

**HARRISON COUNTY, OHIO - DOCUMENT CONVEYANCE REQUIREMENTS FORM
-NO ORIGINALS FOR PREAPPROVAL-**

*Pre-Approvals Require A Minimum of 4 Days to process. Please Plan Accordingly.
(The day dropped off does not count.)*

*Must present this form including all pages that were submitted for Pre-Approval at time of recording (STAPLED TOGETHER)
Last Recordings Must be in GIS-Map Office by 3:30pm in order to be processed that day.*

**Whole Lot Straight Transfer Re-Survey Split Land Contract Annex Plat Private Drive Plat
Vacation Plat TOD/Affidavit Mineral Transfer Sheriff Deed**

Title Office/Attorney: _____

Drop Off Date: _____

Parcel #'s: _____

Grantor: _____ Grantee: _____

| <i>Needs Fixed</i> | General Required Items | YES | NO | N/A | Comments |
|--------------------|--|------------|-----------|------------|---|
| | Auditor - Parcel Identification Numbers Listed with each corresponding description | | | | |
| | Auditor - Property is Listed under CAUV/HMSTD | | | | |
| | Map -Parcel Numbers & Prior Deed References & Acreage Listed with Corresponding Description | | | | |
| | Village / City Approval / Zoned (if applicable) | | | | |
| | Driveway Access Management (Engineer's Office or ODOT Approval) All Parcel Splits Must have this. Regional Approval Form or Letter or Deed Signed Off | | | | Engineer for County & Township Roads ODOT District 11 for State Routes & US Routes |
| | Auditor – Conveyance Fee is \$4.00/\$1,000. Transfer Fee is \$0.50 per Parcel PROVIDE COMPLETED CONVEYANCE FORM WITH PREAPPROVAL | | | | |
| | Recorder - \$34.00 for the first 2 pages and \$8.00 each additional page *Addition \$20 if marginal requirements are not met. | | | | |
| | CONTACT THE AUDITOR AND RECORDER FOR ACCURATE TOTAL | | | | |
| | Recorded Lots | YES | NO | N/A | Comments |
| | Current Lot Number | | | | |
| | Official Subdivision/Addition Name –with Plat Book & Page-Date Reference | | | | |
| | Unrecorded Plats <u>must</u> have Metes & Bounds Description. | | | | |
| | Portions of Recorded Lots <u>must</u> have Metes & Bounds Description. | | | | |
| | Existing Survey Metes and Bounds Description of Record | YES | NO | N/A | Comments |
| | Map Office Verification that Description is Adequate and Verbatim | | | | |
| | Closure more than 1/5,000 | | | | |
| | Residual Acreage Must Agree in GIS-Map Office and Auditor's Office | | | | |
| | Parcels Newly Annexed Since Last Transfer must have Correct Jurisdiction | | | | |
| | Verbatim Exceptions - Total Acreage to be conveyed must be listed for each parcel with exceptions | | | | |
| | Four (4) Exceptions previous to current transfer <u>requires</u> new survey of parent tract | | | | |
| | New Survey Metes and Bounds Descriptions | YES | NO | N/A | Comments |
| | New Split or Merger – Parcel Number: | | | | |
| | State, County, Township, Municipality, Range, Section, Quarter Section (if applicable) | | | | |
| | Title and Prior Deed Reference | | | | |
| | Description tied to identifiable point on map | | | | |
| | Clockwise direction on all courses | | | | |
| | Bearing expressed in degrees, minutes, seconds, feet and decimal parts thereof | | | | |
| | Monumentation cited | | | | |
| | Curves, Direction, Radius, Long Chord, Distance | | | | |
| | Reference, Current or Existing Recorded Names or Numbers | | | | |
| | Survey Information | | | | |
| | Ambiguous content has statement of clarification | | | | |
| | Closure more then 1/5,000 feet | | | | |
| | Adequate Plat Acreage | | | | |
| | Calculation to Third Decimal Place (Square Footage may also be mentioned) | | | | |
| | Description encompasses 2 or more tax districts: Total acreage must be broken down into current tax districts | | | | |
| | Railroads | YES | NO | N/A | Comments |
| | Referenced to Auditor's Appraisal of Railroads Real Estate Report, Section A or B | | | | |
| | Alleys | YES | NO | N/A | Comments |
| | Newly Vacated Alleys/Streets have Metes and Bounds Survey | | | | |
| | Does survey show what owners get in relation to vacated portion of Alley/Street | | | | |
| | Mineral | | | | |
| | Mineral Parcel Number: | | | | |

Approved By: _____

Transfer Not Necessary: _____

Map Office: Date: _____

Approved By: _____

Transfer Not Necessary: _____

Auditor's Office: Date: _____

Approved By: _____

Recorder's Office: Date _____

Comments: