PLANNING COMMISSION STAFF REPORT

FOR CONSIDERATION BY PLANNING COMMISSION ON SEPTEMBER 22, 2026

CASE NO. B-03-26Z

REPORT DATE: 2026-09-17

APPLICANT
Anderson Homes & Development
3011 Cambria Drive
Batavia, OH 45103

PROPERTY OWNER:
Van R. Foster & Alice E. Ward
635 Possum Hollow Road
Chillicothe, OH 45601

PARCEL ID:
PIN 012010A012

ADDRESS OF REQUEST:
Bauer Rd., Batavia, OH 45103

REQUEST:
Requesting to rezone one parcel (PIN 012010A012) consisting of +/- 10.24 acres from the "PD" Planned Development District to "E-R" Estate Residential District for the purpose of constructing 5 single-family residential homes.

ZONING:
The existing zoning for the subject property is "PD" Planned Development District. The surrounding properties consist of "PD" Planned Development District, "O-B" Office - Business District, "B-2" General Business District, and "A" Agricultural District. *See attached zoning map.*

Note: The County zoning map may show inaccuracies to what the Batavia Township Official Zoning Map has the property listed as.

LAND USE:
The subject property is currently 500 – Vacant Residential, and is adjacent to the following land uses: 350 – Industrial Warehouses, 510 – Single Family Dwelling, 550 – Condominium Residential Unit, 685 – Churches, 101 – General Farm.

HISTORY:
Property was rezoned from "A" Agricultural District to "PD" Planned Development District in February of 2025 to accommodate a residential development that would have resulted in 72 multi-family, rental townhome dwelling units in 6 buildings, with 12 dwelling units in each building and a net residential density of 7.7 dwelling units per acre.

CONTENTS OF REPORT:
Attachment A: Township Application
Attachment B: Parcel Map
Attachment C: Zoning Map

RELATIONSHIP TO TOWNSHIP ZONING & FUTURE LAND USE:
The subject property is located within both the Existing Neighborhood & Infill Area and the Business Development Area Future Land Use Classifications in the 2018 Batavia Township Growth Policy Plan (GPP). The Existing Neighborhood & Infill Area Land Use Classification represents locations where future residential development should be guided to take advantage of existing public services and roads, and to be compatible with the current subdivision pattern developing in these areas. The GPP states:

> "Allow residential development that is consistent with the densities of existing neighborhoods in the planning area – generally 2 to 3 dwelling units per acre for single family detached development and 8 to 10 dwelling units per acre for multiple family or attached single family development in planned developments".

The Business Development Area Land Use Classification represents locations where the Township should encourage development of retail, service, or office type uses to serve the population of Batavia Township, as well as the surrounding region. The locations designated for Business Development Areas are adjacent to major traffic corridors (SR 32) and at or near "interchanges". The GPP states:

> "Consider allowing mixed use developments that include a combination of non-residential and residential uses within a unified, coordinated development."

The purpose of the "E-R" Estate Residential District is defined in Article 14 of the Batavia Township Zoning Resolution as:

> "...designed to accommodate low density single-family residential development within urbanizing portions of the Township and within and adjacent to areas of similar development."

The lot standards are as follows:

Minimum Lot Area:	1 acre	Minimum Lot Width:	150 feet
FY Set Back:	50 feet	RY Setback:	50 feet
SY Setback:	25 feet		

SITE ACCESS:
Access is currently proposed to be three separate driveways along Bauer Road with a total of four lots being served by two shared driveways.

DEVELOPMENT CHARACTER:
While the proposed development does not meet the Growth Policy Plan's recommendations, the use may be considered a compatible use based on surrounding developments. The surrounding area is residential, commercial, and agricultural and includes lots of varying sizes. The lower density single family housing could be considered an adequate transition buffer between the higher intensity residential/commercial uses and the large, agriculturally zoned lots along Old SR 32. However, this area could also be more appropriately suited towards more intense uses due to the proximity to major traffic corridors and existing public services, as stated in the GPP.

STAFF ANALYSIS:
Following a comprehensive analysis, staff has evaluated Batavia Township Zoning Map Amendment Case B-03-26Z and its request to rezone one parcel (PIN 012010A012) consisting of +/- 10.24 acres from the "PD" Planned Development District to "E-R" Estate Residential District for the purpose of constructing 5 single-family residential homes at a density of +/- .5 dwelling units per acre.

While the area could be more appropriately suited towards more intense uses due to the proximity to major traffic corridors and existing public services, as stated in the GPP, the lower density single family housing could be considered an adequate transition buffer between the higher intensity residential/commercial uses and the large, agriculturally zoned lots along Old SR 32. However, any future subdivision of the site must follow the rules and regulations outlined in the Clermont County Subdivision Regulations. The current proposal would be considered a minor lot split, and it would be administratively reviewed by the Clermont County Engineer's Office, the Clermont County Building Department's Division of Water Management and Sediment Control, the Clermont County Water Resources Department, and the Clermont County Department of Community and Economic Development.

STAFF RECOMMENDATION:
Based on the staff analysis in the following report, the following motion is recommended, **RECOMMEND APPROVAL WITH CONDITIONS** of Batavia Township Zoning Map Amendment Case B-03-26Z and its request to rezone one parcel (PIN 012010A012) consisting of +/- 10.24 acres from the "PD" Planned Development District to "E-R" Estate Residential District for the purpose of constructing 5 single-family residential homes at a density of +/- .5 dwelling units per acre.

1. Any future development of the site must comply with any and all regulations from Clermont County, Batavia Township, the State of Ohio, or any other applicable agency.

BATAVIA TOWNSHIP
PLANNING & ZONING DEPARTMENT
1535 Clough Pike Batavia, Ohio 45103
(513)-732-3888 TCorbett@BataviaTownship.org

SUBMITTAL DATE 9-9-26
RESOLUTION NO. _____
FEE $ 1,000

CASE REVIEW NO. B-03-262
RECEIVED BY TC

APPLICATION FOR ZONING MAP AMENDMENT

APPLICANT INFORMATION

Applicant's Name/Firm Anderson Homes & Development **Phone** 513-724-3397

Applicant's Mailing Address 3011 Cambria Drive Batavia, Ohio 45103

Primary Contact's Name Don Anderson **Phone** 513-312-5346

Email Address danderson@anderson.homes

* The applicant will be responsible for any review fees that exceed the initial application filing fee.
** If the applicant is not the property owner, the owner must provide a notarized "Consent to Rezone" Statement.

PROPERTY INFORMATION

Property Address/Location Bauer Rd

Owner's Name Van R. Foster and Alice E. Ward **Phone** 614-288-3588

Owner's Tax Mailing Address 635 Possum Hollow Rd. Chillicothe Oh 45601

Property Address 181 Baranof Drive West Westerville, Oh 43081

Parcel No. (s) 012010A012 _____, _____,
_____, _____,

Total Acreage 10.238 **Zoning Designation** PD **SPO District** _____

According to Ohio Revised Code/ORC 519.12, Amendments to the Zoning Resolution can be initiated in three ways:

1. Motion of the Township Zoning Commission (+10 parcels)
2. Passage of a resolution by the Board of Township Trustees (+10 parcels)
3. Filing an application by one or more owners or lessees of the property within the area proposed to be changed or affected by the amendment, with the Township Zoning Commission.

SUPPORTING INFORMATION

Is this property being considered for a zone change in its entirety? YES☑ NO☐
If "NO" what is the proposed acreage requesting to be rezoned? _____
Is the property located within an adjoining Township or Village? YES☐ NO☑
Was this property zoned differently in the past 5 years? YES☑ NO☐
The current owner acquired the property on 2-1-2021 **(if lessee, please attach lease terms).**

Existing Zoning District(s) (PD) Planned Development
Proposed Zoning District (E-R) Estate Residential
Existing Land Use Vacant Lot
Proposed Land Use Single Family Residential Homes

Explain how the proposed zoning of the property is appropriate, considering the surrounding zoning designations and existing land uses.

The parcel is surrouned by single family homes and would be benificial to the character of the surrounding neighborhood

Describe the specific reasons or objectives behind the proposed zoning map amendment. What are the desired outcomes or benefits that you expect from this change?

To build well constructed single family homes and enhance the aesthetics of the neighborhood

How does the proposed zoning map amendment align with the overall 2018 Batavia Township Growth Policy Plan? Consider the compatibility with the goals of the plan.

It will bring mutiple families to the area and help support local businesses and schools

How does the proposed zoning map amendment fit within the existing infrastructure capacity of the township? Consider factors such as transportation, utilities, and public services.

The parcel is close to St.Rt.32 and Old 32 for quick access, the parcel has utilities at the road and the parcel is close to Batavia Schools

Have you conducted any studies or assessments to evaluate the potential impacts of the proposed zoning change? This could include traffic studies, environmental impact assessments, or economic feasibility studies.

No studies have been done

Has there been any community engagement or outreach conducted to gather feedback and input from the residents or stakeholders in the affected area? If so, please provide details on the nature and outcome of these engagements.

No community engagement or outreach has been conducted

Are there any potential conflicts or concerns from neighboring property owners or other stakeholders that you are aware of? If so, please explain and provide any relevant documentation or correspondence.

No conflicts or concerns from neighboring property owners that I am aware of

What measures or strategies are being proposed to mitigate any potential negative impacts or conflicts resulting from the zoning map amendment? This could include buffer zones, landscaping, or other design elements.

There are no potential negative impacts or conflicts

Are there any legal or regulatory considerations that need to be taken into account when evaluating the proposed zoning map amendment? This could include compliance with state or local zoning laws, environmental regulations, or any other relevant legal requirements.

No legal or regulatory issues with the parcel

ATTACHMENTS

1. **Please provide a list of all adjacent property owners, as requested on the attached form (pg. 5).**

2. **Please provide a copy of the tax map that identifies the subject property, and clearly denotes the zoning classification of all properties within 200 ft. of the subject property, as well as the school district(s) involved.**

3. **Please provide the legal description of the area requested to be zoned.**

4. **Please submit development plans that clearly show boundaries, proposed and existing buildings, roadways, waterways (including retention/detention areas), parking areas, and circulation areas. Plans should be submitted on full-sized paper and reduced to 11" x 17" paper, and a digital copy should be provided on a flash drive, CD, or Share file.**

5. **Application Fee of $800 (Residential) or $1000 (Business, Commercial, Industrial) as most recently determined by the Board of Trustees.**

6. **The Applicant will be responsible for any professional consultant fees that exceed the customary and usual amount.**

According to the records of the Clermont County Auditor's Tax List, the following persons/firms are currently listed as owner(s) of property adjacent to or directly across the street from the subject property.

Visit www.clermontauditorrealestate.org for information. Type the Owner's Name, Tax Mailing Address, and Parcel Identification Number Below.

Owners(s) Name	Tax Mailing Address	Parcel Number
CROSSPOINTE COMMUNITY ASSN C/O TOWNE PROPERTIES	11857 KEMPER SPRINGS DR CINCINNATI OH 45240	012002D173
TRITSCHLER GALE L	2161 VILLAGEPOINTE DR, BATAVIA OH 45103	012002D099
SHOOK GREG L & JAN M	2163 VILLAGEPOINTE DR. BATAVIA OH 45103	012002D100
FISHER DAVID EUGENE JR	2165 VILLAGEPOINTE DR BATAVIA OH 45103	012002D101
RING MEGHAN M & JOEL CHRISTOPHER	2167 VILLAGEPOINTE DR. BATAVIA OH 45103	012002D102
SAMMONS MICHAEL P & NICOLE M	2169 VILLAGEPOINTE DR BATAVIA OH 45103	012002D103
PHILPOT KENNETH D & TERESA A	2171 VILLAGEPOINTE DR. BATAVIA OH 45103	012002D104
FISHER BRANDON & COURTNEY	2173 VILLAGEPOINTE DR BATAVIA OH 45103	012002D105.
SANDERS ENRIQUE JESUS & BARKER TINA LEE	2175 VILLAGEPOINTE DR BATAVIA OH 45103	012002D106
COMMONS OF CROSSPOINTE TWO CONDOMINIUMS	2150 COMMONS CIRCLE DR. BATAVIA OH 45103	016707F00CA
LIFESTREAM CHRISTIAN CHURCH INC	2170 OLD STATE ROUTE 32 BATAVIA OH 45103	012002D096
LIFESTREAM CHRISTIAN CHURCH INC	2170 OLD STATE ROUTE 32 BATAVIA OH 45103	012002D070
GARBER KENNETH W & ESTHER L	2205 BAUER RD BATAVIA OH 45103	012010A039
WHITTAKER WILLIAMS ELIZABETH	4301 BRUNK RD BATAVIA OH 45103	012010A097
HAWKINS JAMES	2225 BAUER RD BATAVIA OH 45103	012010A095
HAWKINS JAMES	2225 BAUER RD BATAVIA OH 45103	012010A002
WINEMILLER TODD ET AL	6475 TAYLOR PK BLANCHESTER OH 45107	012004A119

AFFIDAVIT – CONSENT TO REZONE

PROPERTY OWNER

I/We, Van R. Foster the undersigned, being the legal owner of the property that is the subject of this rezoning request, hereby acknowledge and consent to the submission of this application. I have reviewed the Batavia Township Zoning Resolution as it pertains to this request and understand the implications of the proposed zoning change.

I certify that the information provided in this application and all attachments is accurate and complete to the best of my knowledge. I attest to the truth and accuracy of all information submitted.

Note: If the property is owned by a Limited Liability Company (LLC) or Corporation, documentation must be included identifying the authorized signatory (e.g., operating agreement or corporate resolution).

PROPERTY OWNER

Van R. Foster

Print Name

Signature

State of Ohio, County of Delaware

Subscribed and sworn before me on this 2nd day of September, 2024.

Notary Public
My Commission Expires: 6/19/2030

NOTARIAL SEAL STATE OF OHIO

ROBYN MONTGOMERY
Notary Public, State of Ohio
My Commission Expires:
June 19, 2030

AFFIDAVIT – CONSENT TO REZONE

PROPERTY OWNER

I/We, Alice E. Ward the undersigned, being the legal owner of the property that is the subject of this rezoning request, hereby acknowledge and consent to the submission of this application. I have reviewed the Batavia Township Zoning Resolution as it pertains to this request and understand the implications of the proposed zoning change.

I certify that the information provided in this application and all attachments is accurate and complete to the best of my knowledge. I attest to the truth and accuracy of all information submitted.

Note: If the property is owned by a Limited Liability Company (LLC) or Corporation, documentation must be included identifying the authorized signatory (e.g., operating agreement or corporate resolution).

PROPERTY OWNER

Alice E. Ward

Print Name Alice E. Ward

Signature Alice E Ward

State of Ohio, County of Ross

Subscribed and sworn before me on this 2ND day of Sept, 2026.

Notary Public
My Commission Expires: 1-15-2030

Toni L Austin

TONI L AUSTIN
Notary Public
State of Ohio
My Comm. Expires
January 15, 2030

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AFFIDAVIT – CONSENT TO REZONE

APPLICANT / DEVELOPER

I/We, Donald Anderson, the undersigned applicant or developer, hereby agree to be responsible for the payment of any professional review fees incurred by Batavia Township that exceed the standard fees associated with the submission and processing of this rezoning application. I have reviewed the Batavia Township Zoning Resolution as it applies to this request and affirm that the application and all supporting materials are accurate and complete to the best of my knowledge.

Note: If the property is owned by a Limited Liability Company (LLC) or Corporation, documentation must be included identifying the authorized signatory (e.g., operating agreement or corporate resolution).

APPLICANT/DEVELOPER

Donald Anderson

Print Name

Signature

State of Ohio, County of Clermont

Subscribed and sworn before me on this 31 day of August, 2026.

Marie A. Sharp

Notary Public
My Commission Expires: August 03, 2028

NOTARIAL SEAL STATE OF OHIO

Marie A. Sharp
Notary Public, State of Ohio
My Commission Expires:
August 03, 2028

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This Conveyance has been examined and the Grantor has complied with Section 319.202 of the Revised Code.
Purchase Price: $0.00
Transfer #545 Transfer Fee: $0.50
Conveyance Fee: $0.00
Filed with the office of
Linda L. Fraley
02/01/2021
BY: SMICHAEL

202100003342
Filed for Record in Clermont County, Ohio
Deborah Hall Clepper, Recorder
02/01/2021 08:58 AM Recording Fees: $50.00
DEED OR 2868 / p228 - p231

AFFIDAVIT FOR TRANSFER TO SURVIVOR

EILEEN M. FOSTER, Deceased
JACK B. FOSTER, Deceased

To

VAN R. FOSTER and
ALICE E. WARD

State of Ohio, Champaign County, SS

VAN R. FOSTER and ALICE E. WARD, being first duly sworn, say that **EILEEN M. FOSTER,** died a resident of Clark County, Ohio, on the 23rd day of October, 2020, as shown on the attached Death Certificate and **JACK B. FOSTER**, died a resident of Clark County, Ohio, on the 22nd day of September, 2010 as shown on the attached Death Certificate.

That **EILEEN M FOSTER and JACK B. FOSTER** were the owners of record of the real estate described in Exhibit "A" as recorded at Book 2229, Page 829 of the Official Records of Clermont County, Ohio.

That the Transfer on Death Designation Affidavit dated April 29, 2010, and recorded in **OR VOLUME 2241, PAGE 831** of the Official Records of CLERMONT COUNTY, OHIO, designated **VAN R. FOSTER** and **ALICE E. WARD**, the transfer on death beneficiaries to the real estate described on the attached Exhibit "A".

That this Affidavit is made for the purpose of showing **VAN R. FOSTER and ALICE E. WARD** to be the sole owners and vested with the entire fee simple title to the above described real estate, and for the purpose of obtaining a transfer by the Auditor of this county on the tax duplicate as provided by Section 319.20, Revised Code; and that the address of **ALICE E. WARD is 635 Possum Hollow Road, Chillicothe, Ohio 45601.**

VAN R. FOSTER

ALICE E. WARD

Sworn to before me and subscribed in my presence this 11th day of January, 2021.

ALLEN R. MAURICE, ATTORNEY AT LAW
Notary Public, State of O. o
My Commission has no Expiration Date
Section 147.03 O.R.C.

NOTARY PUBLIC

This instrument prepared by:
Allen R. Maurice, Attorney at Law
117 West Court Street, Urbana, Ohio 43078

Exhibit "A"

Situated in the State of Ohio, Clermont County, Batavia Township, Gary's Military Survey No. 1116 of the Virginia Military District and being more particularly described as follows:

Beginning at the intersection of Crosspoint Drive with Bauer Road; thence, with the said Bauer Road, north 55 deg. 48'16" east, 713.84 feet to a nail; thence leaving said Bauer Road with the fenced lines of Jay L. & Dorothy Riedel, Trustee and Patricia Morris, passing a 5/8" I. Pin at 24.48 feet south 02 deg. 50'51" west, 767.40 feet to a 1/2" I. Pin; thence, continuing with said line of Patricia Morris, south 45 deg. 02'54" west, 240.50 feet to a 5/8" I. Pin; thence, with the line of Kenneth William & Esther Garber and passing a 5/8" I. Pin at 445.65 feet (the east right-of-way for Bauer Road), south 88 deg. 15'51" west, 481.85 feet to a 5/8" I. Pin; thence, with the east edge of Bauer Road and the lines of Batavia Church of Christ, north 00 deg. 54'51" east, 256.85 feet to a 5/8" I. Pin; thence, crossing Bauer Road, south 89 deg. 39'59" east, 15.06 feet to the center; thence, with the center of Bauer Road, north 00 deg. 20'01" east, 150.00 feet to a curve; thence, with said curve deflecting to the right, along an arc of 164.58 feet, having a radius of 170.00 feet and being subtended by a chord bearing north 28 deg. 04'08" east, 158.23 feet; thence, continuing with said Bauer Road, north 55 deg. 48'16" east, 6.09 feet to the beginning, containing 10.238 acres of land more or less, subject to all legal highways and easements of record.

The above described real estate if all lands conveyed to Judy Hall Hargrave and Jack B. Foster by Official Record 1122, Page 364 of the Clermont County Deed Records and identified as Parcel No. 01-20-10A-012 on the Tax Maps of said Clermont County.

Bearings in the above described are based on Clermont County G.P.S. Monuments, Station103 and all monuments called for are in good condition.

The above description is taken from and in accordance with a survey and plat, dated October 25, 2002, by Robert Joseph Shannon, P.S., Ohio Registration No. 7835.

Parcel Number: 01-20-10A-012.

CLOSURE ACCEPTABLE
CLERMONT COUNTY
TAX MAP OFFICE
PLEASE ATTACH THIS STAMPED LEGAL TO YOUR DEED

02/01/2021
Legal Description
APPROVED
Clermont County, OH Engineer
Jeremy P. Evans, P.E., P.S.
BY: ALEACH

012010A012. 10.238 AC TL72-77

DEED | 202100003342 | OR 2868 / p230 | Recorded in CLERMONT COUNTY, OH 02/01/2021 08:58 AM VIEW

Primary Reg. Dist. No. 1200 | Ohio Department of Health - Vital Statistics | State File No. 2020109654

Registrar's No. 2020001472 | CERTIFICATE OF DEATH

DECEDENT

1. Decedent's Legal Name (First, Middle, Last, Suffix) (Include AKA's if any)	2. Sex	3. Date of Death (Month/Day/Year)
AUDREY EILEEN FOSTER	FEMALE	OCTOBER 23, 2020

4. Social Security Number	5a. Age (Years)	5b. Under 1 Year: Months	Days	5c. Under 1 day: Hours	Minutes	6. Date of Birth (Mo/Day/Year)	7. Birthplace (City and State or Foreign Country)
[redacted]	96					JANUARY 17, 1924	WAVERLY, OHIO

8a. Residence State	8b. County	8c. City or Town
OHIO	CLARK	ENON

8d. Street Address and Zip Code	9. Ever in US Armed Forces?
7163 STEIN ROAD 45323	NO

10. Marital Status at Time of Death	11. Surviving Spouse's Name (If wife, give name prior to first marriage)
WIDOWED (AND NOT REMARRIED)	

12. Decedent's Education	13. Decedent of Hispanic Origin	14. Decedent's Race
HIGH SCHOOL GRADUATE OR GED	NO	WHITE

15. Father's Name	16. Mother's Name (prior to first marriage)
LAWRENCE MILLER	LUCY ANDERSON

17a. Informant's Name	17b. Relationship to Decedent	17c. Mailing Address (Street and Number, City, State, Zip Code)
ALICE WARD	DAUGHTER	635 POSSUM HOLLOW RD CHILLICOTHE, OHIO 45601

18a. Place of Death	18b. Facility Name (If not Institution, give street & number)	18c. City or Town, State and Zip Code	18d. County of Death
NURSING HOME/LONG TERM CARE FACILITY	DAYSPRING OF MIAMI VALLEY	FAIRBORN, OH 45324	CLARK

DISPOSITION

19. Funeral Service Licensee or Other Agent	20. License Number (of licensee)	21. Name and Complete Address of Funeral Facility
KRISTEN C BOYER	010033	BOYER FUNERAL HOME INC 125 W 2ND ST WAVERLY, OH 45690

22. Method and Place of Disposition
BURIAL - EVERGREEN UNION CEMETERY, WAVERLY, OH

23. Local Registrar	24. Date Filed (Month/Day/Year)
Kelly Stickney	Nov. 2, 2020

CERTIFIER

26a. Certifier (Check only one)
- ☒ Certifying Physician — To the best of my knowledge, death occurred at the time, date, and place; and due to the cause(s) and manner stated.
- ☐ Coroner or Medical Examiner — On the basis of examination and/or investigation, in my opinion, death occurred at the time, date, and place; and due to the cause(s) and manner stated.

26b. Time of Death	26c. Date Pronounced Dead (Month/Day/Year)	26d. Was Case Referred to Medical Examiner or Coroner?
0932	10/23/20	NO

26e. Certifier Name and Title	26f. License number	26g. Date Signed (Month/Day/Year)
MD	35.057996	10/27/20

27. Name (First, Middle, Last) and Address of Person who Completed Cause of Death
NAYNESH RAMESH PATEL, 4172 INDIAN RIPPLE RD, BEAVERCREEK, OH 45440

CAUSE OF DEATH

28. Part I. Enter the disease, injuries, or complications that caused the death. Do not enter the mode of dying, such as cardiac or respiratory arrest, shock, or heart failure. Use only one cause on each line. Type or print in permanent blue or black ink.

		Approximate Interval: Onset and Death
Immediate Cause (Final disease or condition resulting in death)	a. Sepsis	1 year
Sequentially list conditions, if any, leading to immediate cause.	b. Due to (or as Consequence of): Atrial Fibrillation	5 years
Enter Underlying Cause (Disease or injury that initiated events resulting in a death)	c. Due to (or as Consequence of): Kidney Disease	5 years
	d. Due to (or as Consequence of): Hypertension	5 years

Part II. Other significant conditions contributing to death but not resulting in the underlying cause given in Part I.

29a. Was An Autopsy Performed?	29b. Were Autopsy Findings Available Prior To Completion Of Cause of Death?
☐ Yes ☒ No	☐ YES ☐ NO ☐ Not Applicable

30. Did Tobacco Use Contribute to Death?	31. If Female, Pregnancy Status	32. Manner of Death
☐ Yes ☒ Unknown ☐ No ☐ Probably	☒ Not pregnant within past year ☐ Pregnant at time of death ☐ Not pregnant, but pregnant within 42 days of death ☐ Not pregnant, but pregnant 43 days to 1 year before death ☐ Unknown if pregnant within the past year	☒ Natural ☐ Homicide ☐ Accident ☐ Pending Investigation ☐ Suicide ☐ Could not be determined

33a. Date of Injury (Mo/Day/Year)	33b. Time of Injury	33c. Place of Injury (e.g., Decedent's home, construction site, restaurant, wooded area)	33d. Injury at Work?
			☐ Yes ☐ No

33e. Location of Injury (Street and Number or Rural Route Number, City or Town, State)

33f. Describe How Injury Occurred:

33g. If Transportation Injury, Specify:
☐ Driver/Operator ☐ Pedestrian ☐ Passenger ☐ Other:

HEA 2724 Rev. 08/18

1651956 2020109654

Kelly Stickney, Registrar

NOV - 2 2020

Kelly Stickney

I HEREBY CERTIFY THIS DOCUMENT IS AN EXACT COPY OF THE RECORD ON FILE WITH THE OHIO DEPARTMENT OF HEALTH

REV. 7/2016

VERIFY PRESENCE OF ODH WATERMARK FOLD TO LEFT TO VIEW

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Reg. Dist. No. 12 — Ohio Department of Health
Primary Reg. Dist. No. 1200 — VITAL STATISTICS
Registrar's No. 2010001064 — CERTIFICATE OF DEATH — State File No.
Type or print in permanent blue or black ink

1. Decedent's Legal Name (Include AKA's if any) (First, Middle, LAST, suffix): JACK FOSTER		2. Sex: Male	3. Date of Death (Mo/Day/Year): September 22, 2010
DECEDENT			
4. Social Security Number: [redacted]	5a. Age [Years]: 89	5b. Under 1 Year: Months / Days	5c. Under 1 day: Hours / Minutes
6. Date of Birth (Mo/Day/Year): August 30, 1921	7. Birthplace (City and State or Foreign Country): BATAVIA, OHIO		
8a. Residence State: OHIO	8b. County: CLARK	8c. City or Town: ENON	
8d. Street and Number: 7163 Stine Road	8e. Apt. No	8f. Zipcode: 45323	8g. Inside City Limits?: No
9. Ever in US Armed Forces?: Yes	10. Marital Status at Time of Death: Married	11. Surviving Spouse's Name (If wife, give name prior to first marriage): EILEEN MILLER	
12. Decedent's Education: HIGH SCHOOL GRADUATE OR GED	13. Decedent of Hispanic Origin: No	14. Decedent's Race: White	
15. Father's Name: EDWIN FOSTER	16. Mother's Name (prior to first marriage): FLORENCE BUERKLE		
17a. Informant's Name: EILEEN FOSTER	17b. Relationship to Decedent: Wife	17c. Mailing Address (Street and Number, City, State, Zip Code): 7163 Stine Road ENON, OHIO 45323	
18a. Place of Death: Nursing Home/Long Term Care Facility			
18b. Facility Name (If not Institution, give street & number): DAYSPRING HEALTH CARE CENTER	18c. City or Town, State and Zip Code: FAIRBORN, OH 45324	18d. County of Death: CLARK	
DISPOSITION			
19. Signature of Funeral Service Licensee or Other Agent: Walter L Adkins	20. License Number (of licensee): 008580	21. Name and Complete Address of Funeral Facility: ADKINS FH LLC 7055 DAYTON RD ENON, OH 45323	
22a. Method of Disposition: Burial	22b. Date of Disposition: September 25, 2010		
22c. Place of Disposition (Name of Cemetery, Crematory, or other place): Evergreen Union Cemetery	22d. Location (City/Town and State): WAVERLY, OH		
REGISTRAR			
23. Registrar's Signature: Lorrie Sparks	24. Date Filed: Sept 28, 2010		
24a. Name of Person Issuing Burial Permit: ADKINS, WALTER	25b. Permit No.: 1200	25c. Date Burial Permit Issued: Sept. 22, 2010	
CERTIFIER			
26a. Certifier (Check only one): [X] Certifying Physician — To the best of my knowledge, death occurred at the time, date, and place, and due to the cause(s) and manner stated. [ ] Coroner — On the basis of examination and/or investigation, in my opinion, death occurred at the time, date, and place, and due to the cause(s) and manner stated.			
26b. Time of Death: 04:05	26c. Date Pronounced Dead (Mo/Day/Year): 9 22 2010	26d. Was case referred to coroner?: Yes	
26e. Signature and Title of Certifier	26f. License number: 35.057996	26g. Date Signed: 9/28/10	
27. Name (Last, First, Middle) and Address of Person who Completed Cause of Death: PATEL, NAYNESH RAMESH, 4172 INDIAN RIPPLE ROAD BEAVERCREEK, OH 45440			

CAUSE OF DEATH

28. PART I. Enter the disease, injuries, or complications that caused the death. Do not enter the mode of dying, such as cardiac or respiratory arrest, shock, or heart failure. Use only one cause on each line. Type or print in permanent blue or black ink.

		Approximate Interval: Between Onset and Death
Immediate Cause (Final disease or condition resulting in death)	a. Prostate Cancer	years
Sequentially list conditions, if any, leading to immediate cause	b. Due to (or as Consequence of): Hypertension	years
	c. Due to (or as Consequence of):	
Enter Underlying Cause (Disease or injury that initiated events resulting in death)	d. Due to (or as Consequence of):	

Part II. Other significant conditions contributing to death but not resulting in the underlying cause given in Part I.

29. Did Tobacco Use Contribute to Death?: [ ] Yes [ ] No [X] Unknown [ ] Probably	30. If Female, Pregnancy Status: [ ] Not pregnant within past year [ ] Pregnant at time of death [ ] Not pregnant, but pregnant within 42 days of death [ ] Not pregnant, but pregnant 43 days to 1 year before death [ ] Unknown if pregnant within the past year	31. Manner of Death: [X] Natural [ ] Homicide [ ] Accident [ ] Pending Investigation [ ] Suicide [ ] Could not be determined
32a. Was An Autopsy Performed?: [ ] Yes [X] No	32b. Were Autopsy Findings Available Prior To Completion Of Cause of Death?: [ ] Yes [ ] No [ ] Not Applicable	

33a. Date of Injury (Mo/Day/Year)	33b. Time of Injury	33c. Place of Injury (e.g., Decedent's home, construction site, restaurant, wooded area)	33d. Injury at Work?: [ ] Yes [ ] No
33e. Location of Injury (Street and Number or Rural Route Number, City or Town, State)			
33f. Describe How Injury Occurred:		33g. If Transportation Injury, Specify: [ ] Driver/Operator [ ] Pedestrian [ ] Passenger [ ] Other:	

HEA 2724 Rev. 01/07

I HEREBY CERTIFY THIS DOCUMENT IS AN EXACT COPY OF THE RECORD ON FILE WITH THE OHIO DEPARTMENT OF HEALTH.

OC-1102554 7

PARCEL MAP **B-03-26Z**

PROPERTY INFORMATION

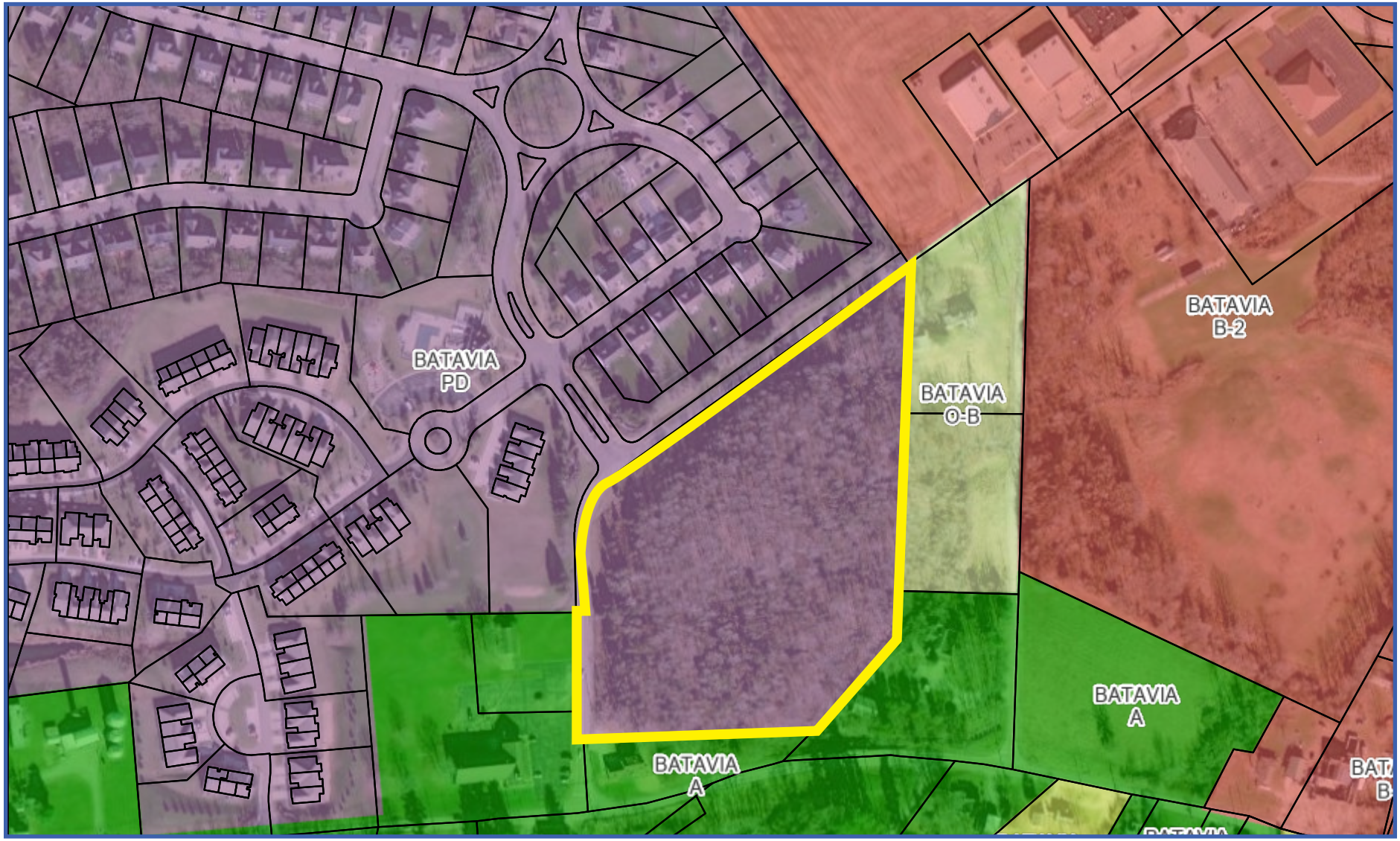
Parcel Numbers: 012010A012

Total SIte Area: +/- 10.24 Acres

CLERMONT COUNTY OHIO

Grow here

ZONING MAP **B-03-26Z**



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Grow here