

Lower Nazareth Township

Application for Subdivision, Land Development and Zoning Site Plan Review

Submission Type: (select from each category, as applicable)

Type of Submission	Proposed Use	Phase of Submission	
□ SITE PLAN	☐ COMMERCIAL	☐ SKETCH PLAN	
SUBDIVISION PLAN	☐ INDUSTRIAL	☐ PRELIMINARY	
☐ LAND DEVELOPMENT	INSTITUTIONAL	FINAL DELIMINARY/FINAL	
	☐ RESIDENTIAL	☐ PRELIMINARY/FINAL	
DATE OF APPLICATION:	NAME OF PROJECT:		
If a Final Plan, Indicate Date of Preli	minary Plan Approval:		
Is this part of a phased plan? \square No	☐ Yes → Phase Number Date of	Preliminary Plan Approval	
SITE INFORMATION:			
Parcel No(s)	Location of Subdivision or Site (S	Street):	
Number of Lots: Total	al Acreage: Minimum Lot Size	Required by Ordinance:	
Lineal Fee of New Streets:	Are all streets proposed for de	dication: 🗖 No 🗖 Yes	
Zoning District: Present Use: Proposed Use:			
Are you requesting any waivers? No	☐ Yes → Complete "Waiver Request App	lication"	
List Any Prior Subdivisions or Zoning Ap	ppeals Filed in Connection with this property	r	
Water Supply: ☐ Public System ☐	On-Lot System Sewer System:	Public System	
APPLICANT:	Phone #: ()	
Address:	Alternate Pho	Alternate Phone #: ()	
	Fax #: ()_	·	
Point of Contact:	Email Address	Email Address:	
PROPERTY OWNER:	Phone #: ()	
☐ Same as Applicant	Altograto Dia	no #1 ()	
	Alternate Pho		
	Fax #: ()		
Point of Contact:	Email Address	S:	
ENGINEER/SURVEYOR:	Phone #: (_ Phone #: ()	
Address:	Alternate Pho	ne #: ()	
	Fax #: ()_		
Point of Contact:	Email Address	Email Address:	
ATTORNEY:	Phone #: (Phone #: ()	
Address:	Alternate Pho	ne #: ()	
	Fax #: ()_		
Point of Contact:	Email Address	S:	

The undersigned represents that to the best of his/her knowledge and belief, all the above statements are true, correct and complete. The undersigned further represents that, except as otherwise specifically note on an attached sheet, all proposed public improvements and facilities as shown on the plans are to be improved, constructed and completed, or a bond posted with the Township in sufficient amount to cover the full estimated cost of construction thereof, prior to sale, transfer or agreement of sale of any subdivided parcels as shown on the plan.

Signature of Applicant	t: Date:
Signature of Owner:	Date: Owner Signature Required or Evidence of Authorization to File on Owner's Behalf Shall Be Provided
NOTE:	
submitted include the above the specified m will be deposited in responsible for all fees	
	Calculation of Fees
	(Please Complete)
Application Fee:	Show Calculation = \$
Escrow Fee:	Show Calculation
	~FOR TOWNSHIP USE ONLY~
	Check #Receipt #
Escrow Fee:	Check #Receipt #
Fee Checked By:	