PLANNING AND ZONING COMMISSION
APPLICATION : (Type or PRINT CLEARLY In Black Ink)

CASE NO.:

PROPERTY ADDRESS: 5510 WARRENSVILLE CENTER PP# 783-08-001 ZONING DISTRICT GC

APPLICANT: NAME: MATT CASEY COMPANY: ZAREMBA GROUP
MAILING ADDRESS: 14600 DETROIT AVENUE, LAKEWOOD 44107
PHONE: 216.221.6600 CELL: 216.970.7049 FAX:
E-MAIL ADDRESS: MCASEY@ZAREMBAGROUP.COM ID:

PROPERTY OWNER NAME(S): FITNESS GROUP INVESTMENTS, LLC (SAM KHOURI)
MAILING ADDRESS: 18605 DETROIT AVENUE, LAKEWOOD 44107
PHONE: 440.724.3594 CELL: SAME FAX:
E-MAIL ADDRESS: SAM@REBELDEVELOP.COM

ACTION REQUESTED: SITE PLAN APPROVAL

I, the undersigned applicant, have included the required ten (10) completed sets of Professional Quality documents with this application. I understand that the Building Commissioner reserves the right to refuse this application if found to be incomplete or improperly submitted, including, but not limited to, the attached application and drawings. I, or my authorized agent or representative, shall be present at the public meeting on the designated date as noted at the bottom of this application. I further understand that my failure to be present for the meeting at the date and time stated below may cause the case to be denied. Please call 216-587-9000 ten (10) days prior to meeting date to ensure that your case has been placed on the Planning & Zoning agenda

10/27/2020 (Date) MATT CASEY (Applicant's Printed Name) Matt Casey (Applicant's Signature)

OFFICE USE ONLY:

ZONING DISTRICT: PLANNING ZONING
APPLICABLE CODE(S)

CASE WORDING:

Next Scheduled Planning /Zoning Meeting:
@ 6:30 p.m.
5353 Lee Road, Maple Heights, OH 44137

[ ] Approved for Meeting

Date Building Commissioner