FORM NO. 5
APPLICATION FOR FINAL PLAT APPROVAL

Shelby, Ohio

Date _____ Application Number _____

1. Name of applicant _____

   Address _____

   Phone _____

2. Name of surveyor or engineer _____

   Address _____

   Phone _____

3. Name of subdivision _____

4. Date preliminary plat approved _____

5. Was a zoning change requested? Yes _____ No _____

6. If yes, the plat may not be approved until it conforms to local zoning. Include a certification of zoning compliance if a change is requested.

7. 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 responsible City official.

8. Do you propose deed restrictions? Yes _____ No _____
   (If yes, please attach a final copy.)

(Cont.)

FORM NO. 5 (Cont.)

9. List other materials submitted with this application.

	Item	No.
a.		
b.		
c.		
d.		
e.		
f.		
g.		

For Official Use

Date received _____

Date of meeting of City Planning Commission _____

Plat fee $_____ Inspection fee $_____

Action by City Planning Commission _____

If plat rejected, reason(s) for rejection _____

_____

_____

_____

_____

_____

Date _____ _____

Chairperson