



**CITY OF OAK HARBOR**  
*Development Services Department*

**Binding Site Plan Alteration  
 or Vacation Application Form**

**Project Name:**

**Application Fee \$340.00**

**Description of Proposal:**

<b>APPLICANT NAME/CONTACT PERSON</b> (or legal representative):	Address:
E-mail Address:	Phone and Fax:
<b>PROPERTY OWNER NAME</b> (list multiple owners on a separate sheet):	Address:
E-mail Address:	Phone and Fax:
<b>ENGINEER/SURVEYOR:</b>	Address:
E-mail Address:	Phone and Fax:
<b>PROJECT SITE INFORMATION</b> (address/location):	Comp. Plan Designation:
Zoning:	Parcel Number(s):
Legal Description (attach separate sheet):	Acreage of Original Parcel(s):
Nearest Public Street:	Number of Existing Lots:
Section/Township/Range:	Number of Proposed Lots:

**AUTHORIZATION:** The undersigned hereby certifies that the property affected by this application is in the exclusive ownership of the applicant or that the applicant has submitted the application with the consent of all owners of the affected property. In addition, the undersigned hereby certifies that all information submitted with this application is complete and correct. False statements, errors, and/or omissions may be sufficient cause for denial of the request.

**The alteration or vacation application shall contain the signatures of all those owners of lots who are directly affected by the proposed alteration or vacation.**

I declare under penalty of the perjury laws that the information I have provided on this form/application is true, correct and complete.

<b>Authorized Signature</b>	<b>Date</b>
<b>Authorized Signature</b>	<b>Date</b>
<b>Authorized Signature</b>	<b>Date</b>