

LYCOMING COUNTY PLANNING COMMISSION

48 W. Third St., Williamsport, PA 17701

Phone: (570) 320-2130 Fax: (570) 320-2135

SUBDIVISION/LAND DEVELOPMENT APPLICATION

Application must be completed, and returned with fee (checks made payable to Lycoming County Planning Commission), plus any other required documents or plans, to begin the mandated review process time-table for approval.

1. Date of application _____ Municipality _____ Tax Parcel No. _____

2. Landowner(s) _____ Home Phone () _____

Address _____ Work Phone () _____

_____ Fax () _____

3. Agent (if applicable) _____ Phone () _____

Address _____ Email _____

4. Approved plans to be sent to _____

Address _____

5. **REAPPROVAL only**, check here _____ Signature _____

6. Surveyor or Engineer _____ Phone () _____

Address _____ Fax () _____

7. Number of subdivision/land development plan copies submitted (6 minimum) _____

Total Area Acres: _____ Number of lots: _____ or (single, one only) _____ (addition)

8. _____ - _____ _____ - _____ _____ - _____ _____ - _____
Lot # acreage Lot # acreage Lot # acreage Lot # acreage

Residual acreage _____

9. Proposed use of land and/or building(s): _____

10. **Land Development Only:** Square footage of building(s) existing _____, proposed _____

11. **Land Development Only:** Square footage of proposed addition(s) _____

12. **Land Development Only:** Lot area _____

13. Filing fee _____ Date paid _____ Ck _____ Cash _____

14. <u>What is Existing on:</u>	New Lot(s)	Remaining Land	<u>What is Proposed for:</u>	New Lot(s)	Remaining Land
Public water	_____	_____	Public water	_____	_____
Public sewer	_____	_____	Public sewer	_____	_____
Private well	_____	_____	Private well	_____	_____
Private septic	_____	_____	Private septic	_____	_____

Case No. _____

Please Turn Over

15. (please circle) Sewage Planning Module; Soils Test Results; Request for Planning Waiver; or Sewage Permit
 Date submitted _____ Proposed system _____
16. Municipal Water company letter- date submitted _____
 Municipal Sewer company letter- date submitted _____
17. Road profiles _____ Cross sections _____
 (date submitted) (date submitted)
18. Have easement agreements been entered into with adjacent property owners/public utilities? (water, power, phone, drainage, access) Yes _____ No _____
 Describe _____ Date Submitted _____
19. Private Right-of-way Use and Maintenance Agreement: Yes ___ No ___ Date submitted _____
 Existing _____
20. Stormwater Management Plan: Yes___ No___ Date Submitted _____
21. Are you presently in the "Clean & Green" program? Yes _____ No _____
22. Are there any conservation or agricultural easements on your property? Yes _____ No _____
 Describe _____ If yes, have you secured the appropriate easement board approvals? _____

(I) (We) hereby certify that the information given above is correct to the best of (my) (our) knowledge, **and further agree to pay all reimbursable costs as stipulated by the Lycoming County Commissioners' supplement to existing fee schedule adopted 6/2/11 as amended, including fees for needed reviews and inspections performed by the Lycoming County Planning Commission's Consulting Engineer.**

(I) (We), as a condition precedent to final approval, give permission for a Staff member to enter upon the subject property to conduct a site visit.

(I) (We), as a condition precedent to final approval, agree to complete all required improvements, pay fees and further agree that no occupancy of the premises or sale of lots shall take place until approval has been granted by the Lycoming County Planning Commission. Failure to obtain final approval (prior to occupancy or sale) will constitute a violation of the County Subdivision and Land Development Ordinance.

(I) (We) certify that all information contained herein is true and correct.

Land Owner Signature _____ Agent Signature _____
 (Required) (Required)

Note: All applications and associated emails, documents, and data will be public records and subject to public access with limited exceptions.

LCPC USE

Application Received By _____

REVIEW: Preliminary _____; Final _____; Sketch _____; Reapproval _____

Tax Parcel Number confirmed: _____ Zoning Classification _____

Date letter sent to municipality _____ Response Date _____

Site visit date _____ Floodplain review Yes _____ No _____

APPROVALS

Date approved _____ 90-day recording date _____

Date re-approved _____ 90-day recording date _____

Date ratified _____ Date recorded _____