



Medina County
Department of Planning Services
144 N. Broadway St. Suite 113 • Medina Ohio 44256
Phone: 330/722-9293 • Email: planning@medinaco.org
Website: medinaco.org/planning

Application for Major Subdivision Preliminary Plan - Revisions

Please submit this application form, accompanying maps and plans and fee

Application Number _____ Application Date _____

Name of Proposed Subdivision _____

Name of Applicant _____

Address _____

Phone Number (____) _____ - _____

Fax Number (____) _____ - _____

E-mail _____

Developer Name _____

Contact _____

Address _____

Phone Number (____) _____ - _____

Fax Number (____) _____ - _____

E-mail _____

Surveyor Name _____

Contact _____

Address _____

Phone Number (____) _____ - _____

Fax Number (____) _____ - _____

E-mail _____

Name of Proposed Subdivision _____

Subdivision Type _____

Township _____

Section _____

Quarter Section _____

Access Roads _____

Proposed Use of Lots _____

Total Acreage _____

Number of Lots _____

Gross Density _____

Open Space Set Aside _____

Net Density _____

Zoning _____

Conforms to Township Zoning **Yes** **No**

Floodplain Areas **Yes** **No**

Major Soil Types _____

Significant Woodlands **Yes** **No**

Proposed Water System **Central** **Well** **Other**

Proposed Sewage Disposal System **Central** **Non-Discharging**

Proposed Storm Detention or Retention **Yes** **No**

Fire Department _____

Police Department _____

EMS _____

School District _____

Covenants or Restrictions (attach) **Yes** **No**

I certify that all information contained in this application and its supplements are true and correct.

Applicant Signature

Date

Office Use Only

Fee Amount Paid \$_____ Date Application Received _____

Concept Plan Approval Date _____

Concept Plan Action _____

Planning Staff Recommendation(s) for Preliminary Plan Revisions Date _____

MCPC Decision on Preliminary Plan Revision: Date of MCPC Meeting _____

Approved Disapproved Approved with Conditions Tabled

MCPC Comments

