

Clermont County Permit Central

Application for Subdivision/Existing Lot Review	Project App No: Action Type: Major Minor ELR
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APPLICANT/OWNER INFORMATION		
Applicant Name		
Mailing Address		
City/State/Zip		
Phone-Daytime	Phone-Evening	Phone-Mobile
Owner Name		
Mailing Address		
City/State/Zip		

PROPERTY INFORMATION		
Subdivision Name	Township	
Street	Adjacent Address	
Nearest Intersection	House Size (Number of Bedrooms)	
Existing Parcel Acreage	Existing Tax Parcel Number	
Proposed Parcel Acreage	Proposed Number of Lots	
Sewer Available: (circle one) Yes No		Water Source

I hereby certify that the proposed work is authorized by the owner of record and that I have been authorized by the owner to make this application as his authorized agent and we agree to conform to the regulations and all applicable laws of the State of Ohio and the County of Clermont.	
Applicant Signature	Date

Existing Lot Review Fees

Department	Fee
Health District	

Major/Minor Subdivision Fees

Department	Fee
Building	
Engineer	
Planning	
Health District	
TOTAL:	