



CITY OF SPRINGFIELD
COMMUNITY DEVELOPMENT DEPARTMENT
PLANNING & ZONING DIVISION

SUBDIVISION APPLICATION
(PRELIMINARY AND FINAL)

Date Filed _____

1. Please check one: Preliminary Final Combined
2. Name of Subdivision:

Location: City _____ County _____ Township _____

Section _____ Town _____ Range _____

3. Subdivision Development Team:

a. Name of Owner:

Address: _____

b. Name of Developer: _____

Address: _____

c. Name of Engineer: _____

Address: _____

4. Subdivision Plan:

a. Please check one: Commercial Residential Industrial Mixed use

b. Date when construction will start _____

c. Total Area _____

d. Area subdivided in lots _____

e. Area in streets _____

f. Typical lot width _____ depth _____

g. Lineal Feet of Street: Major _____ Minor _____

h. Area dedicated for public purposes _____

- i. Number of Lots: Residential _____ Commercial _____ Industrial _____
- j. Area reserved for: Residential _____ Commercial _____ Industrial _____
- k. Will dwelling be built on each residential lot before the lot is sold? _____
- l. Zoning Classification of the area, if any: _____
- m. Are any changes in zoning proposed? _____
- n. Are public utilities available in the area? _____
 Sanitary Sewer _____ Water _____ Storm Drainage _____
- o. Is any part of the plat within the area flooded in the 1913 flood? _____
- p. Are map elevations based on sea level datum? _____
- q. Landowners Association? _____
- r. Covenants/Dead restriction? _____

5. Typical Dwelling:

Stories _____ Rooms _____ Size _____

Garage: Attached _____ Detached _____ None _____

6. Applicant Name _____

Applicant's Status (*attach proof of ownership or agent authorization*)

- Owner Agent (*agent authorization required*) Tenant (*agent authorization required*)

Mailing address: _____

City: _____ State: _____ ZIP: _____

Telephone: () _____ FAX: () _____

Email _____

**I/WE CERTIFY AND ACKNOWLEDGE THAT THE INFORMATION CONTAINED
HEREIN IS TRUE AND CORRECT TO THE BEST OF MY/OUR KNOWLEDGE.**

Signature of Applicant

Signature of Co-applicant

Typed or printed name and title of applicant

Typed or printed name of co-applicant

State of Ohio

County of _____

The foregoing instrument was acknowledged before me this _____ day of _____,
20____

by _____ (name of person acknowledged).

(seal)

Notary Public Signature

My commission expires: _____

Application Check List

Please review for completeness

ITEMS TO BE SUBMITTED:

- Subdivision Application Preliminary/Final Plat or both if submitting combined review.
- General Application
- Agreement to extend 30-day approval period.
- 12 copies of Preliminary Plats (1 copy 8.5x11 scaled, 11 copies 18x24 scaled)
7 Copies of Final Plats (1 copy 8.5x11 scaled, 6 copies 18x24 scaled)
- Proof of ownership or Owner Affidavit.
- Zoning and Engineering review fees (must be submitted with the application).
- Preliminary Plat: \$300 + \$10/lot + \$750 (Engineering) Final Plat: \$750 (Engineering)
- Plats shall comply with 1205.02 of the subdivision regulations.