

NORTH STRABANE TOWNSHIP

SIMPLE SUBDIVISION APPLICATION

(five total lots or less- all front on an existing street)

APPLICANT _____ PHONE _____

ADDRESS _____

SITE LOCATION _____ PARCEL ID NO. _____

LAND OWNER _____ PHONE _____

ADDRESS _____

ENGINEER/SURVEYOR _____ PHONE _____

ADDRESS _____

ZONE DISTRICT	MINIMUM LOT SIZE	TYPE OF SEWAGE
_____	_____	_____

TOTAL NUMBER OF LOTS _____

ENGINEERED PLANS AND OTHER REQUIREMENTS: *** PLEASE REFER TO SUBDIVISION AND LAND DEVELOPMENT ORDINANCE FOR REQUIREMENTS ON THE SUBDIVISION PLAN.

	ENCLOSED	PENDING	N/A
SUBDIVISION PLAN:	_____	_____	_____
PDF OF ALL PLANS:	_____	_____	_____

OTHER AGENCY APPROVALS:

PA. DEP (SEWAGE):	_____	_____	_____
WASH CO. PLANNING CO.:	_____	_____	_____
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 _____