

**SYCAMORE TOWNSHIP, OH**  
 DEPARTMENT OF PLANNING & ZONING  
 8540 KENWOOD ROAD, CINCINNATI, OH 45236  
 513.792.7250 PHONE 513.792.8571 FAX

(10) 11/11  
 DEPARTMENT OF PLANNING & ZONING  
 JUN 29 2014

ZONING COMMISSION APPLICATION			
<b>FEES:</b>			
ZONE CHANGE	\$1,000	MINOR ADJUSTMENT TO A PUD	\$200
PUD I	\$1,000	MAJOR ADJUSTMENT TO A PUD	\$1,000
PUD II	\$1,200	MINOR ADJUSTMENT TO LASR	\$200
LASR	\$1,000	MAJOR ADJUSTMENT TO LASR	\$1,000
THERE SHALL BE NO REFUND OR PART THEREOF ONCE PUBLIC NOTICE HAS BEEN GIVEN			

APPLICATION NUMBER
2014-07MA
DO NOT WRITE IN THIS SPACE

1. PROJECT ADDRESS: 8240 NORTH CREEK DR. ZIP CODE: 45236

2. NAME	STREET ADDRESS	CITY	ST	ZIP	PHONE NUMBER
OWNER <u>SCOTT STREET PARTNERS II-LLC.</u>	<u>P.O. BOX 36381</u>	<u>CINCINNATI</u>	<u>OH</u>	<u>45236</u>	<u>513-543-8888</u>
CONTRACTOR <u>OSWALD</u>	<u>8549 MONTGOMERY RD.</u>	<u>CINCINNATI</u>	<u>OH</u>	<u>45236</u>	<u>513-793-8080</u>
DESIGNER <u>MCGILL SMITH PUNSHON, INC.</u>	<u>3700 PARK 42 DR.</u>	<u>CINCINNATI</u>	<u>OH</u>	<u>45241</u>	<u>513-759-3208</u>
APPLICANT <u>SCOTT STREET PARTNERS II</u>	<u>P.O. BOX 36381</u>	<u>CINCINNATI</u>	<u>OH</u>	<u>45236</u>	<u>513-543-88</u>
APPLICANTS E-MAIL ADDRESS	<u>MJK@KUBIKI REAL ESTATE.COM</u>				

3. ZONING COMMISSION ACTION REQUESTED:

ZONE CHANGE  FROM ZONE \_\_\_\_\_ TO ZONE \_\_\_\_\_

PUD I  PUD II  LASR

MAJOR ADJUSTMENT TO A PUD  MINOR ADJUSTMENT TO A PUD

MAJOR ADJUSTMENT TO A LASR  MINOR ADJUSTMENT TO A LASR

4. STATE IN DETAIL ALL EXISTING & PROPOSED USES OF THIS BUILDING OR PREMISES:

EXISTING USE - OFFICE & MEDICAL OFFICE

PROP. USE - OFFICE & MEDICAL OFFICE

5. SQUARE FEET: N/A 6. USE: \_\_\_\_\_ 7. HEIGHT: \_\_\_\_\_

8. EST. START DATE: JULY 2014 9. EST. FINISH DATE: JULY 2015 10. # OF SIGNS: 10

THE DEPARTMENT OF PLANNING & ZONING IS DEDICATED TO THE CONTINUING PROSPERITY OF SYCAMORE TOWNSHIP. WE PROMOTE HIGH STANDARDS FOR DEVELOPMENT AND QUALITY PROJECTS. WE LOOK FORWARD TO SERVING OUR CITIZENS AND BUSINESS COMMUNITY TO MAKE SYCAMORE TOWNSHIP THE BEST IT CAN BE.

The owner of this project and undersigned do hereby certify that all of the information and statements given on this application, drawings and specifications are to the best of their knowledge, true and correct. The applicant and owner of the real property agree to grant Sycamore Township access to the property for review and inspection related to this Zoning Commission application.

**NOTE: FILING THIS APPLICATION DOES NOT CONSTITUTE PERMISSION TO BEGIN WORK.**

APPLICANT'S SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_

PROPERTY OWNER'S SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_