APPLICATION FOR LOT SPLIT/COMBINATION
MANTUA VILLAGE, OHIO

Date: _____

Property Address:_____ Zoning District: _____

Current Use(s): _____

Applicant Name: _____ Address: _____

Phone: _____ Fax:_____ email:_____

Company Name: _____ Address: _____

Phone: _____ Fax:_____ email:_____

Property Owner: _____ Address: _____

Phone: _____ Fax:_____ email:_____

Agent/Attorney: _____ Address: _____

Phone: _____ Fax:_____ email:_____

Surveyor/Engineer: _____ Address: _____

Phone: _____ Fax:_____ email:_____

Application for: ___ Lot Split ___ Lot Combination ___ Re-Plat

Permanent Parcel Number(s): _____

Description of Project: _____

Application Requirements: *(Incomplete Applications will be rejected)*

_____ Non-Refundable Application Fee – $**50.00** - Make Checks payable to the Village of Mantua.
_____ Original Mylar and six (6) copies prepared and certified by a registered surveyor, showing any easements and/or rights-of-way.
_____ Legal Description describing new lot or lots to be created
_____ Copy of County Tax Map showing surrounding properties
_____ Proper Certification of Ownership
_____ Attach documentation showing size and setbacks of all existing structures

Application deadline is seven (7) days prior to monthly Planning Commission meeting which is held on the 1st Wednesday of each month.

I hereby certify that the information contained in this application is true and correct to the best of my knowledge.

_____ _____
Applicant Signature Date

_____ _____
Property Owner Signature Date

_____ _____
Agent or Attorney Signature (include notarized statement) Date

_____*(Staff use only below this line)*_____

Date Received: _____ Fee Paid: _____ Receipt Number: _____

Planning Commission Review Date: _____ Approved ____ Denied ____

If Denied, state reasons: _____

Planning Commission Chair Signature: _____