

File No. _____
Date Received: _____
Scheduled Public Hearing Date: _____

Fee: _____
Initials: _____
Check or Receipt No. _____

**APPLICATION FOR SUBDIVISION WITHOUT PLAT
CITY OF GAHANNA PLANNING COMMISSION**

*Applicant's Name: _____
Address: _____
Company: _____ Phone: _____
Fax: _____
Status: _____ Land Owner _____ Option Holder _____ Cont. Purchaser _____ Agent
Property Location: _____
Parcel ID#: _____
Reason for Request: _____
Current Zoning: _____ Total Acreage of Proposed Parcel: _____
Landowner: _____ Phone: _____
Address: _____
Applicant's Signature _____ Date _____

Submission Requirements

1. 10 copies (if being submitted to Planning Commission) of a Legal Description of the property certified by registered surveyor. Only 2 copies are necessary if to be approved administratively.
2. 2 copies of deeds to be stamped.
3. Application Fee of \$75 for residential, \$150 for all other districts.
4. Reduced drawing to 8 1/2 x 11 inch size.

To be approved by: _____ Planning Commission (buildable lot) _____ Administratively

In accordance with Section 1106 of the Codified Ordinances of Gahanna, Ohio, I hereby certify that this Lot Split as stated above has been approved.

Planning & Zoning Administrator Date

Director of Public Service Date

City Engineer Date

*Note: All correspondence will be to applicant above unless otherwise stated.

Revised February 2009