000	\$250.00	\$	<input type="text"/>
\$75,001 to \$200,000	\$600.00	\$	<input type="text"/>
\$200,001 to \$750,000	\$1,000.00	\$	<input type="text"/>
Over \$750,000	\$350.00	\$	<input type="text"/>
Fences and walls:	\$65.00	\$	<input type="text"/>
Special Permit, Conditional Uses and All others:	\$90.00	\$	<input type="text"/>
Re-submittal Fee:	\$50.00	\$	<input type="text"/>

Appeals

Appeal of ARB decision to BZAP:	\$50.00	\$	<input type="text"/>
Appeal of BZAP decision to City Council:	\$250.00	\$	<input type="text"/>

Fee Total: \$ 700.00

Project Worksheet

Residential Commercial

Property Address: 2106 E. Main Street, Bexley OH 43209

Zoning District: MUC

- R-1 (25% Building & 40% Overall)
- R-2 (25% Building & 50% Overall)
- R-3 (25% Building & 50% Overall)
- R-6 (35% Building & 60% Overall)
- R-12 (35% Building & 70% Overall)
- Other: MUC

** Overall coverage includes hardscape*

Lot Info: Width (ft.): 220 Depth (ft.): 150 Total Area (SF): 36,008

Primary Structure Info:

Existing Footprint (SF):	<input type="text"/>	
Proposed Addition (SF):	<input type="text"/>	
Removing (SF):	<input type="text"/>	(Type of Structure): IV B
Proposed new primary structure or residence (SF):	8,000	
Total Square Footage:	8,000	

Garage and/or Accessory Structure Info (Incl. Decks, Pergolas, etc):

Existing Footprint (SF):	<input type="text"/>	New Structure Type:	<input type="text"/>
Proposed Addition (SF):	<input type="text"/>	Ridge Height:	<input type="text"/>
Proposed New Structure (SF):	<input type="text"/>	Is there a 2nd floor?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Total of all garage and accessory structures (SF):	<input type="text"/>	2nd Floor SF:	<input type="text"/>
Total building lot coverage (SF):	<input type="text"/>	=	<input type="text"/> % of lot
Is this replacing an existing garage and/or accessory structure?	<input type="checkbox"/> Yes <input type="checkbox"/> No		

Hardscape:

Existing Driveway (SF):	<input type="text"/>	Existing Patio (SF):	<input type="text"/>	Existing Private Sidewalk (SF):	<input type="text"/>
Proposed Additional Hardscape (SF):	14,125				
Total Hardscape (SF):	<input type="text"/>				

Totals: Total overall lot coverage (SF): 22,125 = 61 % of lot

Applicant Initial: 

Internal Use:	Staff Review Date:	<input type="text"/>	<input type="checkbox"/> Meets Zoning	<input type="checkbox"/> ARB Only	<input type="checkbox"/> Variance or Modifications Needed
	Staff Comments:	<input style="width: 100%;" type="text"/>			Staff Initial: <input type="text"/>

Architectural Review Worksheet

Design changes involving window, siding, roof replacement projects, detached garages, accessory structure, and deck construction may be reviewed and approved by the Design Consultant and/or Zoning officer, if it meets all zoning code requirements and maintenance improvements conforming to the "SPECIFIC STANDARDS" in the Residential Review District Residential Design Guidelines. It may be directed to the Architectural Review Board or Board of Zoning and Planning for review and/or approval, if required by staff. Design approval is required in order to obtain a Building Permit. Work performed prior to an approval is subject to triple fees.

Please provide photos of the existing structure with this form

Please indicate the existing materials and the proposed changes of exterior materials to be used in the completion of your design project. Check all that apply in each category below:

Roofing House or Principal Structure Garage Only House & Garage

Existing Roof Type: Slate Clay Tile Wood Shake Std. 3-tab Asphalt Shingle
 Arch. Dimensional Shingles EPDM Rubber TPO Rubber Metal

New Roof Type: Slate Clay Tile Wood Shake Std. 3-tab Asphalt Shingle
 Arch. Dimensional Shingles EPDM Rubber TPO Rubber Metal

New Shingle Manufacturer:

New Roof Style & Color:

Windows House or Principal Structure Garage Only House & Garage

Existing Window Type: Casement Fixed Exterior Storm Other:
 Double Hung Awning Horizontal Sliding

Existing Window Materials: Aluminum Clad Wood Wood Metal
 Vinyl Clad Wood Aluminum Other:

New Window Manufacturer:

New Window Style/Mat./Color:

Doors House or Principal Structure Garage Only House & Garage

Existing Entrance Door Type: Wood Insulated Metal Fiberglass Sidelights Transom Windows

Existing Garage Door Type: Wood Insulated Metal Fiberglass

Door Finish: Stained Painted

Proposed Door Type: Style: Color:

Exterior Trim

Existing Door Trim: Cedar Redwood Pine Std. Lumber Profile
 Wood Composite Aluminum Clad Molding Vinyl Other:

Proposed New Door Trim:

Existing Window Trim: Wood Redwood Pine Std. Lumber Profile
 Vinyl Other:

Proposed New Window Trim: Trim Color(s):

Do the Proposed Changes Affect the Overhangs? Yes No

Architectural Review Worksheet (Continued)

Exterior Wall Finishes

Existing	Proposed	Type:	Manufacturer, Style, Color:
<input type="checkbox"/>	<input type="checkbox"/>	Natural Stone	
<input type="checkbox"/>	<input type="checkbox"/>	Cultured Stone	
<input type="checkbox"/>	<input type="checkbox"/>	Brick	
<input type="checkbox"/>	<input type="checkbox"/>	Mortar	
<input type="checkbox"/>	<input type="checkbox"/>	Stucco	
<input type="checkbox"/>	<input type="checkbox"/>	Wood Shingle	
<input type="checkbox"/>	<input checked="" type="checkbox"/>	Wood Siding	Ipe or similar
<input type="checkbox"/>	<input type="checkbox"/>	Vinyl Siding	
<input type="checkbox"/>	<input checked="" type="checkbox"/>	Aluminum Siding	Centria, Grey Velvet
<input type="checkbox"/>	<input checked="" type="checkbox"/>	Other	Bendheim Channel Glass

Staff Confirmation (to be completed by Residential Design Consultant):

Date of Review:

Approved By:

To be reviewed by ARB on:

Conditions/Stipulations:

Staff Initials: