

**CITY OF BEREA
APPLICATION FOR
LAND SUBDIVISION & DEVELOPMENT**

DATE: _____

TYPE OF SUBMISSION: MAJOR PLAT FINAL PLAT
 MINOR PLAT DEVELOPMENT PLAN
 PRELIMINARY PLAT

1. NAME OF PROPOSED DEVELOPMENT _____

2. LOCATION OF DEVELOPMENT _____

3. NAME OF APPLICANT _____

ADDRESS _____

CITY _____ **STATE** _____ **ZIP** _____

PHONE NUMBER: BUSINESS _____ **CELL** _____

4. OWNER OF LAND _____

ADDRESS _____

CITY _____ **STATE** _____ **ZIP** _____

PHONE NUMBER: BUSINESS _____ **CELL** _____

5. NAME OF SURVEYOR _____

ADDRESS _____

CITY _____ **STATE** _____ **ZIP** _____

PHONE NUMBER: BUSINESS _____ **CELL** _____

6. NAME OF ENGINEER _____

ADDRESS _____

CITY _____ **STATE** _____ **ZIP** _____

PHONE NUMBER: HOME _____ **BUSINESS** _____

7. **DIGITAL SUBMITTAL (PLEASE ATTACH WITH APPLICATION)**
8. **PROPOSED USE** _____

9. **PURPOSE OF THE PLAT** _____

10. **ZONE** _____ **NUMBER OF LOTS** _____ **AREA OF TRACT** _____
11. **DO YOU PROPOSE DEED RESTRICTIONS? YES** ____ **NO** ____
 (IF YES, PLEASE ATTACH A COPY)
12. **VARIANCES REQUESTED FROM PLAT OR DESIGN REQUIREMENTS:**

| | <u>SECTION NUMBER</u> | <u>ITEM</u> |
|----|-----------------------|-------------|
| A. | _____ | _____ |
| B. | _____ | _____ |
| C. | _____ | _____ |
13. **LIST OTHER MATERIALS SUBMITTED WITH THIS APPLICATION**

| | <u>ITEM</u> | <u>NO. OF COPIES</u> |
|----|-------------|----------------------|
| A. | _____ | _____ |
| B. | _____ | _____ |
| C. | _____ | _____ |

PLEASE LIST ALL ADJOINING PROPERTY OWNERS FOR PRELIMINARY PLATS AND DEVELOPMENT PLANS: (DO NOT COMPLETE FOR MINOR PLATS)

PROPERTY OWNER'S NAME

PROPERTY OWNER'S ADDRESS

| | |
|-------|-------|
| _____ | _____ |
| _____ | _____ |
| _____ | _____ |
| _____ | _____ |
| _____ | _____ |
| _____ | _____ |
| _____ | _____ |
| _____ | _____ |
| _____ | _____ |
| _____ | _____ |
| _____ | _____ |
| _____ | _____ |
| _____ | _____ |
| _____ | _____ |
| _____ | _____ |
| _____ | _____ |

I CERTIFY THAT THE INFORMATION CONTAINED IN THIS APPLICATION AND IT'S SUPPLEMENT MATERIALS ARE TRUE AND CORRECT AND HEREBY REQUEST APPROVAL OF THE SUBDIVISION PLAT AND/OR DEVELOPMENT PLAN DESCRIBED HEREIN.

APPLICANT SIGNATURE _____ DATE _____

OWNER _____ DATE _____

Visit our website at www.bereaky.gov

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DATE RECEIVED _____ **DATE OF P & Z MEETING** _____

ACTION BY PLANNING COMMISSION **APPROVED** _____ **DENIED** _____

IF APPROVED, THE FOLLOWING CONDITIONS AND REQUIREMENTS WERE PRESCRIBED:

1. _____
2. _____
3. _____
4. _____
5. _____

IF DENIED, REASON (S) FOR DENIAL:

1. _____
2. _____
3. _____
4. _____
5. _____

VARIANCES APPROVED (IF ANY):

DATE _____ **SIGNED** _____