



“Sewer”

Date Submitted: _____

Department of Environmental Services Approval for a **LOT SPLIT**

TO BE COMPLETED BY PROPERTY OWNER OR APPLICANT

This form is for the Department of Planning’s use as related to minimum lot requirements and land use and DOES NOT constitute formal approval/denial of a connection to a central sanitary sewer system by the Department of Environmental Services.

NOTE: Bring this form, current deed, tax map and/or survey map to the Department of Environmental Services or Municipal Sewer Provider.

Name of Property Owner: _____

Township: _____

Address: _____

Permanent Parcel ID#: _____ - _____ - _____ - _____

Telephone Number: _____

Road parcel FRONTS: _____

Email of Above: _____

Are there buildings on the property? Y / N

Signature _____

Type of structures located on the lot being split:

TO BE COMPLETED BY ASHTABULA COUNTY DEPARTMENT OF ENVIRONMENTAL SERVICES

Proposed Lot:

Frontage _____ ft.

Acreage _____

_____ **Does have**

_____ **Does NOT have**

A central sanitary sewer line with adequate treatment capacity to service the parcel existing along its entire frontage, which is both available and accessible.

Remaining Lot:

Frontage _____ ft.

Acreage _____

_____ **Does have**

_____ **Does NOT have**

A central sanitary sewer line with adequate treatment capacity to service the parcel existing along its entire frontage, which is both available and accessible.

NOTE: If either parcel does NOT have existing along its entire frontage an available and accessible central sanitary sewer line with an adequate treatment capacity to service the parcel, attach a letter signed by the DES Director or a designee thereof, indicating special existing conditions or agreed upon arrangement(s).

List any other comments or special conditions on the reverse side of this sheet and check here for review.

Please return this form to the Department of Community Services and Planning when completed.

Comments:

Signature of DES Director or a designee thereof:

Date:
