

NORTH STRABANE TOWNSHIP

LAND DEVELOPMENT APPLICATION

APPLICANT _____ PHONE _____

ADDRESS _____

SITE LOCATION _____ PARCEL ID. NO. _____

LAND OWNER _____ PHONE _____

ADDRESS _____

ENGINEER/SURVEYOR _____ PHONE _____

ADDRESS _____

ZONE DISTRICT _____ LOT SIZE _____ TYPE OF SEWAGE _____

PROPOSED USE _____

ENGINEERED PLANS AND OTHER REQUIREMENTS:

	<u>ENCLOSED</u>	<u>PENDING</u>	<u>N/A</u>
SITE PLAN:	_____	_____	_____
SOIL EROSION CONTROL:	_____	_____	_____
GRADING:	_____	_____	_____
STORM WATER MGT.:	_____	_____	_____
LANDSCAPING:	_____	_____	_____
PDF OF ALL PLANS:	_____	_____	_____
COST ESTIMATES FOR SITE IMPROVEMENTS:	_____	_____	_____
DEVELOPERS AGREEMENT:	_____	_____	_____
PERFORMANCE BOND:	_____	_____	_____

OTHER AGENCY APPROVALS:

PA. DEP (SEWAGE):	_____	_____	_____
PA. DEP (NPDES):	_____	_____	_____
WASH CO. PLANNING CO.:	_____	_____	_____
WASH CO. CONSERVATION:	_____	_____	_____
PENN DOT:	_____	_____	_____
PUBLIC UTILITIES:	_____	_____	_____

TWO FOLDED COPIES OF PLANS, ALONG WITH FILING FEE AND COMPLETED APPLICATION, MUST BE SUBMITTED NO LATER THAN TWENTY (20) DAYS PRIOR TO THE SCHEDULED PLANNING COMMISSION MEETING.

SIGNATURE OF APPLICANT

DATE SUBMITTED