FOSTER TOWNSHIP

MAJOR SUBDIVISION APPLICATION

		APPLICATION NO.	OF 1.00
APPLICANT			
NAME:			
ADDRESS:			
PHONE:	100		
OWNER OF RE	CORD		
NAME:			
ADDRESS:			
PHONE:			
REGISTERED :	SURVEYOR/EN	NGINEER .	
NAME:			
ADDRESS:			
PHONE:			
LOCATION/AD	DRESS OF PR	OPERTY TO BE SUBD	DIVIDED:
TIMEDNE CO	INTEL TAY MA	AP DESCRIPTION:	
LUZERNE CO	UNIT TAX MA	AF DESCRIPTION.	
VOLUME	PAGE	LOT NUMBER	-
ATTACH A CO	PY OF THE CU	RRENT DEED OF RECO	ORD FOR THE
ABOVE PROPE		C C	

TINEAD	DIMENSIONS OF EACH LOT AND TOTAL SQUARE FEET
	REAGE OF EACH LOT TO BE CREATED UPON SUBDIVISI
APPROV	
LOT #1	
LOT #2	
LOT #3	
LO1 #3	
LOT #4	
201	
LOT #5	
LOT #6	
	ATTENDED AND ADDRESS AND ADDRE
	ATTACH ADDITIONAL SHEETS AS NECESSARY
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PROPOS APPROI ACCOR	DISTRICT(S) IN WHICH THE PROPERTY IS LOCATED: SED TYPE OF SEWAGE DISPOSAL: PRIATE DER SEWAGE PLANNING MODULE IS REQUIRED DANCE WITH PENNSYLVANIA CODE TITLE 25.
PROPOS APPROPACCOR	DISTRICT(S) IN WHICH THE PROPERTY IS LOCATED: SED TYPE OF SEWAGE DISPOSAL: PRIATE DER SEWAGE PLANNING MODULE IS REQUIRE!

BASED UPON THE ZONING OFFICER'S REVIEW, WILL ANY VARIANCE BE REQUIRED UNDER THE FOSTER TOWNSHIP ZONING ORDINANCE YES NO					
	PECIFY THE REQUIRED VARIANCES PER THE DECISION OF ING OFFICER.				
A STATE OF THE PARTY OF THE PAR	MODIFICATIONS FROM THE FOSTER TOWNSHIP SION AND LAND DEVELOPMENT ORDINANCE TED?				
□YES □] NO				
	PECIFY BELOW THE REQUESTED MODIFICATIONS AND S AND/OR PROVISIONS OF THE ORDINANCE RELATED TO QUEST.				
	ATTACH ADDITIONAL SHEETS AS NECESSARY				
UNREAS	N FULL BELOW THE GROUNDS AND/OR FACTS OF ONABLENESS OR HARDSHIP TO SUPPORT THE REQUESTED CATION(S).				

ATTACH ADDITIONAL SHEETS IF NECESSARY

13. PROVIDE THE ORIGINAL AND NINETEEN COPIES OF THE MAJOR SUBDIVISION APPLICATION ATTACHED TO TWENTY (20)
PREFOLDED COPIES OF THE SUBDIVISION PLAN AT A SCALE OF:

ONE (1) INCH EQUALS (20) FEET FOR PROPERTIES NOT GREATER THAN TWO ACRES

OR

NOT GREATER THAN ONE (1) INCH EQUALS (50) FEET FOR PROPERTIES IN EXCESS OF TWO ACRES.

- 14. ATTACH TWENTY (20) PREFOLDED COPIES OF THE SUPPORTING MATERIAL, I.E., SOIL EROSION AND SEDIMENTATION CONTROL PLAN, STORMWATER DRAINAGE PLAN, INCLUDING STORMWATER CALCULATIONS.
- 15. PROVIDE A COPY OF THE HIGHWAY OCCUPANCY PERMIT (IF APPLICABLE).

I HEREBY CERTIFY THAT THE INFORMATION CONTAINED WITHIN THIS APPLICATION IS TRUE AND ACCURATE TO THE BEST OF MY KNOWLEDGE. I FURTHER AGREE TO ENTER INTO A BINDING AGREEMENT TO REIMBURSE FOSTER TOWNSHIP FOR ALL CONSULTING FEES INCURRED FOR THE REVIEW AND INSPECTION OF THIS APPLICATION AND ACCOMPANYING PLANS AS SO REQUIRED AND DIRECTED BY FOSTER TOWNSHIP.

SIGNATURE OF APPLICANT/DEVELOPER	DATE
SIGNATURE OF OWNER (IF NOT SAME AS APPLICANT/DEVELOPE)	DATE

THE INDIVIDUALS SIGNING ABOVE MUST ATTEND THE FOSTER PLANNING COMMISSION MEETING TO DISCUSS THIS APPLICATION AND TO RESPOND TO ANY QUESTIONS. FAILURE TO DO SO MAY RESULT IN DISAPPROVAL OF THE PROPOSED SUBDIVISION.

TO BE COMPLETED BY FOSTER TOWNSHIP

COUNTY REVIEW FEE:
DATE PLANS AND APPLICATION WERE SUBMITTED TO LUZERNE COUNTY PLANNING COMMISSION.
FIRST MEETING DATE AT WHICH THIS SUBDIVISION PLAN WAS CONSIDERED BY THE FOSTER TOWNSHIP PLANNING COMMISSION:
ATTACH COMMENTS AND/OR RECOMMENDATIONS OF ANY CONSULTANT TO FOSTER TOWNSHIP AND COMMENTS OF THE FOSTER TOWNSHIP PLANNING COMMISSION AND THE LUZERNE COUNTY PLANNING COMMISSION.
DECISION RENDERED AND DATE OF DECISION BY FOSTER TOWNSHIP BOARD OF SUPERVISORS