

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: _____