

All Signatures Must be in **BLUE INK**

Only Two-sided, Current Form Accepted

Application for MINOR SUBDIVISION APPROVAL (aka Lot Split)
Proposed lots of 5 acres or more do not require RPC approval

\$130.00 filing fee per split payable to Tuscarawas County Regional Planning Commission

Date:
Buyer: Seller:
Address Address:
City: Ph. City: Ph.
E-Mail: E-Mail:
Parcel Location: Township Name Road Name and Number
Original Parcel Number: Original Parcel Acreage prior to proposed split:
Acreage of Proposed Lot Split: Acreage of Residual Parcel: ●

Proposed Land Use (Check one of the following)

Water and Sewer (check applicable)

- Single Residence
Duplex
Multi-Family
Agriculture (attach affidavit)
Vacant (attach affidavit)
Business
Contiguous Non-buildable Lot
Undersized lot - no health dept. review required
No access to public road - no access management review required
Combining to form parcel greater than 5 acres, assigning new parcel # - no health Dept. review
Public Water
Public Sewer
Private Well
Private on-lot sewage treatment system (septic)

If Residual Parcel acreage is under 5 acres you MUST submit a separate lot split form for the residual.

Additional \$130.00 filing fee payable to Tuscarawas County Regional Planning Commission

The undersigned applies for minor subdivision approval under Section 711.131 ORC, and certifies all material submitted with the application is true and correct.

Signature of Seller or Seller's Agent: Date:

Seller or Seller's Agent's Name: (Printed or Typed)

IMPORTANT: This application does not relieve the applicant of complying with all lawful regulations, including but not limited to those of the Tuscarawas County Regional Planning Commission, Tuscarawas County Health Department, Tuscarawas County Sanitary Engineer, Tuscarawas County Engineer, Tuscarawas County Flood Plain Regulations, Army Corps of Engineers Flowage Easements, or any Zoning Regulations.

Seller Name _____ Parcel No. _____

SANITARY and WATER This is not the Installation or Connection Permit

Where No Central Public Sanitary Sewers or water is available (On-lot Sewage Systems, i.e. Septic, private wells)

- Existing residence with existing on-lot sewage treatment system and private well - Attach Health Dept. review to determine if enough area for replacement system.
- Planning to develop - Attach-County Health Department, Ohio Dept. of Health, or OEPA-approval (for business and 3+unit housing)
- If lot is to be used for open space, agriculture, or some other use not requiring an on-site sewage treatment system and approval by County General Health Department or acceptance by OEPA, then applicant shall submit an affidavit as to the facts pertaining to the use of the lot.

Where Central Public Sanitary Sewers and/or Public Water is available

Tuscarawas County Metropolitan Sewer District 9944 Wilkshire Blvd, Bolivar OH 44612 – Phone 330-874-3262
Or appropriate public entity supplying services

Recommended Not Recommended Comments _____
Signature _____ Date _____

ACCESS MANAGEMENT This is not the Driveway Permit

COUNTY AND TOWNSHIP ROADS

Note: if access is on a city or village street, you must get approval from the municipality

Tuscarawas County Engineer 832 Front Street S.W. New Phila., OH 44663 – Phone: 330-339-6648

Approved Not approved Comments _____
Signature _____ Date _____

STATE AND FEDERAL ROUTES

ODOT District 11 2201 Reiser Ave. S.E., New Phila. OH 44663 – Phone 330 339-6633

Recommended
Not Recommended Driveway Spacing Sight Distance Other
Signature _____ Date _____

TOWNSHIP ZONING - See instructions for contact information

Dover, Lawrence, Sandy

Approved Comments _____
Disapproved _____
Signature _____ Date _____

TUSCARAWAS COUNTY FLOOD PLAIN See instructions for contact information

Is parcel in flood hazard zone? FIRM No. and Date _____
Shown on Plat? Flood Permit Needed? Comments _____
Signature: _____ Date _____

TUSCARAWAS COUNTY REGIONAL PLANNING COMMISSION

125 E. High Av. New Phila., OH 44663 - Phone 330-365-3246

Approval valid for 12 months from date signed

Approved Disapproved Comments _____
Signature _____ Date _____