

SINGLE LOT SUBDIVISION APPLICATION
CLARION COUNTY SUBDIVISION AND LAND DEVELOPMENT ORDINANCE

Clarion County File Number _____

Owner: Name: _____

Address: _____

Parcel Location: Municipality: _____ Tax Map Number: _____

List number of lots subdivided within 5 years prior to date of filing: _____

Acreage of Tract _____ Acreage of Proposed Subdivision _____

Intended Use of Parcel:

Residential Lot _____

Increasing Acreage of Grantee _____

Commercial Lot _____

Lot Line Correction _____

Farmland Use _____

Other (Please Specify) _____

Tentative Timetable _____

I/We, the undersigned, do hereby give permission to the County of Clarion for any one or more of its representatives to enter upon my property for the purpose of reviewing this proposed subdivision.

Submitted By: _____ Date of Filing _____

Return To: Name _____

Address _____ Phone Number _____

Fax Number _____

The Single Lot Subdivision Checklist, appropriate fee and any and all additional documentation must be submitted with this application.

OFFICIAL USE ONLY

{ NOTICE: Part or all of this property may be in a flood hazard area. Please see attached map.

APPROVAL FOR CLARION COUNTY PLANNING COMMISSION

Chairman DATE _____

The final plan for this subdivision must be recorded by _____ or this approval becomes null and void.

COMMENTS: _____
