



Chalfont Borough
 40 North Main Street
 Chalfont, PA 18914

Phone: 215-822-7295
 Fax: 215-822-5528

SUBDIVISION AND LAND DEVELOPMENT REVIEW APPLICATION

Both sides of this application must be completed by the Applicant or his/her agent and submitted with the required number of plans and fee to the Borough Manager. Plans must be submitted two weeks prior to the 1st Monday of the month for consideration at that month's Planning Commission Meeting.

Name of Subdivision:				
Location:				
Tax Parcel #:		Total Acreage:		Zoning District:
Applicant:			Phone:	
Address:				
Owner of Record:			Phone:	
Address:				
Registered Engineer or Surveyor:			Phone:	
Address:				
Attorney:			Phone:	
Address:				

PROPOSAL:

Residential: _____ Commercial: _____

Number of Lots: _____

Nature of Land Development: _____



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Water Supply: Private _____ Public _____
Sewer Service: On-Lot _____ Public _____

20 sets of Plans, Application, and fee must be included for submission to Bucks County Planning Commission. When applicable, Planning Modules, Plans, Resolution for Act 37 Plan Revision, Letter of Transmittal, and fee must be submitted for application to the Bucks County Health Department.

Please check where applicable if submission has been made to the following:

Supplying Water Department	yes _____	no _____	n/a _____
Supplying Sewer Department	yes _____	no _____	n/a _____
PennDOT	yes _____	no _____	n/a _____
Bucks County Conservation District	yes _____	no _____	n/a _____
Army Corp of Engineers DER	yes _____	no _____	n/a _____

I hereby certify that I am familiar with the submission requirements of the Chalfont Borough Subdivision and Land Development Ordinance and the attached Application/Plans conform to the submission requirements to the best of my knowledge and belief. I hereby authorize employees and/or agents of Chalfont Borough to enter the land proposed to be subdivided, if necessary.

Signature of Applicant

Date

For Borough Use Only:

File Number: _____

Date Received: _____

Fee Paid: _____