



CITY of VAN WERT

515 EAST MAIN STREET • VAN WERT, OHIO 45891

www.vanwert.org

"Vincit Amor Patriae"

The Love of Country Conquers

GERALD T. MAZUR
MAYOR
419-238-0308
Cell 419-203-4100

JAY C. FLEMING
SAFETY-SERVICE DIRECTOR
419-238-1237

APPLICATION FOR TENTATIVE APPROVAL OF PRELIMINARY PLAT Van Wert, Ohio

Date _____ Application No. _____

1. Name of Applicant _____
Address _____
Phone _____
2. Name of Surveyor or Engineer _____
Address _____
Phone _____
3. Name of Subdivision: _____
4. Locational Description: Section _____ Township _____
Range _____ Other _____
(In addition, please attach copy of legal description)
5. Proposed Use _____
6. Present Zoning District _____
7. Proposed Zoning Changes _____
8. Number of Lots _____ Area of Parcel _____
9. Do you propose deed restrictions? Yes _____ No _____
(If yes, please attach a copy)
10. List all proposed improvements and utilities and state your intention to install or post a guarantee prior to actual installation.

	Improvement	Installation	Guarantee
a.	_____	_____	_____
b.	_____	_____	_____
c.	_____	_____	_____
d.	_____	_____	_____
e.	_____	_____	_____
f.	_____	_____	_____



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11. List other materials submitted with this application.

Item	No.
a. _____	_____
b. _____	_____
c. _____	_____
d. _____	_____
e. _____	_____
f. _____	_____

Applicant

Surveyor or Engineer

For Official Use

Date Received _____

Date of Meeting of Planning Commission _____

Action by Planning Commission _____

If plat rejected, reason(s) for rejection _____

Date _____

Chairman