



CITY OF SIDNEY

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APPLICATION FOR LOT SPLIT OR VACATION/REPLAT

Name of Applicant _____ Phone _____

Address of Applicant _____

Owner of Land to be Combined or Split _____

Address of Owner _____ Phone _____

Zoning District _____ Current Use of Land _____

Current Identification of Land:

Parcel ID # _____	&	Lot # _____	Parcel ID # _____	&	Lot # _____
Parcel ID # _____	&	Lot # _____	Parcel ID # _____	&	Lot # _____

New Identification and Acreage of Land:

Lot #	Acres	Front (feet)	Rear (feet)	Side (feet)	Side (feet)

Documentation Required:

- 1) Lot Split or Vacation/Replat Survey and Legal Description
- 2) New Deed for all lots/parcels involved after split/replat is approved and recorded

FOR OFFICE USE ONLY

Subdivision _____

Decorative Street Lighting Assessment District Yes No

I have inspected the documentation attached hereto and have determined that the land requested to be combined/split is in compliance with present zoning and subdivision requirements.

Signature of Planning Director

Date