## APPLICATION FOR REVIEW OF A FINAL PLAN Uwchlan Township, Chester County, Pennsylvania

The undersigned hereby applies for Review by the Planning Commission of the Preliminary plan submitted herewith and described below:

Name of subdivision:	Plan Dated:
County Deed Book No	Page No. :
Name of property owner(s):  (if corporation, list corporation's name and address and	d two officers of corporation)
Address:	
Phone No	
Name of applicant: (if other than owner)	
Address:	
Phone No	
Applicant's interest if other than owner:	
Engineer, Architect, Surveyor, or Landso	
Address:	
Phone No.	
	Number of Lots:
	ship (if any):
Type of development planned: Single family Two-Family Multi-Family Commercial Industrial Other (Specify)	
Will construction of buildings be undertaken im  By Whom? Subdivider  Other Developer  Purchasers of Lots	
Type of Water Supply Proposed? Public (Municipal Individual On-s	pal System)
Type of Sanitary Sewage Disposal Proposed? Pul	Live
Inc	Cappedlividual On-Site

Are Streets Proposed for Dedication? Yes No
Acreage for proposed park or other public or semi-public use:
Present Zoning and Zoning Changes, if any to be requested:
Have appropriate Public Utilities been consulted? YesNo
List all subdivision standards and requirements which have not been met and for which waiver or change is being requested:
Materials Accompanying this Application:
No. of Hard Copies of Plans
Electronic Copy of Plans
Copy of Deed Application Fee
The undersigned represents that to the best of their knowledge and belief, all the above statements are true, correct and complete.
The undersigned further represents that, except as otherwise specifically noted on the attached sheet, all proposed public improvements and facilities as shown on the Final subdivision plan are to be improved, constructed and completed, or a bond posted with the Municipality in sufficient amount to cover full estimated cost of construction thereof, prior to sale, transfer or agreement of sale of any subdivided parcels as shown on plan.
Signature of Owner or Applicant
By:
Date:

## TO BE FILLED IN BY PLANNING COMMISSION / TOWNSHIP STAFF

Date application was received:
Amount of fee paid:
Date reviewed by Planning Commission:
Referrals and Dates:
County Planning Commission  Municipal Engineer PADEP  Municipal Zoning Officer  Others
County Planning Commission  Municipal Engineer  Municipal Sewer Engineer  Municipal Lighting Consultant  Fire Department  Police Department  Environmental Advisory Council  Historic Commission  PADEP  Municipal Zoning Officer  Others
Planning Commission Action
Approved (date):
Approved subject to the following modifications:
Disapproved for the following reasons: (date)
Chairman
Attest: (Secretary)