



City of Ontario

555 Stumbo Road Ontario, Ohio 44906

www.ontarioohio.org

Tel: 419.529.3818

Fax: 419.529.6132

New Major Subdivision Plat Process

1. Make contact with acting authorities:
 - a. Richland County Tax Map Office (Elaine Kiefer 419-774-5620)
 - b. City of Ontario Zoning Inspector (Adam Gongwer 419-529-2530)
e-mail agongwer@ontarioohio.org
 - c. City of Ontario Service-Safety Director (Jeff Wilson 419-529-2495)
e-mail jwilson@ontarioohio.org
2. Submit Preliminary Major Subdivision Plat to Elaine for her review.
3. Submit Preliminary Major Subdivision Plat to the City of Ontario Zoning Inspector and City Engineer along with your Preliminary Review paperwork and fee (\$50.00). Allow up to 4 weeks for review time.
4. Once reviewed and all of the necessary changes have been made to the Preliminary Major Subdivision Plat the Zoning Inspector will add the preliminary plat to the Planning Commission Agenda. You must be present for the Planning Commission meeting. Planning Commission meetings are held the 2nd Wednesday of every month at 5:00pm in the Municipal Building Community Room located at 555 Stumbo Road, Ontario, Ohio 44906.
5. Once Planning Commission has approved the Preliminary Major Subdivision Plat you may then begin working on your Final Major Subdivision Plat.
6. Submit Final Major Subdivision Plat to the Richland County Tax Map Office.
7. Submit Final Major Subdivision Plat to the Zoning Inspector for final review and paperwork. (fee \$50.00) Please allow at least one month for review time for both the Zoning Inspector and the City Engineer. In that time, you will receive information on what needs to be added or removed as well as if there are any variances (fee \$150.00) that will be required. The Storm Water Bond and application must be turned in at that time. (fee \$150.00) The Performance Guarantee must be turned in at that time. The Impact Fee must be paid before the final plat is signed and returned to the Richland County Tax Map office with approval.
 - a. Plats deemed ready for Planning Commission hearing by the City Engineer and the Zoning Inspector shall be heard at the next Planning Commission meeting.

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Example:

Final Plat is turned in by the beginning of the last week of February for final review. The plat is reviewed and feedback is given for corrections. The updated final plat is turned in for final review by the middle of March. The absolute final cutoff is the 25th of that month or in this case March. Now, if the final plat is turned in on the 25th after the corrections are made, there will not be enough time for the final review. We recommend that the final plat (after corrections have been made) be turned in no later than the beginning of the month for final review to be deemed ready to submit to Planning Commission, so the final plat should actually be turned in by the beginning of February or at the very outside the beginning of the second week of February.

8. Once all the changes have been made and approved by the City Engineer and Zoning Inspector and all the paperwork and fees are turned in the final plat will then be added to the Planning Commission agenda for the most current meeting. You must be present at the meeting for any questions.
9. Once the Plat is passed by the Planning Commission the Zoning Inspector will inform the Richland County Tax map office so they may finish their review.

Total time to be expected for this process (within the City of Ontario) is approximately 2 to 3 months. This will include all the review time that is needed, and Planning Commission meetings.

Fee schedule for the City of Ontario:

- a. Preliminary Plat review fee \$50.00
- b. Final Plat review fee \$50.00
- c. Variance fee \$150.00 each
- d. Storm Water fee \$150.00
- e. Road Impact fees (Varies, see Chapter 913)

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Preliminary Plat Approval Application
Ontario, Ohio

Date: _____ Application number PP- _____

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.	_____	_____

12. List other materials submitted with this application.

Item	
a.	_____
b.	_____
c.	_____
d.	_____
e.	_____

Applicant: _____

Surveyor or Engineer: _____



Zoning Office use only

Date received: _____

Date of meeting of Planning Commission: _____

Action by Planning Commission: _____

If Plat rejected, reasons for rejection: _____

Date: _____ Chairman: _____

Final Plat Approval Application
Ontario, Ohio

Date: _____ Application number: PF- _____

1. Name of applicant: _____
Address: _____
Phone number (s): _____

2. Name of Surveyor or Engineer: _____
Address: _____
Phone number (s): _____

3. Name of Subdivision: _____

4. Date preliminary plat approved: _____

5. Was a Zoning change requested? _____ yes _____ no
(If yes, the plat may not be approved until it conforms with the local zoning.)

6. Have all required improvements been installed? _____ yes _____ no
(if no include detailed estimates of cost and a statement relative to the method of improvement guarantee. All estimates must be approved by the City Engineer.)

7. Do you propose deed restrictions? _____ yes _____ no
(if yes include final copy.)

8. List other material submitted with this application.

Item

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

(Zoning Office use)

Date Received: _____

Date of meeting of Planning Commission: _____

Plat fee \$_____ Inspection fee if any \$_____

Action by Planning Commission: _____

If plat rejected, reasons for rejection _____

Date: _____

Chairman: _____



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555 Stumbo Road Ontario, Ohio 44906

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Contractor's License Application

The City of Ontario, Ohio has enacted Ordinance 06-13, on 05-04-06, requiring
ALL CONTRACTORS WORKING WITHIN THE City limits
to obtain an annual license. License runs from
January 1, through December 31.
You must apply for a renewal license each calendar year.

All forms and applications must be typed or legibly printed.
No license will be issued unless all required information is submitted.

Each Zoning Permit

At the time a zoning permit is issued for each project a list of subcontractors that are
intended to be used on that project will be required.

After submittal of the completed forms signed by the authorized representative and the payment of
the \$100.00 license fee (ordinance 18-47), your license will be mailed to you within ten (10) days.

Please complete all information requested including a list of intended Subcontractors.
Subcontractors are also required to obtain a license.)

You, as the general contractor, are required to see that all subcontractors are licensed.

Renewal annual license fee for the following year will be \$50.00 (Ordinance 18-47).

Application is available on City Website:
www.ontarioohio.org

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Contractor's License Requirements for Submission

1. Provide Certificate of Insurance (COI).
2. Provide Contractors license form for either New or Renewal. (The renewal may only be used if the company or individual Contractors License was obtained the previous calendar year.)
3. Provide payment in the form of a check or money order.
4. Provide Proposed Site Location information on form.
(Not required for Sewer Contractors.)
5. Please send the above required information and payment to:

Ontario Municipal Building
Attention: Contractors License
555 Stumbo Road
Ontario, Ohio 44906-1259

Please specify on envelope if this is a General or Sewer Contractor License

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Contractor's License Application Form

New \$100.00 or Renewal \$50.00

To be paid by check or money order, NO CASH

General Contractor Sewer Contractor or Both

Individual Partnership Corporation

Name of Contracting Firm _____

Address, City, State, Zip _____

Phone Number _____ Fax Number _____

Name of Principal (if Individual) _____ Social Security # _____

Name of President (if Corporation) _____ Federal ID# _____

Description of type of business: _____

Number of years in this business: _____

I acknowledge that I am authorized to sign this application and that I/we will withhold and submit to the City of Ontario, Ohio those City taxes as outlined by the attachment describing Ordinance # 15-45 (Chapter 193). I also acknowledge that all subcontractors will obtain a license. I am responsible to assure compliance.

Authorized Signature

Title

Date

Proposed Site Location:

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Income Tax

As a contractor working in the City of Ontario, Ohio you are required to abide by Chapter 193 (Ordinance 15-45 which was passed on November 19th, 2015).

We remind you all gross wages earned by your employees are taxable at the rate of one and one half (1 1/2) percent while working within the City of Ontario, Ohio. You must withhold this tax and remit to the City of Ontario, Ohio Income Tax Division.

A copy of the reporting form is attached. Additional copies can be obtained by contacting the Treasurer.

You are required to mail or fax a list of all subcontractors you employ giving name of company, address, and phone number along with type of sub-work they will be performing. Additionally, you must inform each subcontractor of this requirement.

Mail this information on or before starting actual construction to:

Income Tax Administrator
555 Stumbo Road
Ontario, Ohio 44906-1259
Phone: 419-529-3045
Fax: 419-529-6132

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General Contractors Certificate of Subcontractors

All subcontractors must have a license

General Contractor License Number Date

Project Name Project Location

Sub Contractors:

Name _____ FID/SSN _____
Address _____
Phone _____ Fax or eMail _____
Type of Work _____

Name _____ FID/SSN _____
Address _____
Phone _____ Fax or eMail _____
Type of Work _____

Name _____ FID/SSN _____
Address _____
Phone _____ Fax or eMail _____
Type of Work _____

Name _____ FID/SSN _____
Address _____
Phone _____ Fax or eMail _____
Type of Work _____

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