

Rezoning Application

DEPARTMENT OF BUILDING
AND ZONING SERVICES

111 N Front Street, Columbus, Ohio 43215
Phone: 614-645-4522 ▪ ZoningInfo@columbus.gov ▪ www.columbus.gov/bzs

OFFICE USE ONLY

Application Number: _____ Date Received: _____
Application Accepted by: _____ Fee: _____
Assigned Planner: _____

LOCATION AND ZONING REQUEST:

Existing Address or Zoning Number: _____ Zip: _____

Is this application being annexed into the City of Columbus? YES NO (select one)
If the site is currently pending annexation, the Applicant must show documentation of County Commissioner's adoption of the annexation petition.

Parcel Number for Address or Zoning Number: _____

Check here if listing additional parcel numbers on a separate page.

Current Zoning District(s): _____ Requested Zoning District(s): _____

Neighborhood Group: _____

Proposed Use or reason for request: _____

Proposed Height District: _____ Acreage: _____
(Columbus City Code Section 3309.14)

APPLICANT:

Applicant Name: _____ Phone Number: _____ Ext.: _____

Address: _____ City/State: _____ Zip: _____

Email Address: _____

PROPERTY OWNER(S): *Check here if listing additional property owners on a separate page*

Name: _____ Phone Number: _____ Ext.: _____

Address: _____ City/State: _____ Zip: _____

Email Address: _____

ATTORNEY / AGENT: *(Check one if applicable)* Attorney Agent

Name: _____ Phone Number: _____ Ext.: _____

Address: _____ City/State: _____ Zip: _____

Email Address: _____

SIGNATURES:

APPLICANT SIGNATURE _____

PROPERTY OWNER SIGNATURE _____

ATTORNEY / AGENT SIGNATURE _____

My signature attests to the fact that 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 the review of this application.

REZONING APPLICATION CHECKLIST

The application package must consist of all applicable items listed below (except for fees), submitted as a single digital PDF document (in addition to any MS Word document(s) as required below). Do not include checklist, instruction pages, etc.

The Application Form

Notarized Affidavit Form and Label Sets (See full instructions on form; some are provided here)

- The "Proximity Report" listing the surrounding property owners can be obtained at the Franklin County Auditor's office. Similar reports can also be obtained on the applicable County Auditor website.
 - From the Franklin County Auditor's website, after having opened the subject property record, select the Mapping page and run a 125-foot Buffer Search around the property (including contiguously-owned property), and generate the Proximity Report to obtain an Excel list of surrounding property owners.
- The mailing labels are emailed with the application as an Avery #5160 formatted Word document. This document can serve as the "Proximity Report" referred to on page 4.

Notarized Project Disclosure Statement (See instructions on form)

Zoning Number (required only for property that does not already have an existing address):

A Zoning Number can be obtained by contacting BZS-GIS@columbus.gov.

Legal Description of the Subject Property:

Current property survey to include acreage of the subject property and all metes and bounds, referencing the centerline intersection of two public streets. If more than one zoning district or multiple sub-areas are requested in this application, separate legal descriptions must be submitted for each district and/or sub-area. All legal descriptions must be submitted as a digital MS Word document left justified, no indentations, in Times New Roman font, size 11.

Limitation / CPD / PUD Text:

All rezoning requests to Limited Overlay (L-C-4, L-AR-12, etc.) CPD, Commercial Planned Development, or PUD, Planned Unit Development Districts must include Limitation Overlay, CPD, or PUD Text. All texts must be submitted in a digital MS Word document left justified, no indentations, in Times New Roman font, size 11.

Site Plan (required for CPD, PUD, and Limited zoning districts committing to a plan):

Site plans must be drawn to Engineer's scale and provide applicable information as itemized on the Zoning Review Checklist Form or Site Plan Information Required for 1-2-and-3-unit Form available at www.columbus.gov/bzs. All plans must be submitted in digital PDF format.

Approved Annexation Petition from County:

A copy of the approved annexation petition is required for properties that are in annexation status at time of application.

Application Fees (Non-Refundable):

Online payment instructions will be provided after submittal. Checks are to be made payable to: Columbus City Treasurer

- 1-4 Dwelling Units \$350 per unit
- All other zoning districts \$3,000 for rezoning of the first acre, plus \$300 for each additional acre or fraction thereof (Maximum Fee: \$15,000)
- Rezoning amendment ordinance fee is the same as the applicable rezoning fee

Development Commission Tabled Application fees:

- 1-4 Dwelling Units \$150 per tabling
- All Others: \$400 per tabling

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AFFIDAVIT

STATE OF OHIO
COUNTY OF FRANKLIN

Being first duly cautioned and sworn **(1)** NAME _____
of **(1)** MAILING ADDRESS _____

deposes and states that they are the applicant, agent, or duly authorized attorney for same and the following is a list of the name(s) and mailing address(es) of all the owners of record of the property located at

(2) per PROPERTY ADDRESS or ZONING NUMBER _____

for which application for a rezoning, variance, special permit or graphics plan was filed with the Department of Building and Zoning Services

SUBJECT PROPERTY OWNER'S NAME **(3)** _____
AND MAILING ADDRESS _____

Check here if listing additional property owners on a separate page. _____

APPLICANT'S NAME AND PHONE # _____
(same as listed on front application) _____

NEIGHBORHOOD GROUP **(4)** _____
ZONING CHAIR OR CONTACT PERSON _____
AND EMAIL ADDRESS _____

and that the attached document **(5)** is a list of the **names** and **complete mailing addresses**, including **zip codes**, as shown on the **County Auditor's Current Tax List or the County Treasurer's Mailing List**, of all the **owners of record of property within 125 feet** of the exterior boundaries of the property for which the application was filed, **and** all of the owners of any property within 125 feet of the applicant's or owner's property in the event the applicant or the property owner owns the property contiguous to the subject property.

SIGNATURE OF AFFIANT _____

Sworn to before me and signed in my presence this _____ day of _____, in the year _____

Notary Seal Here

(6) SIGNATURE OF NOTARY PUBLIC

My Commission Expires

This Affidavit expires six (6) months after date of notarization.

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INSTRUCTIONS FOR AFFIDAVIT

- (1) Name and address of the person who did the research. It is important that the person who does the research is the same person who signs the notarized affidavit.
- (2) Address of the subject site or zoning number assigned by the Department of Building & Zoning Services, Map Room; Email: bzs-gis@columbus.gov
- (3) From real property records of applicable County Auditor or other applicable government records, such as the County Auditor website: enter the name and mailing address of the owner(s) of the subject property (this must be the same as the "Property Owners" shown on the application).
- (4) Fill in the appropriate Neighborhood Group and complete contact information. Go to CbusAreaCommissions.org to identify the Area Commission and, for areas not served by one, use gis.columbus.gov/one. Then, contact the Department of Neighborhoods at 614-645-1993 or the assigned Neighborhood Liaison to confirm this information.
- (5) A "Proximity Report" listing the surrounding property owners can be obtained from the applicable County Auditor. This list shall include properties across the street and in other municipalities and jurisdictions, if applicable. From the Franklin County Auditor's website, after having opened the subject property record, select the Mapping page and run a 125-foot Buffer Search around the property (including contiguously-owned property), and generate the Proximity Report to obtain an Excel list of surrounding property owners.
 - (5a) It is the affiant's responsibility to determine the actual address, including personally visiting the properties, if necessary.
 - (5b) DO NOT list a mortgage company as a mailing address** for the property unless title to the property is held by the mortgage company, thereby making the company the actual property owner. It is the affiant's responsibility to exercise reasonable diligence to determine the address of the actual property owner.
 - (5c) For owner-occupied dwelling units, also include "or Current Occupant" after the owner(s) name.
 - (5d) If property owners appear on the list more than once, provide only one mailing label.
 - (5e) Submit an MS Word document in Avery #5160 format, emailed to staff with the application, listing the names and complete addresses of the applicant; property owner(s); agent; applicable Area Commission or Neighborhood Group; and surrounding real property owners as explained in (5) above. Make sure that the last two lines of the address label contain the street address and the city, state, and zip code.**
- (6) This Affidavit form must be signed in the presence of a Notary Public. The Affidavit expires six (6) months after date of notarization.

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PROJECT DISCLOSURE STATEMENT

APPLICATION #: _____

Parties having a 5% or more interest in the project that is the subject of this application.

THIS PAGE MUST BE FILLED OUT COMPLETELY AND NOTARIZED. Do not indicate 'NONE' in the space provided.

STATE OF OHIO
 COUNTY OF FRANKLIN

Being first duly cautioned and sworn (NAME) _____
 of (COMPLETE ADDRESS) _____

deposes and states that they are 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:

For Example: Name of Business or individual
 Contact name and number
 Business or individual's address; City, State, Zip Code
 Number of Columbus-based employees

1.	2.
3.	4.

Check here if listing additional parties on a separate page.

SIGNATURE OF AFFIANT _____

Sworn to before me and signed in my presence this _____ day of _____, in the year _____

Notary Seal Here

 SIGNATURE OF NOTARY PUBLIC

 My Commission Expires

This Project Disclosure Statement expires six (6) months after date of notarization.

SUBMITTAL DEADLINE SCHEDULE

SUBMITTAL CUT-OFF*

January 23, 2024

February 27, 2024

March 26, 2024

April 23, 2024

May 28, 2024

June 25, 2024

July 23, 2024

August 27, 2024

September 24, 2024

October 22, 2024

November 26, 2024

December 24, 2024

January 28, 2025

STAFF REVIEW DATE**

February 15, 2024

March 21, 2024

April 18, 2024

May 16, 2024

June 20, 2024

July 18, 2024

August 15, 2024

September 19, 2024

October 17, 2024

November 21, 2024

December 19, 2024

January 16, 2025

February 20, 2025

*FOR ACCELERATED RESIDENTIAL REVIEW APPLICATIONS, CONTACT
ZONINGINFO@COLUMBUS.GOV FOR SUBMITTAL DETAILS

**DEVELOPMENT COMMISSION AND CITY COUNCIL MEETING DATES TBD

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APPLICABLE ONLY TO REZONING APPLICATIONS THAT ARE IN PROCESS

FINAL DC MATERIALS DUE BY:

DC MEETING DATES:*

JANUARY 16, 2024	FEBRUARY 8, 2024
FEBRUARY 20, 2024	MARCH 14, 2024
MARCH 19, 2023	APRIL 11, 2024
APRIL 16, 2024	MAY 9, 2024
MAY 21, 2024	JUNE 13, 2024
JUNE 18, 2024	JULY 11, 2024
JULY 16, 2024	AUGUST 8, 2024
AUGUST 20, 2024	SEPTEMBER 12, 2024
SEPTEMBER 17, 2024	OCTOBER 10, 2024
OCTOBER 22, 2024	NOVEMBER 14, 2024
NOVEMBER 19, 2024	DECEMBER 12, 2024
DECEMBER 18, 2024	JANUARY 9, 2025
JANUARY 21, 2025	FEBRUARY 13, 2025
FEBRUARY 18, 2025	MARCH 13, 2025

***DC MEETINGS ARE HELD IN THE SECOND FLOOR HEARING ROOM;
MEETINGS BEGIN AT 4:30 PM.**

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PUBLIC HEARINGS ADDITIONAL INFORMATION:

- (1) Applications are submitted by email to ZoningInfo@columbus.gov. Call 614-645-4522 or email for any questions. Follow-up appointments may be arranged with the assigned planner, if necessary. Incomplete applications will NOT be accepted.
- (2) **It is the applicant's responsibility to identify all variances or modifications required for the project.** If any necessary variances or modifications are discovered after your application is approved, a new application (and applicable fees) will be required.
- (3) Applicants must confirm whether the subject site lies within the boundaries of an Area Commission, recognized Neighborhood Group, Historic Architectural Review Commission, or Design Review Area. Information can be obtained from the Columbus Zoning Map, at CbusAreaCommissions.org, or gis.columbus.gov/one; search by address or parcel ID. You may also contact the Department of Neighborhoods at 614-645-1993 to confirm the area where the site is located.
- (4) For properties undergoing annexation, applications cannot be accepted until the County Commissioners have approved the annexation petition.
- (5) Be advised that the applicant will be assessed additional fees for requests for tabling, reconsideration, amended proposals, etc. These fees are listed on the Department of Building and Zoning Services website.
- (6) A traffic impact study, traffic access study or parking study may be required by the Department of Public Service. A traffic study is initiated with the submittal of a Traffic Study Memorandum document that can be found at <http://www.columbus.gov/trafficstudymou>. Any questions related to the applicability or scope of a traffic study may be submitted to DPSDevelopmentTrafficStudies@columbus.gov. All traffic studies must be submitted thirty (30) days prior to the deadline for the public hearing agenda. Right-of-way dedication as stipulated by the Columbus Multimodal Thoroughfare Plan (2019) may be required per Columbus City Code 4309.17. Refer to Ordinance #1950-2019, which includes the current map and table for the Plan and is available at the following link: [Columbus Multimodal Thoroughfare Plan](#). Any other questions related to proposed improvements or modifications within the public right-of-way may be directed to DPSDevelopmentInquiries@columbus.gov.
- (7) The Development Department Planning Division, as part of the variance or special permit process, reviews applications for consistency with adopted city plans. As part of that review, detailed information such as a site plan or building elevations may be requested. These materials are not necessarily required as part of the rezoning or variance application, but may be requested as part of the application review. Contact the Planning Division at planninginfo@columbus.gov or 614-724-4437 for more information.
- (8) Final materials for ordinance preparation must be submitted to staff two weeks prior to the targeted ordinance submittal deadline. The submittal deadline is 17 days prior to the Council Zoning Meeting date. Check with Council Activities Staff for specific deadline dates. Late submittals will be held for the next ordinance submittal deadline. The Council Zoning Chair decides which items are to be scheduled on the Zoning Agendas, and inquiries regarding scheduling should be directed to that office.
- (9) All zoning legislation passed by City Council becomes effective 30 days after passage unless amended to emergency with the approval of the City Clerk's Office. Applicants should contact the City Clerk's Office at 614-645-7380 for information about requesting emergency legislation.
- (10) The City of Columbus makes no determination whether a property contains area(s) that might be classified as wetlands by the Army Corps of Engineers and the Ohio Environmental Protection Agency; nor does approval at the public hearing imply the site has complied with wetlands guidelines. It is the applicant's responsibility to determine if wetlands exist on the site.
- (11) Other permits, clearances, and/or licenses may be required.