

**Howe Township
Application For Review of
Subdivision & Land Development Plans
(As Required by Howe Township Subdivision & Land Development Ordinance #10)**

Name, Address, and Contact Information of Applicant/Developer:

Name, Address, and Contact Information for the Owner of Record of Land:

Name, Address, Contact information, and Registration No. of Plan Preparer:
(Registered Surveyor or Registered Professional Engineer)

Proposed Name of Subdivision and/or Land Development Plan:
(as titled on plans being submitted with this application):
Address/Location of Subject Property:

Tax Parcel Identification Number: _____

Area to be Subdivided or Developed (In Acres): _____

Proposed Number of Lots/Dwelling Units: _____

Zoning Classification of Land: _____

Current Use and Description of the Property:

Proposed Use and Description of the Property:

Developer has submitted with this application the following documents:

(Note: Howe Township SALDO #10 requires a Preliminary Plan be submitted prior to a Final Plan)

- Sketch Plan
- Preliminary Plan (9 copies)
- Final Plan (9 copies)
- Preliminary/Final Plan (with waiver request)(9 copies)
- Copy of Design Calculations & Results
- Waiver, Alteration or Modification of Requirements
- Copies of all Restrictions, Covenants, etc, if any, under which lot is to be sold

If not signed by the owner of record, the undersigned hereby certifies that this application is authorized by the owner of record and that he/she has been authorized by the owner to make this application as his/her agent. The undersigned further represents that, to the best of his knowledge and belief, all information set forth in this application is true, accurate and complete. If applicant is not legal or record owner of the property, written authorization of the owner to sign or proof of equitable ownership, such as a contract for sale or lease, must be attached to the application.

Name of Applicant

Signature of Applicant

Date

Printed Name of Applicant

_____ **For Township Use Only – Applicants do not complete** _____

Fees: (Established by resolution by the Howe Township Board of Supervisors and due at the time of this application):

Application Fee Amount: _____
Date Paid: _____

Professional Consultant/Engineering Fees Amount: _____
Date Paid: _____

Other Fees Amount (if applicable): _____
Date Paid: _____

Date of Complete Plan Submission: _____

Date for Action by Board of Supervisors: _____

Name of Howe Township Official

Signature of Howe Township Official

Date

Telephone #: 717-444-3045

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e-mail: howetwp@pa.net

22 Cherry Rd.

Liverpool, PA 17045