



# LOT SPLIT APPLICATION

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[www.careyohio.org](http://www.careyohio.org)

REV: 2018

PROPERTY INFORMATION			
PROPERTY OWNER			DATE
SITE ADDRESS	LOT NUMBER & SUBDIVISION		SECTION
MAILING ADDRESS		PHONE NUMBER	
PRESENT ZONING		EXISTING USE OF PROPERTY	
TOWNSHIP	CITY	STATE	ZIP

PROPOSED CHANGES

**PLEASE ATTACH PROPERTY DESCRIPTION & A LIST OF ALL AFFECTED PROPERTY OWNERS WITHIN 200 FEET OF SAID PROPERTY**

**Applicant: Please read and sign below**

**Applicant hereby certifies that all of the above statements and representations are true.**

APPLICANT SIGNATURE	DATE
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OFFICE USE ONLY		OFFICE USE ONLY
DATE FILED:	RECOMMENDATION FOR PLANNING COMMISSION:  <input type="checkbox"/> APPROVAL <input type="checkbox"/> DENIAL	PERMIT FEE: _____
DATE FOR PUBLIC HEARING:		TOTAL FEE: _____
DATE OF NOTICE IN PAPER:		Date Paid: _____
DATE OF NOTICE TO ADJACENT PROPERTY OWNERS:		

Reason for recommendation: \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

\_\_\_\_\_ Date

\_\_\_\_\_ Chairman, Carey Planning Commission