

**FORM NO. 6: APPLICATION FOR MINOR SUBDIVISION APPROVAL**

City of Washington Court House, Ohio

Date \_\_\_\_\_ Application Number \_\_\_\_\_

The undersigned applies for minor subdivision approval under R.C. § 711.131, and certifies all material submitted with this application is true and correct. Action must be taken within fourteen (14) calendar days.

Signature \_\_\_\_\_

Address \_\_\_\_\_

Phone \_\_\_\_\_

Minor subdivision approval may be granted only under the following conditions:

1. The proposed subdivision is along an existing public road and involves no openings, widening or extension of any street.
2. No more than 5 lots are involved after the original parcel has been complete subdivided.
3. The subdivision is not contrary to applicable platting, subdividing, or zoning regulations. Variance can only be requested before the entire commission.
4. The property has been surveyed and a sketch and legal description is submitted.
5. Approval is granted, where applicable by the agencies listed below.

---

---

For Official Use  
COUNTY BOARD OF HEALTH

Date Received \_\_\_\_\_

Action \_\_\_\_\_

Comments \_\_\_\_\_

---

---

\_\_\_\_\_  
Signature

---

---

COUNTY ENGINEER

Date Received \_\_\_\_\_

Action \_\_\_\_\_

Comments \_\_\_\_\_

---

---

\_\_\_\_\_  
Signature

---

---

COUNTY SANITARY ENGINEER

Date Received \_\_\_\_\_

Action \_\_\_\_\_

Comments \_\_\_\_\_

\_\_\_\_\_  
Signature

---

---

ZONING COMMISSION

Date Received \_\_\_\_\_

Action \_\_\_\_\_

Comments \_\_\_\_\_

\_\_\_\_\_  
Signature

---

---

PLANNING COMMISSION

Date Received \_\_\_\_\_

Action \_\_\_\_\_

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

Comments \_\_\_\_\_

\_\_\_\_\_  
Signature

Note: This form must be submitted to the County Auditor for transfer and the County Recorder for recording.