



VILLAGE OF ST. BERNARD

110 Washington Avenue, St. Bernard, Ohio 45217

Phone: (513) 242-7770 • Website: www.cityofstbernard.org

PLANNING COMMISSION APPLICATION

PLANNING COMMISSION JURISDICTION: Use this form for Zone Changes, Subdivision Plats, Lot Splits, Site Plan Reviews, and Planned Unit Developments. For variances and conditional uses, use the Board of Zoning Appeals form.

APPLICANT INFORMATION

Name: _____

Title/Position: _____

Company: _____

Mailing Address: _____

City: _____ **State:** _____ **ZIP:** _____

Phone: _____ **Email:** _____

I am an authorized agent acting on behalf of the property owner

PROPERTY OWNER INFORMATION (if different from applicant)

Same as Applicant

Name: _____

Company: _____

Mailing Address: _____

City, State, ZIP: _____ **Phone:** _____

Email: _____



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PLANNING COMMISSION APPLICATION TYPE (Check one)

- Zone Change/Reclassification
- Minor Subdivision Plat (5 lots or fewer)
- Major Subdivision Plat (more than 5 lots)
- Lot Split/Combination
- Replat
- Site Plan Review
- Planned Unit Development (PUD)
- Zoning Code Text Amendment

PROPERTY INFORMATION

Property Address: _____

Parcel Number(s): _____ Ward/District: _____

Legal Description:

Total Acreage: _____ Existing Lots: _____

Current Zoning: _____ Proposed Zoning: _____

Current Use: _____ Proposed Use: _____



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PROJECT DESCRIPTION AND PLANNING REQUIREMENTS

Detailed Description of Proposed Development:

Justification for Request:

Proposed Lots: _____ **Construction Cost:** _____

Project involves construction of new streets

Public utilities will be extended

Storm water management facilities required

Impact on Traffic and Infrastructure:

ST. BERNARD FIRE MARSHAL REVIEW REQUIREMENTS

Fire Marshal review is REQUIRED for:

All subdivision plats involving new street construction

Lot splits creating more than 2 new lots

Any development affecting emergency vehicle access

Commercial developments requiring site plan review

Residential Development for Apartments or Rental Units

Fire Marshal review is required for this application

Emergency Access Description:



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PLANNING COMMISSION FEE SCHEDULE

Planning Application Type	Base Fee	Additional Fees
Zone Change/Reclassification	\$ _____	+ legal advertising + notification
Minor Subdivision Plat	\$ _____	+ engineering review
Major Subdivision Plat	\$ _____	+ engineering + Fire Marshal review
Lot Split/Combination	\$ _____	+ recording fees
Site Plan Review	\$ _____	+ engineering review (if required)
Planned Unit Development	\$ _____	+ engineering + consultant review

Total Fee Paid: _____ **Payment Method:** _____

REQUIRED SUBMISSIONS CHECKLIST

- Completed Planning Commission Application
- Preliminary Plat (if subdivision)
- Detailed Site Plan (drawn to scale)
- Current Property Survey (certified)
- Engineering Plans (streets, utilities, drainage)
- Landscape Plan (commercial developments)
- Traffic Impact Study (if required)
- Environmental Assessment
- List & Addresses of Property Owners within 200 feet
- Copy of Property Deed
- Title Report or Title Insurance Policy
- Application Fee



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APPLICANT CERTIFICATION

I hereby certify that the information provided in this application is true and correct to the best of my knowledge. I understand that any false statements may result in denial of this application. I also understand that approval by the Planning Commission does not relieve me from compliance with all other applicable codes, ordinances, and regulations.

Applicant Signature

Date: _____

Property Owner Signature (if different from applicant)

Date: _____



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FOR OFFICE USE ONLY

Planning Case _____ **Date Received:** _____
Number: _____

Received By: _____ **Fee Received:** _____

Department Reviews Required:

- Building Department St. Bernard Fire Marshal
 Engineering Cincinnati Water Works
 Metropolitan Sewer District Health Department
 Ohio EPA (if required)

Planning Meeting _____ **Notice Published:** _____
Date: _____

Property Owners Notified: _____

Planning Commission Recommendation:

- Recommend Approval Recommend Approval with Conditions
 Recommend Denial Table for Additional Information

Village Council Action Required:

- Yes (Zone Changes, Text Amendments) No (Administrative Approval)

Decision Details and Conditions:

Final Decision _____ **Effective Date:** _____
Date: _____