

TOWNSHIP USE ONLY
Date Received _____
Project No. _____

**MINOR SUBDIVISION or LOT LINE ADJUSTMENT/CONSOLIDATION APPLICATION
UPPER SAUCON TOWNSHIP**

This application, application fee, escrow deposit fee, and any subsequent information needed must be submitted at least 28 days before the Planning Commission Meeting at which it is to be reviewed. Please note, however, that the Township reserves the right to determine in its sole discretion when an application will be placed on the Planning Commission meeting agenda.

1. **Name of Development** _____

2. **Location** _____

Lehigh County Parcel ID No. _____

3. **Plans Submitted:**

____ Minor Subdivision (Two Lot Residential Subdivision Only) ____ Lot Line Adjustment/Consolidation

4. **Total Acreage** _____ **Number of Lots/Units** _____

5. **Description of Development Proposed**

6. **Legal Name of Applicant** _____

Contact Person _____

Mailing Address _____

Phone _____ **Fax** _____ **Email Address** _____

7. **Name of Record Title Owner, if different from Applicant**

Contact Person _____

Mailing Address _____

Phone _____ **Fax** _____ **Email Address** _____

****PLEASE TAKE NOTE: If this project is a Lot Line Adjustment/Consolidation, the second title owner of the second property must sign at the end of this application****

8. **Name of Second Record Title Owner, if different from Applicant**

Contact Person _____

Mailing Address _____

Phone _____ **Fax** _____ **Email Address** _____

9. **Name of Design Firm** _____
Contact Person _____
Mailing Address _____
Phone _____ **Fax** _____ **Email Address** _____

10. **Other Consultant** _____
Mailing Address _____
Phone _____ **Fax** _____ **Email Address** _____

11. **Applicant's Attorney** _____
Mailing Address _____
Phone _____ **Fax** _____ **Email Address** _____

12. **Type of Water Supply:** ___Public ___Private Centralized System ___Individual On-Site

13. **Type of Sanitary Sewage Disposal:** ___Public ___Individual On-Site

14. **Please indicate that the following applicable reviews and permit applications have been submitted to the following agencies, if applicable:**

	<u>DATE SUBMITTED</u>
___ Lehigh Valley Planning Commission	_____
___ PA DEP Planning Module Application	_____
___ L.C.C.D. Soil Erosion & Sedimentation Plan	_____
___ PennDOT Highway Occupancy Permit	_____

15. **A Waiver request is included with this Application:** Yes ___ No ___

16. **The following is submitted with this application:**

- ___ 8 Folded Sets of Subdivision or Land Development Plan
- ___ 10 Sets reduced size Site or Land Development Plan
- ___ 1 Digital format (recommend .TIF Tagged Image File)
- ___ Application Fee of \$ 1,000.00 (per Resolution 2009-15)
- ___ Township Consultant Review Fee Escrow Deposit \$ 2,500.00 (per Resolution 2009-15)
- ___ 3 Copies of an Environmental Assessment Report (if applicable)
- ___ 3 Copies Wetlands Study/Report (if applicable)

To the best of my knowledge and belief, all information on this application is true, correct, and complete. **(If the Applicant is different from the Record Title Owner, then both MUST sign this application.)**

DATE

APPLICANT

DATE

RECORD TITLE OWNER

DATE

SECOND TITLE OWNER