

**APPLICATION FOR FINAL PLAT APPROVAL**  
**To the**  
**Cuyahoga County Planning Commission**  
*Cuyahoga County, Ohio*

**Date:** \_\_\_\_\_

**Application No.** \_\_\_\_\_

The undersigned applies for approval of a Final Plat for a Major Subdivision and certifies that all materials submitted with this application are true and correct.

**1. Name of Applicant:** \_\_\_\_\_

**Signature:** \_\_\_\_\_

**Address:** \_\_\_\_\_

**Phone:** \_\_\_\_\_ **Fax:** \_\_\_\_\_

**2. Name of Surveyor or Engineer:** \_\_\_\_\_

**Address:** \_\_\_\_\_

**Phone:** \_\_\_\_\_ **Fax:** \_\_\_\_\_

**3. Name of Subdivision:** \_\_\_\_\_

**4. Date of Preliminary Layout Approval:** \_\_\_\_\_

**5. Was a Zoning Change Requested?** \_\_\_\_\_ **Yes** \_\_\_\_\_ **No**

If YES, the Plat may not be approved until it conforms to the local zoning. Include a Certificate of Zoning Compliance if a change was requested

**6. Does this application include a request to defer installation of sidewalks or landscaping?** \_\_\_\_\_ **Yes** \_\_\_\_\_ **No**

If YES, the Final Plat can not be approved unless the construction of such improvements is guaranteed with a performance bond.

**7. Has a Performance Guarantee been secured?**

\_\_\_\_\_ **Yes** \_\_\_\_\_ **No** If YES, please attach a copy of the Performance Guarantee with this application. If NO, the Final Plat can not be approved.

**8. Have all improvements that are required to be installed been installed?**

\_\_\_\_\_ **Yes** \_\_\_\_\_ **No** If NO, the Final Plat can not be approved

**9. Have Maintenance Guarantees been secured for each type of improvement?**

\_\_\_\_\_ **Yes** \_\_\_\_\_ **No** If YES, please attach a copy of the Maintenance Guarantees with this application. If NO, the Final Plat can not be approved.

**10. Do you propose deed restrictions and/or owners association?**

\_\_\_\_\_ **Yes**    \_\_\_\_\_ **No**    If YES, please attach a copy.

**11. List other materials submitted with this application.**

<u>Item</u>	<u>Number</u>
1. _____	_____
2. _____	_____
3. _____	_____
4. _____	_____
5. _____	_____
6. _____	_____
7. _____	_____

---

**For Official Use Only**

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

Date of Meeting of Planning Commission: \_\_\_\_\_

Plat Fee \$: \_\_\_\_\_

Action by Planning Commission: \_\_\_\_\_

If Plat is rejected, reasons for rejection: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_  
Date:

\_\_\_\_\_  
Director