



City of New Philadelphia

150 E High Avenue
New Philadelphia, OH 44663

For Office Use Only

Permit No. _____

Date: _____

Fee: _____

LOT SPLIT/COMBINATION PERMIT APPLICATION

Please make checks payable to the City of New Philadelphia. All fees are nonrefundable per Ordinance 1309.04(a). Splits/combinations must be completed within six months of the approval date of this application. Detailed information including a legal description and site sketch must be included with this permit.

Property Information

Property Address: _____	Parcel No.: _____
Lot Number: _____	Flood Zone: <input type="checkbox"/> Yes <input type="checkbox"/> No (If yes, a flood study may be required.)
Zoning: <input type="checkbox"/> Residential R-1 <input type="checkbox"/> Residential R-2 <input type="checkbox"/> Residential R-3 <input type="checkbox"/> Mobile Home Park MHP <input type="checkbox"/> Office Transitional District OTD <input type="checkbox"/> Public Facilities PF <input type="checkbox"/> Central Business District CBD <input type="checkbox"/> Neighborhood Business District NBD <input type="checkbox"/> Regional Business District RBD <input type="checkbox"/> General Industrial GI	

Owner Information

Owner's Name: _____	Phone No.: _____
Address: _____	
Email: _____	

Lot Splits & Combinations - \$100.00 fee per split/combination

<input type="checkbox"/> Lot Split	Parcel #: _____	Parcel #: _____
	Parcel #: _____	Parcel #: _____
<input type="checkbox"/> Lot Combine	Parcel #: _____	Parcel #: _____
	Parcel #: _____	Parcel #: _____

*All lot splits and combines must be approved by the City prior to being recorded at the County. Parcels cannot be landlocked. You must supply a survey plat map of the proposed lots and the deeds with this application.

Additional Information

If there is any additional information you would like to explain about your project, please do so below:

Applicant Certification Statement

I hereby declare, under the penalties provided by the zoning ordinance for violations thereof, that the statements made relative to the above project(s) described in this application for a Lot Split/Combination are, to the best of my knowledge and belief, true and correct. I acknowledge that the lot split/combination described herein will be completed within six months of approval of this application, otherwise a new permit will need to be obtained.

Print Name

Applicant's Signature

Date

Review by Code Administrator

<p>Approved</p> <p>Your Lot Split/Combination Permit has been approved. The lot split/combination must be completed within six months of the date below or a new permit will be needed.</p>
Signature of Code Administrator
Date

<p>Rejected</p> <p>Your Permit has been rejected for the following reason:</p> <p><input type="checkbox"/> Lot Size <input type="checkbox"/> Landlocked <input type="checkbox"/> Other</p> <p>Ordinance: _____</p>
Signature of Code Administrator
Date