



City of Ontario

555 Stumbo Road Ontario, Ohio 44906

www.ontarioohio.org

Tel: 419.529.3818

Fax: 419.529.6132

Preliminary Plat Approval Application

Ontario, Ohio

Date: _____ Application number _____

1. Name of applicant: _____

Address: _____

Phone number (s): _____

2. Name of Surveyor or Engineer: _____

Address: _____

Phone number (s): _____

3. Name of Subdivision: _____

4. Locational description: Section _____ Township _____

Range _____ Other _____

(In addition please attach a copy of the legal description)

5. Proposed use: _____

6. Present zoning district: _____

7. Proposed zoning changes if any: _____

8. Number of lots: _____ Area of parcel(S): _____

9. Do you propose deed restrictions? yes _____ no _____

(If yes please attach a copy.)

10. What type of sewage disposal do you propose? _____

(if an on lot type of disposal is proposed, include approval letter from the EPA and The Richland County Health Department.)

11. List all proposed improvements and utilities and state your intention to install or post A guarantee prior too actual installation.

Improvement	Installation	Gaurantee
a. _____	_____	_____
b. _____	_____	_____
c. _____	_____	_____
d. _____	_____	_____



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12. List other materials submitted with this application.

Item

- a. _____
- b. _____
- c. _____
- d. _____
- e. _____

Applicant: _____

Surveyor or Engineer: _____



Office use only

Date received: _____

Date of meeting of Planning Commission: _____

Action by Planning Commission: _____

If Plat rejected, reasons for rejection: _____

Date: _____

Chairman: _____