

HEMPFIELD

— TOWNSHIP —

1132 Woodward Drive, Greensburg, PA 15601
Phone: 724-834-7232 x240 | Fax: 724-853-8815

APPLICATION FOR

MAJOR SUBDIVISION CREATING 5 LOTS OR MORE

(With Public Improvements)

Name of Plan:		Twp. Plan #:		
Location of Plan: (Use landmark coordinates, as well as local road names)		Work Order #:		
Tax Map Reference Number: 50 - - - - Parcel(s)				
Landowner's Name:		Phone:		
Landowner's Address:				
Applicant's Name: (If different from landowner)		Phone:		
Applicant's Address:				
Applicant's Email:		Fax:		
Purpose and Brief Description of Plan:				
Engineer or Surveyor's Name		Phone:		
Engineer/Surveyor's Address:				
Engineer/surveyor's Email:		Fax:		
Zoning Classification:	Total Contiguous Acreage in Plan:	Total New Lots:		
Utilities Available: (Name Provider):	Water:	Gas		
Electric:	Sewage:	(Attach Letter from MAWC)		
Content of Application:				
<input type="checkbox"/>	Evidence of Ownership	<input type="checkbox"/>	Filing Fee Payment	<i>10 Complete STAPLED sets of all paperwork and drawings (plus one mylar) must accompany the application.</i>
<input type="checkbox"/>	Evidence of Source of Water Supply	<input type="checkbox"/>	Review Fee Payment	
<input type="checkbox"/>	Planning Module	<input type="checkbox"/>	Stormwater App.	
<input type="checkbox"/>		<input type="checkbox"/>	Stormwater Payment	
Is Rezoning of the Property Necessary? <input type="checkbox"/> Yes <input type="checkbox"/> No		If yes, has application be filed? <input type="checkbox"/> Yes <input type="checkbox"/> No		
Has a variance, conditional use or use by special exception been granted for this plan? <input type="checkbox"/> Yes <input type="checkbox"/> No		If yes, give date of approval:		
Are any modifications to the Township subdivision and land development regulations required? <input type="checkbox"/> Yes <input type="checkbox"/> No				
If yes, list:				
Application Filing Fee:	\$1,000 + (# of Lots x \$50) = \$	Date Paid:	Check #	
Application Review Fee:	\$4,500 (Plus Possible Additional Review Fees If Needed)	Date Paid:	Check #	
I certify that all the above statements and the statements contained in the papers submitted herewith are true.				
Signature of Applicant:		Date:		

All areas of this application must be complete.