FORM NO. 4
APPLICATION FOR TENTATIVE APPROVAL OF PRELIMINARY PLAT
Shelby, Ohio

Date _____ Application Number _____

1. Name of applicant _____

   Address _____

   Phone _____

2. Name of surveyor or engineer _____

   Address _____

   Phone _____

3. Name of subdivision _____

4. Description of location: Section _____ Township _____

   Range _____ Other _____

   (In addition, please attach copy of legal description)

5. Proposed use _____

6. Present zoning district _____

7. Proposed zoning changes _____

8. Number of lots _____ Area of parcel _____

(Cont.)

FORM NO. 4 (Cont.)

9. Do you propose deed restriction? Yes _____ No _____
(If yes, please attach a copy)

10. What type of sewage disposal do you propose? _____
If an "on lot" type of sewage disposal is proposed, include a letter from the City and/or County Board of Health approving a specific type of sewage disposal.

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

| | Improvement | Installation | Guarantee |
|---|---|---|---|
| a. | _____ | _____ | _____ |
| b. | _____ | _____ | _____ |
| c. | _____ | _____ | _____ |
| d. | _____ | _____ | _____ |
| e. | _____ | _____ | _____ |
| f. | _____ | _____ | _____ |

(Cont.)

FORM NO. 4 (Cont.)

12. List other materials submitted with this application

| Item | No. |
|---|---|
| a. _____ | _____ |
| b. _____ | _____ |
| c. _____ | _____ |
| d. _____ | _____ |
| e. _____ | _____ |
| f. _____ | _____ |

_____ _____

Applicant Surveyor or Engineer

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For Official Use

Date received _____

Date of meeting of City Planning Commission _____

Action of City Planning Commission _____

If plat rejected, reason(s) for rejection _____

_____

_____

_____

_____

Date _____ _____

Chairperson