

*City of Chillicothe*  
**PLANNING COMMISSION**  
**INDIVIDUAL PROGRESS CONTROL SHEET**

**1 APPLICATION FOR:** (a) Re-Zoning \_\_\_\_\_ (b) Plat Approval \_\_\_\_\_ (c) Lot Split \_\_\_\_\_  
(d) Other (specify) \_\_\_\_\_ Date Application Received \_\_\_\_\_  
Name of Applicant \_\_\_\_\_ Description of property and specify request  
made. \_\_\_\_\_

**2 REVIEW BY CITY ENGINEER:** (Explain briefly or refer to attached sheet) \_\_\_\_\_

The undersigned has checked the petition for zone change for conformity with Section 1129.02 of the Revised Ordinances.

\_\_\_\_\_ Date \_\_\_\_\_ City Engineer

**3 PLANNING COMMISSION ACTION:**

(a) Re-zoning: Approval \_\_\_\_\_ Disapproval \_\_\_\_\_ Date \_\_\_\_\_ 20 \_\_\_\_\_  
Public Hearing Date \_\_\_\_\_ Date of Notice \_\_\_\_\_ 20 \_\_\_\_\_

Remarks: \_\_\_\_\_

(b) Plat: Approval \_\_\_\_\_ Disapproval \_\_\_\_\_ Date \_\_\_\_\_ 20 \_\_\_\_\_  
Remarks: \_\_\_\_\_

(c) Lot Split: Approval \_\_\_\_\_ Disapproval \_\_\_\_\_ Date \_\_\_\_\_ 20 \_\_\_\_\_  
Remarks: \_\_\_\_\_

(d) Other: (Specify) \_\_\_\_\_

Approval \_\_\_\_\_ Disapproval \_\_\_\_\_ Date \_\_\_\_\_ 20 \_\_\_\_\_  
Remarks: \_\_\_\_\_

Date transmitted to Council: \_\_\_\_\_

**4 COUNCIL ACTION:** Explain \_\_\_\_\_

Date of Action: \_\_\_\_\_

Public Hearing Date: \_\_\_\_\_

Date of Notice: \_\_\_\_\_

Remarks: \_\_\_\_\_

Items included with application to be returned to individual: \_\_\_\_\_

Items picked up by whom: \_\_\_\_\_ Date \_\_\_\_\_ 20 \_\_\_\_\_