



**Medina County**  
**Department of Planning Services**  
124 W. Washington St. Suite B-4 • Medina Ohio 44256  
Phone: 330/722-9219 \* Fax: 330/764-8456  
Brunswick: 330/225-7100 \* Wadsworth: 330/336-6657

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## Application for Minor Subdivision

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Date Submitted: \_\_\_\_\_

Application No. \_\_\_\_\_

*(This section to be completed by applicant)*

The undersigned applies for Minor Subdivision Approval under Section 711.131 of the **Ohio Revised Code**, and certifies all material submitted with the application is true and correct. The Medina County Planning Commission must take action within seven (7) working days from the date of receipt.

Name of Applicant: \_\_\_\_\_

Signature: \_\_\_\_\_

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

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

E-mail: \_\_\_\_\_

Township of Proposed Subdivision: \_\_\_\_\_ Township Lot No(s): \_\_\_\_\_

Permanent Parcel # of Lot(s) to be Split: \_\_\_\_\_ Acreage of Lot Split(s): \_\_\_\_\_

Name of Grantor(s): \_\_\_\_\_

Name of Grantee(s): \_\_\_\_\_

Intended Use of Subdivision (check one):

Residential:  Commercial:  Industrial:  Other (specify): \_\_\_\_\_

Zoning District: \_\_\_\_\_

Sewage disposal method (check one): Central Sewer:  On-lot Septic System:

Water supply method (check one): Central Water:  Private Well:

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Minor Subdivision Approval may be granted only under the following conditions:

1. The proposed subdivision is along an existing public road and involves no opening, widening, or extension of any street or road; public or private expecting an access easement drive or common access drive.
2. No more than five (5) lots are involved after the original tract has been completely subdivided.
3. The subdivision is not contrary to applicable platting, subdividing, or zoning regulations.
4. The property has been surveyed and the survey signed by the township for zoning, deed(s) with legal description signed and notarized, and subdivision fee (\$45.00 per lot) are submitted.
5. Contingent on other County Agency(s) approval.

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*For Official Use Only*

Date: \_\_\_\_\_

Fee Paid: \$ \_\_\_\_\_

	<b>YES</b>	<b>NO</b>
1. Is the application fully completed?	_____	_____
2. Is the survey submitted?	_____	_____
3. Is the survey signed by appropriate zoning official(s)?	_____	_____
4. Evidence of variance provided by township zoning?	_____	_____
5. Is the deed with legal description submitted, signed, notarized?	_____	_____
6. Is fee paid? (Check # _____) (Cash _____)	_____	_____
7. Does the split involve the opening, widening, or extension of any street or road, except an access drive easement or a common access drive?	_____	_____
8. Do both the split and remaining parcel have road frontage or frontage on a common access drive or access easement?	_____	_____
9. Are five (5) or fewer lots involved after the original tract is subdivided?	_____	_____
10. Does the deed represent the current owners per the tax maps?	_____	_____
11. Does the legal description match the survey?	_____	_____
12. Name of adjoining public right-of-way(s): _____		
13. Additional Comments: _____		
_____		
_____		

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*For Official Use Only*

**COUNTY ENGINEER**

Date: \_\_\_\_\_ Signature: \_\_\_\_\_

Action (check one): Approval: \_\_\_ Disapproval: \_\_\_ Conditional Approval: \_\_\_

Comments: \_\_\_\_\_

\_\_\_\_\_

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**COUNTY SANITARY ENGINEER**

Date: \_\_\_\_\_ Signature: \_\_\_\_\_

Action (check one): Approval: \_\_\_ Disapproval: \_\_\_ Conditional Approval: \_\_\_

Comments: \_\_\_\_\_

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**COUNTY BOARD OF HEALTH**

Date: \_\_\_\_\_ Signature: \_\_\_\_\_

Action (check one): Approval: \_\_\_ Disapproval: \_\_\_ Conditional Approval: \_\_\_

Comments: \_\_\_\_\_

\_\_\_\_\_

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**COUNTY PLANNING COMMISSION**

Date: \_\_\_\_\_ Signature: \_\_\_\_\_

Action (check one): Approval: \_\_\_ Disapproval: \_\_\_ Conditional Approval: \_\_\_

Comments: \_\_\_\_\_

\_\_\_\_\_

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