

**MUNICIPAL PLANNING COMMISSION
CITY OF ROSSFORD OHIO**

Preliminary/Final Plat Filing Application

Date: _____

Application/Fee No.; _____

Fee: _____

Name of Project/Subdivision _____

Subdivision Zoning Classification _____

Parcel No.'s: _____

Property Owners (Agent):

Name: _____ Address: _____

Signature: _____ Phone: _____ Email: _____

Planning Commission Meeting Scheduled -
7:00 PM at 133 Osborn St Date _____

Zoning-
Signature _____ Date _____

An additional fee may be required to defray the expenses associated with the public review of the plans, including the need to retain a professional engineer, architect, or landscape architect or other professional consultant, registered in the State of Ohio, to advise the City on any or all aspects of the site plan.