



# Logan-Union-Champaign regional planning commission

Director: Bradley J. Bodenmiller

## Application for Preliminary Plat Approval

Date: 4/23/2026

Name of Subdivision: Meijer Jerome Township

Location: Meijer Jerome Township

Township: Jerome

Military Survey: Virginia Military Survey No. 6420

Complete Parcel(s) Identification Number (PIN): 1700310390010

Have ALL Sketch Plan review letters been obtained? Yes (Engineer, SWCD, Board of Health)

Name of Applicant: Cris Jones - Meijer Stores Limited Partnership

Address: 2350 three Mile Road NW

City: Grand Rapids

State: MI

Zip: 49544

Phone: 616-735-7992

Fax: 616-498-8546

Email: Cris.JonesJr@Meijer.com

Name of Owner of property to be subdivided: John L. Wirchainski

Address: 260 N Columbia Ave

City: Columbus

State: OH

Zip: 43209

Phone: \_\_\_\_\_

Fax: \_\_\_\_\_

Email: \_\_\_\_\_

Name of Applicant's Surveyor or Engineer: Brian Smallwood - Woolpert, Inc.

Address: 4454 Idea Center Blvd

City: Dayton

State: OH

Zip: 45430

Phone: 937-461-5660

Fax: 937-461-0743

Email: Brian.Smallwood@Woolpert.com

Proposed Acreage to be Subdivided: 29.57 acres

Current Zoning Classification: PUD Mixed Use

Proposed Zoning Changes: PUD Mixed Use

Proposed Land Use: Commercial Retail - Meijer Supercenter, Commercial Outlots

### Development Characteristics

Number of proposed lots: 4

Typical lot width (feet): 300

Number of proposed units: 1

Typical lot area (sq. ft.): Meijer=705 Outlots=325

Single Family Units: N/A

Multi-Family Units: N/A

Acreage to be devoted to recreation, parks or open space: 0 acres - N/A

10820 St Rt 347, PO Box 219

East Liberty, Ohio 43319

• Phone: 937-666-3431 •

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Recreation facilities to be provided: N/A

Do you propose deed restrictions? (If yes, attach a copy): Yes X No     

1. Proposed method of Supplying Water Service: Water Main Extension from Marysville

2. Proposed method of Sanitary Waste Disposal: Sanitary Main Extension from Marysville  
*(If on-site disposal systems are proposed, please attach letter certifying the County Board of Health approval)*

3. Requests for Variances from Subdivision Regs: Yes, granted from Union County  
*(If yes, please explain variances and reason for variances)*

List all proposed improvements and utilities and state your intention to install or provide a guarantee prior to final plat approval:

	Improvement	Installation	Guarantee
a.	<u>Sanitary</u>	<u>X</u>	<u>Bond will be provided.</u>
b.	<u>Water</u>	<u>X</u>	<u>Bond will be provided.</u>
c.	<u>Storm</u>	<u>X</u>	<u>Bond will be provided.</u>
d.	<u>Gas</u>	<u>X</u>	
e.	<u>Electric/Comm</u>	<u>X</u>	

**For Official Use**

Date filed: \_\_\_\_\_ Filing Fee: \_\_\_\_\_

Date of Meeting of Planning Commission: \_\_\_\_\_

Action by Planning Commission: \_\_\_\_\_

If rejected, reason(s) for: \_\_\_\_\_