



APPLICATION FOR TENTATIVE APPROVAL OF PRELIMINARY PLAN

Date _____ Application No _____

1. Name of Applicant _____

Address _____

Phone _____

2. Name of Surveyor or Engineer _____

Address _____

Phone _____

3. Name of Subdivision _____

4. Locational Description: 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 _____

9. Do you propose deed restrictions? Yes _____ No _____

10. What type of sewage disposal do you propose? _____

(If an "on lot" type of sewage disposal is proposed, include a letter from the County Board of Health approving a specific type of sewage disposal.)

Richland County Regional Planning Commission
19 N. Main St.
Mansfield OH 44902
(419) 774-5684



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

<u>Improvement</u>	<u>Installation</u>	<u>Guarantee</u>
A.	_____	_____
B.	_____	_____
C.	_____	_____
D.	_____	_____
E.	_____	_____

12. List other materials submitted with this application.

- A: _____
- B: _____
- C: _____
- D: _____
- E: _____
- F: _____

Applicant _____ Surveyor or Engineer _____

(For Official Use)

Date Received _____
Date of Meeting of Zoning, Subdivision and Land Use Committee _____

Action by Committee:

If plan rejected, reason(s) for rejection:

Date _____ Chairman _____