

**NOTTINGHAM TOWNSHIP
WASHINGTON COUNTY**

**Application for Final Approval of
Subdivision or Land Development**

Date Application Filed in Township Office _____

Type of Application

Subdivision _____

Land Development _____

Name of Plan _____

Location of Plan _____

County Assessor's Tax Map Parcel Number _____

Landowner's Name _____

Landowner's Address _____

Landowner's Telephone/Fax Number _____

Applicant's Name _____
(If different from landowner)

Applicant's Address _____

Applicant's Telephone/Fax Number _____

Applicant's email address _____

Purpose of Application _____

Has there been a previous application for final approval for this Subdivision/Land Development by this applicant for this property? ____Yes ____No

Engineer/Surveyor's Name _____

Engineer/Surveyor's Address _____

Engineer/Surveyor's Telephone Number _____

Zoning Classification _____

Total Contiguous Acreage _____ Total Lots or Dwellings _____

Nonresidential Land Development _____

Has the final plan been submitted within five (5) years after approval of the Preliminary Plan ? _____ Yes
_____ No

Have any extensions of time been granted by the Board of Supervisors for submission of the final plan?
_____ Yes _____ No. If Yes, date that extension of time granted by the Board of
Supervisors. _____

Does the final plan conform in all significant respects to the Preliminary Plan previously approved by the
Board of Supervisors and incorporate all modifications required by the governing body in its preliminary
approval? _____ Yes _____ No

Contents of Application:

_____ Final Plat containing required information in Sections 311-315.11 and
Sections 321-325

_____ Engineer/Surveyor's Certifications

_____ Landowner's Adoption and Dedication Clauses

_____ Estimate of Costs for All Public Improvements

_____ Evidence of Arrangements with All Public Utilities

_____ Permits or Waivers from Dept. of Environmental Protection

_____ Evidence of all State and Federal Permits

Has a variance or Conditional Use been granted for this property? _____ Yes _____ No
If Yes, give date of approval and name granted under.

Verification

I, _____, hereby depose and say that all the above statements and the statements contained in the papers submitted are true.

Signature of Applicant/Agent

Date

OFFICE USE ONLY

Date of Preliminary Plan approval by Board of Supervisors _____

Date referred to County Planning Agency _____

Date response received _____

Date of review at Planning Commission Workshop Meeting _____

Official date of filing (90 day clock) _____

90th day _____

Application fee paid? ____ Yes ____ No

Date application fee paid _____ Check # _____