



## PLANNING AND ZONING COMMISSION (P&Z) SUBDIVISION WITHOUT PLAT REVIEW APPLICATION

ALL ITEMS ON THIS APPLICATION MUST BE COMPLETED.

**Application Fee: \$100  
Per Fee Schedule**

**Applicant:** \_\_\_\_\_

Address/City/State/Zip: \_\_\_\_\_

Email Address: \_\_\_\_\_

Phone No: \_\_\_\_\_ Cell Phone No: \_\_\_\_\_ Fax No: \_\_\_\_\_

**Property Owner:** \_\_\_\_\_

Address/City/State/Zip: \_\_\_\_\_

Email Address: \_\_\_\_\_

Phone No: \_\_\_\_\_ Cell Phone No: \_\_\_\_\_ Fax No: \_\_\_\_\_

**Property Address:** \_\_\_\_\_

Parcel Number(s)/Subdivision: \_\_\_\_\_

**Checklist:**

- ☐ Preliminary Plan requirements set forth in Section [1105.04](#)
  - ☐ Other plat plan requirements as set forth by the Zoning Administrator.
  - ☐ Provide any other information that may be useful to the Planning and Zoning Commission or City Staff in the space below or attach additional pages.
  - ☐ **Paper copy** of all drawings, text, any other items, and application.
  - ☐ **1 digital copy** (CD, USB, Email) of the complete application packet.
  - ☐ Attach the required fee - \$100.
  - ☐ Post a public notice sign at least (10) days prior to a public hearing or public meeting, pursuant to ordinance 1107.035
- Public notice sign details found [here](#).

**(SEE OVER)**

I agree to grant the City Staff, the Commission, Board or Council considering this application access to the property that is the subject of this application for the purposes of reviewing this application and posting public notice for this application.

Signature of Applicant: \_\_\_\_\_ Date: \_\_\_\_\_

Office Use

Received

Office Use

Type/Date: \_\_\_\_\_

Base Fee: \_\_\_\_\_ \$100.00

Prepared by: \_\_\_\_\_

Reviewed by: \_\_\_\_\_

PAYOR: \_\_\_\_\_

RECIEPT # \_\_\_\_\_

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