

The City of
Brooklyn Ohio
Founded 1867

Phone 216-351-2133 Fax 216-351-5800

FEE \$ 75.00

DOCKET #: _____ - _____ - _____

DATE _____

**APPLICATION FOR
LOT SPLIT/CONSOLIDATION-PRELIMINARY/FINAL SUB-DIVISION**

We, (I), the undersigned, do hereby respectfully make application to the Planning Commission of the City of Brooklyn for approval of:

1. The property sought for plat approval is located on:

2. The property sought for plat approval is owned by:

as evidenced by deed from _____ in Volume
_____ Page _____ Cuyahoga County Maps Record.

3. The property for plat approval is proposed to be used for:

4. The subdivision will consist of _____ lots, as shown on the attached plat.

5. For a major subdivision, the final plat drawing shall include provision for all utilities to be provided underground and provision for ornamental street lighting. All setbacks shall be in conformance with applicable zoning for the area.

6. We, (I), the undersigned, do hereby state that I am the owner of the legal title of the property and/or duly authorized to act on behalf of _____ and to execute the application.

Signature of Applicant

Address of Applicant

Signature of Property Owner

Address of Property Owner