



CITY OF PATASKALA BOARD OF ZONING APPEALS

City Hall, Council Chambers
621 West Broad Street
Pataskala, Ohio 43062

STAFF REPORT

October 10, 2017

Conditional Use Application CU-17-012

Applicant:	Muhammad Bilal
Owner:	ZNB Construction, LLC
Location:	131 Oak Meadow Drive
Acreage:	0.35 acres
Zoning:	R-10 – High Density Residential
Request:	Requesting a conditional use pursuant to Section 1235.04(3) of the Pataskala Code to allow for the property to be used as an adult day care facility.

Description of the Request:

The applicant is seeking a conditional use to allow for the existing building to be used for an adult day care facility.

Staff Summary:

The property contains a roughly 2,200 square foot building that was built in 1965 and was previously used as a medical office and clinic. The applicant is proposing to use the building as an adult daycare facility. According to the applicant's narrative, there will be 3-4 employees with 3-5 residents. The hours of operation will be 24 hours. The business will provide room, board, supervision, and personal care assistance with basic (non-medical) activities including personal hygiene, dressing, feeding, and walking clients.

Staff Review:

The following review does not constitute recommendations but merely conclusions and suggestions based on the summary

Section 1291.16 of the Code lists types of uses with their minimum number of required parking spaces. Nursing facilities and similar uses are required to have 1 parking space for each 4 beds plus 1 per employee on the main shift, or 1 per 500 square feet of floor area – whichever is more restrictive. The property has approximately 25 parking spaces on site, which meets the code requirements.

The City Engineer has commented that it would be important to know how much traffic would be generated by the proposed use, which could require turn lanes. However, given the provided information, it seems unlikely that turn lanes would be required.

The Utility Director has commented that a water backflow prevention device would be required as well as a testable device with a minimum double check prevention. A possible condition has been placed to address this.

The Zoning Inspector has commented that the Licking County Adult Protective Services has seen an increase of reports of elderly abuse in 2017. While the zoning regulations will address the physical requirements of an adult day care facility, there are several federal, state, and county regulations that provide protection for the residents. The Zoning inspector has attached a copy of Ohio’s adult day care regulations. A possible condition has been placed to address the comments.

Surrounding Area:

Direction	Zoning	Land Use
North	R-10 – High Density Residential	Single-Family Home
East	RM – Multi-Family Residential	Multi-Family Homes
South	RM – Multi-Family Residential	Multi-Family Homes
West	R-10 – High Density Residential	Single-Family Home

Conditional Use Requirements:

According to Section 1215.04 of the Pataskala Code, the Board of Zoning appeals shall consider whether the conditional use at the proposed location:

1. *Is in fact a conditional use as established under the provisions of Title Three of the Planning and Zoning Code for the specific zoning district of the parcel(s) listed on the application.*
2. *Will be harmonious with and in accordance with the general objectives or with any specific objective of the City comprehensive plan and/or this Code.*
3. *Will be designed, constructed, operated, and maintained so as to be harmonious in appearance with the existing or intended character of the general vicinity and that such use will not change the essential character of the same area.*
4. *Will not be hazardous or disturbing to existing or future neighboring uses.*
5. *Will be served adequately by essential public facilities and services such as highways, streets, police and fire protection, drainage structures, refuse disposal, water and sewer, and schools; or that the persons or agencies responsible for the establishment of the proposed use shall be able to provide adequately any such services.*
6. *Will not create excessive additional requirements at public cost for public facilities and services and will not be detrimental to the economic welfare of the community.*
7. *Will not involve uses, activities, processes, materials, equipment and conditions of operations that will be detrimental to any persons, property, or the general welfare, including but limited to excessive production of traffic, noise, smoke, fumes, glare, odor, potential for explosion, and air or water pollution.*
8. *Will have vehicular approaches to the property which shall be so designed as to not create an interference with traffic on surrounding public thoroughfares.*
9. *Will not result in destruction, loss or damage of a natural, scenic, or historic feature of major importance.*

Furthermore, Section 1215.05 allows other factors to be considered, when determining if a conditional use is appropriate. In Staff's opinion the following factors from Section 1215.05 are applicable to Conditional Use Application CU-17-012:

A – Protection of Surrounding Properties and Neighborhoods

- 7. All permitted installations shall be kept in a neat and orderly condition so as to prevent injury to any single property, any individual, or to the community in general.*
- 8. There shall be no more than one sign oriented to each abutting street identifying the activity.*

B – Specific Performance Standards

- 2. Hours may be limited further depending upon the surrounding land uses.*

E – Access

- 8. The applicant shall submit a parking and traffic circulation plan to the Board of Zoning Appeals for approval. The design, location, and surface of the parking areas and vehicular approaches shall be subject to approval by the Board so as to reduce congestion, promote safety, and reduce the impact on the residential character of the neighborhood. The plan shall provide for the separation of incoming and outgoing vehicles during high volume periods and shall, if applies, provide a safe drop off point for pedestrians that will not impede other traffic.*

G – Miscellaneous – Administrative

- 1. The Board of Zoning Appeals may, at its discretion, require that, upon the issuance of a conditional use permit, the conditions of the permit be subject to periodic review to insure compliance with the terms of the permit.*

Department and Agency Review

- Zoning Inspector – See attached
- Public Service – No comments
- City Engineer – See attached
- Police Department – No comments
- Utility Director – See attached
- West Licking Joint Fire District – No comments
- Southwest Licking School District – No comments

Supplementary Conditions:

Should the Board choose to approve the applicant's request, the following supplementary conditions may be considered:

1. The applicant shall obtain all necessary permits from the City of Pataskala and the Licking County Building Department prior to operating the facility.
2. All applicable permits and licenses for adult day care services shall be obtained through the State of Ohio, Licking County, and any applicable federal agencies.
3. The applicant shall address all comments provided by the Utility Director.

Resolution:

For your convenience, the following resolution may be considered by the Board of Zoning Appeals when making a motion:

“I move to approve a conditional use pursuant to Section 1235.04(3) of the Pataskala Code for application CU-17-012 (“with the following supplementary conditions” if supplementary conditions are to be placed on the approval).”

Lisa Paxton

From: Jim Roberts <jroberts@hullinc.com>
Sent: Friday, September 22, 2017 2:37 PM
To: Zachary Cowan
Cc: Scott Fulton; Lisa Paxton; Scott Haines
Subject: October 10 BZA Agenda

Zack, Jobs Henderson has reviewed the two agenda items for the October 10 BZA meeting. We offer the following comments:

Case VA-17-024: Larry Walker

- This case is requesting a fence that exceeds maximum height requirements.
- We offer no engineering comments or concerns for this case.

Case CU-17-012: ZNB Construction

- This case requests Conditional Use for an Adult Daycare on Oak Meadow Drive.
- The applicant notes there are 25 parking spaces on this property.
- Oak Meadow Drive is a busy street, so it would be important to know how much traffic would be generated by this use. Consideration for turn lanes could be an item of concern. It seems unlikely that this would be the case, but with the information we have, we cannot determine.
- We understand no significant changes to the property would occur. If construction is anticipated, drainage must be accounted for as well.

Thank you for the opportunity to contribute to the city's evaluation of this agenda. Please let us know if there are any questions we can assist with.

Jim

James G. Roberts, P.E.
PRESIDENT

Jobs Henderson
A HULL COMPANY

59 Grant Street | Newark, Oh 43055
PH: (740) 344-5451 x 225 | FAX: (740) 344-8659
jroberts@hullinc.com
www.jobshenderson.com
www.hullinc.com

From: [Nathan Coey](#)
To: [Zachary Cowan](#)
Subject: Variance Applications
Date: Monday, September 25, 2017 10:55:40 AM

VA-17-024 – No comments

CU-17-012

If this becomes a day care facility a water backflow prevention device per Ohio Administrative Code 3745-95-06. The City of Pataskala will require a testable device with a minimum double check prevention. The Utility Department will consult at the request of the developer.

Nathan W. Coey
Utility Director
City of Pataskala
621 W. Broad Street
Suite 1-D
Pataskala, Ohio 43062
Office: 740-927-4134
ncoey@ci.pataskala.oh.us

“Integrity is doing the right thing, even when no one is watching.”

C.S. Lewis

September 29, 2017

Re: Conditional Use Application
CU-17-012
131 Oak Meadow Drive



*Planning & Zoning
Department*

To Whom It May Concern,

I have encountered several occasions, while performing my duties as the Zoning Inspector, in which failure to follow our existing zoning regulations has unfortunately impacted some senior residents in our community in a negative way.

Most recently, from my initial contact at a property regarding zoning violations, I observed safety and health concerns for this senior resident that I had to contact Licking County Adult Protective Services for assistance.

Licking County Adult Protective Services has seen a threefold increase in their receipt of complaints and reports of elder abuse in 2017, compared to just three years ago.

While our current zoning regulations will address the physical requirements of an Adult Day Care Facility in our city, there are several Federal, State and County regulations that provide protection for the actual operation and care of the resident. These regulations provide strong requirements for qualified, adequate and properly trained staff. I am attaching a copy of just one such regulation.

As part of any Conditional Use Application approval, I would like to recommend that all Federal, State and County regulations be required to be followed as part of approval for any Adult Day Care Facility in our city.

Please feel free to contact me if there are any questions.
Respectfully submitted,

A handwritten signature in blue ink, appearing to read "S. Blake", is written over a large, faint, circular watermark or stamp.

Steven Blake
Zoning Inspector, City of Pataskala
621 West Broad Street, Suite 2A
Pataskala, Ohio 43062
(740) 927-3885
sblake@ci.pataskala.oh

173-39-02.1 ODA provider certification: adult day service.

(A) "Adult day service" ("ADS") means a regularly-scheduled service delivered at an ADS center, which is a non-institutional, community-based setting. ADS includes recreational and educational programming to support an individual's health and independence goals; at least one meal, but no more than two meals per day; and, sometimes, health status monitoring, skilled therapy services, and transportation to and from the ADS center.

(B) Every ODA-certified provider of ADS shall comply with the following requirements:

(1) General requirements: The provider shall comply with the requirements for every ODA-certified provider in rule 173-39-02 of the Administrative Code.

(2) Service requirements:

(a) Service levels: The required components of the two services levels are presented in this paragraph and in "Table 1" to this rule:

(i) Enhanced ADS: Enhanced ADS includes structured activity programming, health assessments, supervision of all ADLs, supervision of medication administration, hands-on assistance with ADL activities (except bathing) and hands-on assistance with medication administration, comprehensive therapeutic activities, intermittent monitoring of health status; and, hands-on assistance with personal hygiene activities (except bathing).

(ii) Intensive ADS: Intensive ADS includes all the components of enhanced ADS plus hands-on assistance with two or more ADLs; hands-on assistance with bathing; regular monitoring of, and intervention with, health status; skilled nursing services (e.g., dressing changes and other treatments) and rehabilitative nursing procedures; rehabilitative and restorative services, including physical therapy, speech therapy, and occupational therapy; and, social work services.

Table 1: Levels and Components of ADS

	ENHANCED ADS	INTENSIVE ADS
Structured activity programming	Yes	Yes
Health assessments	Yes	Yes
Supervision of ADLs	All ADLs	All ADLs
Hands-on assistance with ADLs	Yes, one or more ADL (bathing excluded)	Yes, minimum of two ADLs (bathing included)
Hands-on assistance with medication administration	Yes	Yes

Comprehensive therapeutic activities	Yes	Yes
Monitoring of health status	Intermittent	Regular, with intervention
Hands-on assistance with personal hygiene activities	Yes	Yes
Social work services	No	Yes
Skilled nursing services and rehabilitative nursing services	No	Yes
Rehabilitative and restorative services	No	Yes

(b) Transportation: The provider shall transport each individual to and from the ADS center by performing a transportation service that complies with rule 173-39-02.13 of the Administrative Code, unless the provider enters into a contract with another provider who complies with rule 173-39-02.13 of the Administrative Code, or unless the caregiver provides or designates another person or non-provider, other than the ADS center provider, to transport the individual to and from the ADS center.

(c) Case manager's assessment:

(i) The case manager shall assess each consumer's needs and preferences then specify which service level will be approved for each consumer.

(ii) The provider shall retain records to show that it provides the service at the level that the case manager authorized.

(d) Provider's initial assessment:

(i) The provider shall assess the individual before the end of the individual's second day of attendance at the center. The provider may substitute a copy of the case manager's assessment of the individual if the case manager assessed the individual no more than thirty days before the individual's first day of attendance at the center.

(ii) The initial assessment shall include both of the following components:

(a) Functional and cognitive profiles that identify the ADLs and IADLs that require the attention or assistance of ADS center staff; and,

(b) A social profile including social activity patterns, major life events, community services, caregiver data, formal and informal support systems, and behavior patterns.

(e) Health assessment: No later than thirty days after the individual's initial attendance at the ADS center or before the individual receives the first ten units of service at the ADS center, whichever comes first, the provider shall either obtain a health assessment of each individual from a licensed healthcare professional whose scope of practice includes health assessments or shall require a staff

member who is such a licensed healthcare professional to perform a health assessment of each individual. The health assessment shall include the individual's psychosocial profile and shall identify the individual's risk factors, diet, and medications. If the licensed healthcare professional who performs the health assessment is not a staff member of the provider, the provider shall retain a record of the professional's name and phone number.

(f) Activity plan: No later than thirty days after the individual's initial attendance at the ADS center or before the individual receives the first ten units of service at the ADS center, whichever comes first, the provider shall either obtain the services of a licensed healthcare professional whose scope of practice includes developing activity plans to draft an activity plan for each individual or the provider shall require a staff member who is such a licensed healthcare professional to draft an activity plan for each individual. The plan shall identify the individual's strengths, needs, problems or difficulties, goals, and objectives. The plan shall describe the individual's:

(i) Interests, preferences, and social rehabilitative needs;

(ii) Health needs;

(iii) Specific goals, objectives, and planned interventions of ADS services that meet the goals;

(iv) Level of involvement in the drafting of the plan, and, if the individual has a caregiver, the caregiver's level of involvement in the drafting of the plan; and,

(v) Ability to sign his or her signature versus alternate means for the individual's signature.

(g) Plan of treatment: Before administering medication or meals with a therapeutic diet, and before providing a nursing service, nutrition consultation, physical therapy, or speech therapy, the provider shall obtain a plan of treatment from a licensed healthcare professional whose scope of practice includes making plans of treatment. The provider shall obtain the plan of treatment at least every ninety days for each individual that receives medication, a nursing service, nutrition consultation, physical therapy, or speech therapy. For diet orders that may be part of a plan of treatment, a new diet order is not required every ninety days. Instead, the provider shall comply with the diet-order requirements for therapeutic diets under rule 173-39-02.14 of the Administrative Code.

(h) Interdisciplinary care conference:

(i) Frequency: The provider shall conduct an interdisciplinary care conference for each individual at least once every six months.

(ii) Participants: The provider shall conduct the conference between the provider's staff members and invitees who choose to participate. The provider shall invite the case manager to participate in the conference. The provider shall invite any licensed healthcare professional who does not work for the provider, but who provided the provider with a health assessment of the individual or an activity plan for the individual, to participate in the conference. If the individual has a caregiver, the provider shall invite the caregiver to the conference. The provider shall also invite the individual to the conference. The provider shall invite the case manager, licensed healthcare professional, caregiver, or individual by providing the date and time to the case manager seven days before the conference begins.

(iii) Revise activity plan: If the conference participants identify changes in the individual's health needs, condition, preferences, or responses to the service, the provider shall obtain the services of a licensed healthcare professional whose scope of practice includes developing activity plans to revise

the activity plan accordingly or shall require a staff member who is such a licensed healthcare professional to revise the activity plan accordingly.

(iv) Records: The provider shall retain records on each conference's determinations.

(i) Activities: The provider shall post daily and monthly planned activities in prominent locations throughout the center.

(j) Lunch and snacks:

(i) The provider shall provide lunch and snacks to each individual who is present during lunchtime or snacktime.

(ii) Each meal that the provider provides shall comply with all the requirements for the home-delivered meal service under rule 173-39-02.14 of the Administrative Code, except for the requirements in that rule that pertain to the delivery of the meal.

(3) Center requirements:

(a) Specifications: The provider shall only provide ADS in a center with the following specifications.

(i) If the center is housed in a building with other services or programs other than ADS, the provider shall assure that a separate, identifiable space and staff is available for ADS during all hours that the provider provides ADS in the center.

(ii) The center shall comply with the "ADA Accessibility Guidelines for Buildings and Facilities" in appendix A to 28 C.F.R., Part 36 (July 1, 2015).

(iii) The center shall have at least sixty square feet per individual that it serves (not just individuals who are enrolled in an ODA-administered program), excluding hallways, offices, rest rooms, and storage areas.

(iv) The provider shall store individuals' medications in a locked area that the provider maintains at a temperature that meets the storage requirements of the medications.

(v) The provider shall store toxic substances in an area that is inaccessible to individuals.

(vi) The center shall have at least one working toilet for every ten individuals present that it serves (not just individuals who are enrolled in an ODA-administered program) and at least one wheelchair-accessible toilet.

(vii) ODA shall only certify the provider to provide intensive ADS if the center has bathing facilities suitable to the needs of individuals who require intensive ADS.

(b) Emergency safety plan:

(i) The provider shall develop and annually review a fire inspection and emergency safety plan.

(ii) The provider shall post evacuation procedures in prominent areas throughout the center.

(c) Evacuation drills:

(i) At least quarterly, the provider shall conduct an evacuation drill from the center while individuals are present.

(ii) The provider shall retain records on the date and time it completes each evacuation drill.

(d) Fire extinguishers and smoke alarms:

(i) The provider shall have fire extinguishers and smoke alarms in the center and shall routinely maintain them.

(ii) At least annually, the provider shall inspect the fire extinguishers and smoke alarms. The provider shall retain records on the date and time it completes each inspection.

(4) Staffing levels:

(a) The provider shall have at least two staff members present whenever more than one individual is present, including one who is a paid personal care staff member and one who is certified in CPR.

(b) The provider shall maintain a staff-to-individual ratio of at least one staff member to six individuals at all times.

(c) The provider shall have a RN, or LPN under the direction of a RN, on site at the ADS center to provide nursing services that require the skills of a RN, or LPN under the direction of a RN, and that are within the nurse's scope of practice.

(d) The provider shall employ an activity director to direct activities.

(5) Provider qualifications:

(a) Type of provider:

(i) A provider shall only provide the service if ODA certifies the provider as an agency provider.

(ii) For each provider that ODA certifies, ODA shall certify the provider as an enhanced or intensive provider. If ODA certifies a provider to provide an intensive service level, the provider may also directly provide, or arrange for, the enhanced service level.

(b) Staff qualifications:

(i) Every RN, LPN under the direction of a RN, social worker, physical therapist, physical therapy assistant, speech therapist, licensed dietitian, occupational therapist, occupational therapy assistant, or other licensed professional acting as a personal care care staff member, shall possess a current, valid license to practice in their profession.

(ii) Each activity director shall possess at least one of the following:

(a) A baccalaureate or associate degree in recreational therapy or a related degree.

(b) At least two years of experience as an activity director, activity coordinator, or a related position.

(c) Compliance with the qualifications under rule 3701-17-07 of the Administrative Code for directing resident activities in a nursing facility.

(d) A certification from the national certification council for activity professionals (NCCAP).

(iii) Each activity assistant shall possess at least one of the following:

(a) A high school diploma;

(b) A high school equivalence diploma as defined in section 5107.40 of the Revised Code; or,

(c) At least two years of employment in a supervised position to provide personal care, to provide activities, or to assist with activities.

(iv) Each personal care aide shall possess at least one of the following:

(a) A high school diploma;

(b) A high school equivalence diploma as defined in section 5107.40 of the Revised Code;

(c) At least two years of employment in a supervised position to provide personal care, to provide activities, or to assist with activities; or,

(d) The successful completion of a vocational program in a health or human services field.

(v) Each staff member who provides transportation to individuals shall comply with all requirements under rule 173-39-02.13 of the Administrative Code.

(vi) The provider shall retain records to show that each staff member who has in-person interaction with individuals complies with paragraph (B)(4)(b) of this rule.

(c) Staff training:

(i) Orientation: Before each new personal care staff member provides ADS, the provider shall train the staff member on all of the following:

(a) The expectation of employees;

(b) The provider's ethical standards, as required under rule 173-39-02 of the Administrative Code;

(c) An overview of the provider's personnel policies;

(d) A description of the provider's organization and lines of communication;

(e) Incident reporting procedures; and,

(f) Universal precautions for infection control.

(ii) Task-based training: Before each new personal care staff member provides ADS, the provider shall provide task-based training.

(iii) Continuing education: Each staff member shall participate in at least eight hours of in-service or continuing education on appropriate topics each calendar year, unless the staff person holds a professional certification that requires at least eight hours in order to maintain the certification.

(iv) Records: The provider shall retain records showing that it complies with the training requirements under paragraph (B)(5)(c) of this rule. In doing so, the provider shall list the instructor's title, qualifications, and signature; date and time of instruction; content of the instruction; and name and signature of ADS personal care staff completing the training.

(d) Performance reviews:

(i) The provider shall complete a performance review of each staff member in relation to the staff member's job description.

(ii) The provider shall retain records to show that it complies with paragraph (B)(4)(d)(i) of this rule.

(6) Service verification: By one of the following two methods, the provider shall verify that each ADS session for which it bills was provided:

(a) The provider may use an electronic system to verify each ADS session if the system does all of the following:

(i) Collects the individual's name, date of service, arrival and departure times, mode of transportation, and an identifier (e.g., electronic signature, fingerprint, password, swipe card, bar code) unique to the individual.

(ii) Retains the information it collects.

(iii) Produces reports, upon request, that ODA or its designee can monitor for compliance.

(b) The provider may use a manual system, including a daily-attendance roster, to verify ADS session if the provider documents the individual's name, date of service, arrival and departure times, and mode of transportation; and collects the handwritten signatures of an ADS staff person and the individual. If the individual is unable to produce a handwritten signature, the individual's handwritten initials, stamp, or mark are acceptable if the case manager recorded the alternative in the individual's service plan.

(C) Units and rates:

(1) Attendance:

(a) Units of ADS attendance are calculated as follows:

(i) One-half unit is less than four hours ADS per day.

(ii) One unit is four through eight hours ADS per day.

(iii) A fifteen-minute unit is each fifteen-minute period of time over eight hours up to, and including, a maximum of twelve hours of ADS per day.

(b) A unit of ADS attendance does not include transportation time.

(2) Transportation: A unit of ADS transportation is a round trip, a one-way trip, or one mile with the trip cost based on a case manager's pre-determined calculation of distance between the individual's residence and the ADS center multiplied by an established ADS mileage rate. If the provider provides the transportation simultaneously to more than one PASSPORT-enrolled individual who resides in the same household in the same vehicle to the same destination, the provider's payment rate for that trip is seventy-five per cent of the per-unit rate, in accordance with rule [5160-31-07](#) of the Administrative Code.

(3) The maximum rates allowable for units of ADS attendance and ADS transportation are established in appendix A to 5160-1- 06.1 of the Administrative Code.

(4) The rates are subject to the rate-setting methodology in rule [5160-31-07](#) of the Administrative Code.

Cite as Ohio Admin. Code 173-39-02.1

Effective: 3/1/2017

Five Year Review (FYR) Dates: 11/30/2016 and 03/01/2022

Promulgated Under: 119.03

Statutory Authority: 173.01, 173.02, 173.391, 173.52, 173.522.

Rule Amplifies: 173.39, 173.391.

Prior Effective Dates: 03/31/2006, 03/20/2011, 09/29/2011, 11/01/2013, 09/01/2016.



CITY OF PATASKALA BOARD OF ZONING APPEALS

City Hall, Council Chambers
621 West Broad Street
Pataskala, Ohio 43062

CONDITIONAL USE APPLICATION

(Pataskala Codified Ordinances Chapter 1213)

Property Information		
Address: 131 Oak Meadow Dr		
Parcel Number: 064-307962-00.000		
Zoning: Commercial R-10	Acres: .35	
Water Supply:		
<input checked="" type="checkbox"/> City of Pataskala	<input type="checkbox"/> South West Licking	<input type="checkbox"/> On Site
Wastewater Treatment:		
<input checked="" type="checkbox"/> City of Pataskala	<input type="checkbox"/> South West Licking	<input type="checkbox"/> On Site

Staff Use	
Application Number:	
CU-17-012	
Fee:	
\$300 ⁰⁰	
Filing Date:	
9/15/17	
Hearing Date:	
10/10/17	

Applicant Information		
Name: Muhammad Bilal		
Address: 12625 Bentley Dr		
City: Pickenington	State: OH	Zip: 43147
Phone: 6145898007	Email: bilal.2@icloud.com	

Documents	
<input checked="" type="checkbox"/>	Application
<input checked="" type="checkbox"/>	Fee
<input checked="" type="checkbox"/>	Narrative
<input checked="" type="checkbox"/>	Site Plan
<input checked="" type="checkbox"/>	Deed
<input checked="" type="checkbox"/>	Address List
<input checked="" type="checkbox"/>	Area Map

Owner Information		
Name: ZNB Construction, LLC		
Address: 261 Monarch Dr		
City: Pataskala	State: OH	Zip: 43062
Phone: (614)317-3090	Email:	

Conditional Use Information	
Request (Include Section of Code):	1235.04 (3)
Describe the Project:	

Documents to Submit

Conditional Use Application: Submit 1 copy of the conditional use application.

Narrative Statement: Submit 14 copies of a narrative statement explaining the following:

- The reason the conditional use has been requested.
- The specific reasons why the conditional use is appropriate as it pertains to Section 1215.04 of the Pataskala Code:
 1. *Is in fact a conditional use as established under the provisions of Title Three of the Planning and Zoning Code for the specific zoning district of the parcel(s) listed on this application.*
 2. *Will be harmonious with and in accordance with the general objectives, or with any specific objective of the City comprehensive plan and/or this Code.*
 3. *Will be designed, constructed, operated and maintained so as to be harmonious in appearance with the existing or intended character of the general vicinity and that such use will not change the essential character of the same area.*
 4. *Will not be hazardous or disturbing to existing or future neighboring uses.*
 5. *Will be served adequately by essential public facilities and services such as highways, streets, police and fire protection, drainage structures, refuse disposal, water and sewer, and schools; or that the persons or agencies responsible for the establishment of the proposed use shall be able to provide adequately any such services.*
 6. *Will not create excessive additional requirements at public cost for public facilities and services and will not be detrimental to the economic welfare of the community.*
 7. *Will not involve uses, activities, processes, materials, equipment and conditions of operations that will be detrimental to any persons, property, or the general welfare, including but not limited to excessive production of traffic, noise, smoke, fumes, glare, odor, potential for explosion, and air or water pollution.*
 8. *Will have vehicular approaches to the property which shall be so designed as to not create interference with traffic on surrounding public thoroughfares.*
 9. *Will not result in destruction, loss, or damage of a natural, scenic, or historical feature of major importance.*
- Specific standards for conditional uses can be found in Section 1215.05 of the Pataskala Code.

Site Plan: Submit 14 copies of a site plan to scale of the subject property indicating the following:

- All property lines and dimensions
- Location and dimensions of all existing and proposed buildings and structures.
- Setbacks from property lines for all existing and proposed buildings, structures and additions
- Easements and rights-of-way
- Driveways
- Floodplain areas
- Location of existing wells and septic/aerator systems.
- Any other information deemed necessary for the conditional use request

Deed: Provide a copy of the deed for the property with any deed restrictions. Deeds can be obtained at www.lcounty.com/rec.

Address List: Submit one copy of a list of all property owners and addresses of those owning property within 200 feet or two parcels from any point on the subject property line, whichever creates more property owners. This list must be in accordance with the Licking County Auditor's current tax list and must be submitted on mailing labels.

Area Map: Submit 14 copies of an area map from the Licking County Engineer's office showing the area encompassed by the address list. Area maps can be obtained at www.lcounty.com/taxparcelviewer/default.

Signatures

I certify the facts, statements and information provided on and attached to this application are true and correct to the best of my knowledge. Also, I authorize City of Pataskala staff to conduct site visits and photograph the property as necessary as it pertains to this conditional use request.

Applicant:



Date:

09/15/2017

Owner:



Date:

9/14/17

Application No. CU-17.012

NARRATIVE:

The conditional use is being request in order to use this property as adult home care facility.

In essence, our conditional use plan will provide room, board, supervision and personal care assistance with basic (non-medical) activities like personal hygiene, dressing, eating, and walking to elderly people.

Hours of Operation: 24 hrs.

Employees: 3 to 4 employees

Resident: 3- 5 people

- The specific reasons why the conditional use is appropriate as it pertains to Section 1215.04 of the Pataskala Code:

1. Is in fact a conditional use as established under the provisions of Title Three of the Planning and Zoning Code for the specific zoning district of the parcel(s) listed on this application.

Yes, Section 1235.04 of the zoning code lists adult home care facility as a conditional use

2. Will be harmonious with and in accordance with the general objectives, or with any specific objective of the City comprehensive plan and/or this Code.

Yes, the propose conditional use will abide by the requirement of R-10 zoning.

3. Will be designed, constructed, operated and maintained so as to be harmonious in appearance with the existing or intended character of the general vicinity and that such use will not change the essential character of the same area.

Yes, the proposed development will be harmonious with the existing development in the surrounding area.

4. Will not be hazardous or disturbing to existing or future neighboring uses.

The proposed will not be hazardous or disturbing to existing or future neighbor uses.

5. Will be served adequately by essential public facilities and services such as highways, streets, police and fire protection, drainage structures, refuse disposal, water and sewer, and schools; or that the persons or agencies responsible for the establishment of the proposed use shall be able to provide adequately any such services.

Yes, the location of the proposed use will be served adequately by essential public facilities and services for agencies responsible for the drainage, structure of the other public services.

6. Will not create excessive additional requirements at public cost for public facilities and services and will not be detrimental to the economic welfare of the community.

Yes, the conditional use of this property will not create excessive additional requirement at public cost or community.

7. Will not involve uses, activities, processes, materials, equipment and conditions of operations that will be detrimental to any persons, property, or the general welfare, including but not limited to excessive production of traffic, noise, smoke, fumes, glare, odor, potential for explosion, and air or water pollution.

The proposed conditional use will not be detrimental to any persons, property, or the general welfare and environment.

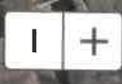
8. Will have vehicular approaches to the property which shall be so designed as to not create interference with traffic on surrounding public thoroughfares.

Application No. CU-17.012

Yes, the property currently has approx. 25 parking spots. The property does have designated entrance and exit paths which will not disturb the current traffic pattern.

9. Will not result in destruction, loss, or damage of a natural, scenic, or historical feature of major importance.

The proposed conditional use will not result in destruction, loss, or damage of a natural scenic, or historical feature of major importance.



Details

Add

Basemap

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Directions

Measure

Bookmarks

131 oak meadow



DESCRIPTION APPROVED WILLIAM C LOZIER LICKING COUNTY ENGINEER	TRANSFERRED Date <u>October 20, 2014</u>
APPROVED BY <u>W.C. Lozier</u> 10-15-14	<u>Michael Smith</u> Licking County Auditor
	SEC. 319.202 COMPLIED WITH MICHAEL SMITH AUDITOR BY: <u>10254.00</u>



201410200020552

Pgs: 2 \$28.00 T20140024191
10/20/2014 1:57PM MEPWORLD CLAS
Bryan A. Long
Licking County Recorder

GENERAL WARRANTY DEED

Robert D. Kiger, LLC, a limited liability company, the Grantor(s), for valuable consideration paid, grant(s) with general warranty covenants, to ZNB Construction, LLC, a limited liability company, the Grantee(s), THE FOLLOWING DESCRIBED PROPERTY:

See Attached Exhibit "A"

Except for the following and subject to all of which this conveyance is made: legal highways; zoning ordinances; real estate taxes and assessments which are now or may hereafter become a lien on said premises; covenants, conditions, restrictions and easements of record; and all coal, oil, gas, and other mineral rights and interests previously transferred or reserved of record.

Prior Instrument Reference: Instrument Number 201308300022329 of Licking County, Ohio
Permanent Parcel Number: 064-307962-00.000

Grantor (s) do(es) hereby covenant and warrant unto said Grantee(s), the Grantee(s) heirs, assigns, and successors, that at the time of the delivery of this deed, the Grantor(s) was(were) lawfully seized in fee simple of the granted premises, that the premises are free from all encumbrances, that the Grantor(s) has(have) good right to sell and convey the same to the Grantee(s), heirs, assigns, or successors, and that the Grantor(s) do(es) hereby agree to defend the same to the Grantee(s) and the Grantee(s)' heirs, assigns or successors, forever, against the lawful claims and demands of all persons.

Executed on this 6 day of October, 2014

Robert D. Kiger, LLC

BY: Robert D. Kiger, Sole Member
Robert D. Kiger, Sole Member

STATE OF OHIO, COUNTY OF Franklin, SS:

The foregoing instrument was acknowledged before me this 6 day of October, 2014, by Robert D. Kiger, Sole Member of Robert D. Kiger, LLC, a limited liability company, the Grantor(s), and that the same was their free act and deed.

In testimony whereof, I have hereunto set my name and official seal at on the day and year last aforesaid.

Trisha Morrow
Notary Public
My Commission Expires 9-16-18



Trisha Morrow
Notary Public, State of Ohio
My Commission Expires 09-16-2018

This Instrument was prepared by: Lance Chapin, Esq., without opinion
Stein, Chapin & Associates, LLC
580 South High Street, Suite 330
Columbus, OH 43215



FIRM FILE NO: WC1409-040-ZNBCONSTR

Property: 131 Oak Meadow Drive, Pataskala, OH 43062

Exhibit A

Legal Description

Situated in the City of Pataskala, County of Licking, State of Ohio, and being a part of Lot 13 in the Fourth Quarter, Township 1N, Range 15W, of the United States Military Lands, and being more particularly described as follows:

Being a survey of a parcel conveyed to Vitold, Ltd., as recorded in Instrument No. 2009-07060014900, in the Licking County Deed Records, and all of Auditor's Parcel No. 064-307962-00.000, and further described as follows:

Commencing at a 3/4" o.d. iron pipe found on the West Right of Way Line of Oak Meadow Drive (50' Wide R/W) marking the Southeast corner of Lot 1 of Oakhaven Subdivision No. 1, as recorded in Plat Book 8, Page 120, in the Licking County Plat Records, also being the Southeast corner of a parcel conveyed to Gary D. & Judith A. Cope, as recorded in O.R. Volume 117, Page 3, in the Licking County Deed Records, and being the PRINCIPLE PLACE OF BEGINNING of the 0.347 acre parcel herein to be described;

Thence, S 17 deg. 35' 45" E 100.00 feet with the West Right of Way line of said Oak Meadow Drive, to a mag nail set marking the Northeast corner of a parcel conveyed to 115 Oak Meadow Drive, Ltd., as recorded in Instrument No. 1999-02180006972;

Thence S 72 deg. 28' 14" W 151.21 feet leaving Oak Meadow Drive with the North line of said parcel conveyed to 151 Oak Meadow Drive, Ltd., to a 3/4" o.d. iron pipe found marking the Northwest corner thereof, and being on the East line of The Settlement at Pataskala Phase I-B, as recorded in Plat Book 16, Page 328;

Thence, N 17 deg. 27' 16" W 99.87 feet with the East line of The Settlement of Pataskala Phase I-B, to an iron pin set marking the Southwest corner of said parcel conveyed to Cope;

Thence, N 72 deg. 25' 20" E 150.96 feet with the South line of said parcel conveyed to Cope, to the PRINCIPLE PLACE OF BEGINNING, and containing 0.347 acres, more or less, and is subject to all legal easements, rights of way, restrictions, and zoning ordinances of record.

Bearings of this description are based on the West Right of Way Line of Oak Meadow Drive (50' Wide R/W), as being S 17 deg. 35' 45" E, and is an assumed Meridian used to denote angles only.

All iron pins set are 5/8" o.d. iron pins 30" long with red caps labeled "S.A. ENGLAND #S-7452".

The above description was prepared by S.A. England & Associates, under the direct supervision of Scott A. England, Ohio Registered Surveyor #S-7452 in September of 2009.

PPN: 064-307962-00.000

BELLESTRI, HEIDE F
501 PASADENA AVE
COLUMBUS, OH 43228

DEY, CAREE M
188 ANDREW BEEM ST
PATASKALA, OH 43062

HEABERLIN, SANDRA L
224 ISAAC THARP ST
PATASKALA, OH 43062

HUMMEL, THOMAS
63 HIGHLAND HOLLOW DR
PATASKALA, OH 43062

KENNEDY CO,
PO BOX 1187
NEWARK, OH 43055

LUTZ, GERRY THOMAS-JR
200 ISAAC THARP ST
PATASKALA, OH 43062

OAKHAVEN APTS L L C,
PO BOX 857
NEWARK, OH 43058

SHRINER, JERRY S
7729 LAURELWOOD DR
CANAL WINCHESTER, OH 43110

WARRINGTON, GARY A
139 HICKORY LN
PATASKALA, OH 43062

WENGER, KEVIN
209 ISAAC THARP ST
PATASKALA, OH 43062

COLE, BELINDA
PO BOX 4102
NEWARK, OH 43058

FORD, RANDOL R
220 ISAAC THARP ST
PATASKALA, OH 43062

HEARN, AARON M
212 ISAAC THARP ST
PATASKALA, OH 43062

HURT, BARBARA A
119 HICKORY LN
PATASKALA, OH 43062

LEE, THOMAS M
4000 HORIZONS DR
COLUMBUS, OH 43220

MEREDITH, SKYL R D
232 ISAAC THARP ST
PATASKALA, OH 43062

PHILLIPS, BARRY L
215 ISAAC THARP ST
PATASKALA, OH 43062

THE BA-A-ACK 40 FARM FAM L P,
4396 STATE ROUTE 669
SOMERSET, OH 43783

WASHINGTON ENTERPRISES II LLC,
494 W CHERRY ST
SUNBURY, OH 43074

YOUNKER, MATTHEW L
204 ISAAC THARP ST
PATASKALA, OH 43062

COPE, GARY D
145 OAK MEADOW DR
PATASKALA, OH 43062

GARBA, NDEYE O
219 ISAAC THARP ST
PATASKALA, OH 43062

HELFRICH, JAMES C
PO BOX 921
PATASKALA, OH 43062

JAMES, BEVERLY L
196 ISAAC THARP ST
PATASKALA, OH 43062

LONG, DARWIN L
179 OAK MEADOW DR
PATASKALA, OH 43062

NIBERT, MELISSA K
228 ISAAC THARP ST
PATASKALA, OH 43062

SHIPE, MICHAEL W
223 ISAAC THARP ST
PATASKALA, OH 43062

THOMPSON, JODY
216 ISAAC THARP ST
PATASKALA, OH 43062

WATKINS, KAREN L
211 ISAAC THARP ST
PATASKALA, OH 43062

ZNB CONSTRUCTION L L C,
261 MONARCH DR
PATASKALA, OH 43062

OWNER1	OWNER2	Address	City	State	Zip Code
OAKHAVEN APTS LL ,		PO BOX 857	NEWARK	OH	43058
COPE, GARY D ,		145 OAK MEADO PATASKALA		OH	43062
COPE, GARY D ,		145 OAK MEADO PATASKALA		OH	43062
GARBA, NDEYE O ,		219 ISAAC THARF PATASKALA		OH	43062
OAKHAVEN APTS LL ,		PO BOX 857	NEWARK	OH	43058
OAKHAVEN APTS LL ,		PO BOX 857	NEWARK	OH	43058
OAKHAVEN APTS LL ,		PO BOX 857	NEWARK	OH	43058
MEREDITH, SKYLAR D ,		232 ISAAC THARF PATASKALA		OH	43062
LUTZ, GERRY THOMAS LUTZ, ASHLEY DORE		200 ISAAC THARF PATASKALA		OH	43062
HEABERLIN, SANDRA ,		224 ISAAC THARF PATASKALA		OH	43062
WENGER, KEVIN ,		209 ISAAC THARF PATASKALA		OH	43062
OAKHAVEN APTS LL ,		PO BOX 857	NEWARK	OH	43058
OAKHAVEN APTS LL ,		PO BOX 857	NEWARK	OH	43058
WASHINGTON ENTEF,		494 W CHERRY ST SUNBURY		OH	43074
OAKHAVEN APTS LL ,		PO BOX 857	NEWARK	OH	43058
ZNB CONSTRUCTION Z N B CONSTRUCTIO		261 MONARCH D PATASKALA		OH	43062
HEARN, AARON M HEARN, AMBERLY L		212 ISAAC THARF PATASKALA		OH	43062
OAKHAVEN APTS LL ,		PO BOX 857	NEWARK	OH	43058
WARRINGTON, GARY WARRINGTON, JILL		139 HICKORY LN PATASKALA		OH	43062
YOUNKER, MATTHEY YOUNKER, JENNIFEEF		204 ISAAC THARF PATASKALA		OH	43062
OAKHAVEN APTS LL ,		PO BOX 857	NEWARK	OH	43058
LEE, THOMAS M LEE, DONALD A		4000 HORIZONS COLUMBUS		OH	43220
LEE, THOMAS M LEE, DONALD A		4000 HORIZONS COLUMBUS		OH	43220
LEE, THOMAS M LEE, DONALD A		4000 HORIZONS COLUMBUS		OH	43220
HELFRICH, JAMES C ,		PO BOX 921	PATASKALA	OH	43062
FORD, RANDOL R FORD, MELISSA B		220 ISAAC THARF PATASKALA		OH	43062
OAKHAVEN APTS LL ,		PO BOX 857	NEWARK	OH	43058
THE BA-A-ACK 40 FAI,		4396 STATE ROU SOMERSET		OH	43783
NIBERT, MELISSA K METTIVA, MELISSA K		228 ISAAC THARF PATASKALA		OH	43062
WATKINS, KAREN L ,		211 ISAAC THARF PATASKALA		OH	43062
OAKHAVEN APTS LL ,		PO BOX 857	NEWARK	OH	43058
COLE, BELINDA ,		PO BOX 4102	NEWARK	OH	43058
BELLESTRI, HEIDE F BELLESTRI, MICHAEL		501 PASADENA A COLUMBUS		OH	43228

KENNEDY CO,		PO BOX 1187	NEWARK	OH	43055
LONG, DARWIN L		179 OAK MEADO	PATASKALA	OH	43062
JAMES, BEVERLY L		196 ISAAC THARF	PATASKALA	OH	43062
THOMPSON, JODY		216 ISAAC THARF	PATASKALA	OH	43062
SHRINER, JERRY S		7729 LAURELWO	CANAL WINCHESTER	OH	43110
OAKHAVEN APTS LL		PO BOX 857	NEWARK	OH	43058
OAKHAVEN APTS LL		PO BOX 857	NEWARK	OH	43058
DEV, CAREE M		188 ANDREW BEI	PATASKALA	OH	43062
PHILLIPS, BARRY L	PHILLIPS, LORRIE D	215 ISAAC THARF	PATASKALA	OH	43062
OAKHAVEN APTS LL		PO BOX 857	NEWARK	OH	43058
HUMMEL, THOMAS	ALLEN, TERRY	63 HIGHLAND HC	PATASKALA	OH	43062
SHIPE, MICHAEL W	SHIPE, JESSICA A	223 ISAAC THARF	PATASKALA	OH	43062
OAKHAVEN APTS LL		PO BOX 857	NEWARK	OH	43058
OAKHAVEN APTS LL		PO BOX 857	NEWARK	OH	43058
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OAKHAVEN APTS LL		PO BOX 857	NEWARK	OH	43058
OAKHAVEN APTS LL		PO BOX 857	NEWARK	OH	43058
HURT, BARBARA A		119 HICKORY LN	PATASKALA	OH	43062
OAKHAVEN PARTNEF,				OH	43062
				OH	43062