

# TOWNSHIP OF SALISBURY

---- LEHIGH COUNTY, PA --2900 South Pike Avenue, Allentown, PA 18103
610-797-4000

### **SKETCH PLAN APPLICATION**

Date Received:	Proje	ct No:	
PROPERTY II	NFORMATION:		
Project Name:			
	Major Subdivision		
	Minor Subdivision	O Lot Line Adjustm	ent O Lot Consolidation
Total Land Area	a of Project:	Zoning Distr	rict:
Number of Lots Originally:			ots When Completed:
APPLICANT:			
Company Name	::		
	ntact:Phone No:		
Applicant Street	Address:		
City:		_ State:	Zip Code:
Email Address:			
PROPERTY O	WNER:		
project may procee		cels with multiple property ow	r provide written permission that the proposed ners, please attached form "Additional Owner
Company Name	::		
			Phone No:
Owner Street A	ddress:		
City:		State:	Zip Code:
Email Address:			

## **ATTORNEY:** ☐ Applicant wishes all communications to include attorney Contact: \_\_\_\_\_\_ Phone No: \_\_\_\_\_ Firm Street Address: City: \_\_\_\_\_ State: \_\_\_\_ Zip Code: \_\_\_\_ Email Address: PROFESSIONAL DESIGNER: ☐ Applicant wishes all communications to include professional designer Company Name: Contact: \_\_\_\_\_ Phone No: \_\_\_\_\_ Company Street Address: \_\_\_\_\_ City:\_\_\_\_\_ State: \_\_\_\_ Zip Code:\_\_\_\_ E-Mail Address: **SURVEYOR:** ☐ Applicant wishes all communications to include surveyor Company Name: Contact: Phone No: Company Street Address:

## SUBMISSION REQUIREMENTS (Additional materials may be requested by the Township during the review and approval process):

City:\_\_\_\_\_ State: \_\_\_\_ Zip Code:\_\_\_\_\_

- Application fee: \$225 is public meeting is requested; \$125 if public meeting is not requested
- Escrow deposit: \$1,000 (Township may request additional escrow deposits during the review and approval process as deemed necessary)
- 4 printed copies and 1 PDF/electronic copy of completed appeal application

E-Mail Address:

- 4 printed copies and 1 Microsoft Word file or Microsoft Excel file list of all property owners within 300 feet, in all directions, of the subject property lot lines including the property owners' mailing addresses
- 4 printed copies and 1 PDF/electronic copy of all supporting documents and exhibits for the hearing (may be submitted up to 24 hours prior to hearing)
- 4 printed and 1 PDF/electronic copy of all exhibits to be presented at meeting (may be submitted up to 24 hours prior to meeting)

applicant):			
Name:	::Phone No:		
Street Address:			
City:	State:	Zip Code:	
	W REQUEST (check all that are applicated the Planning Commission)		
□ I am requesting a written	review by (check all that are applicable):		
□ Planning & Zoning	Officer		
□ Township Engineer			
□ Township Solicitor			
□ Township Fire Insp	ector		
□ Other:			
□ I am requesting private m	eeting with (check all that are applicable)	):	
□ Planning & Zoning	Officer		
□ Township Engineer			
□ Township Solicitor			
□ Township Fire Insp	ector		
□ Other:			
	all costs associated with each request. P ation" for further information regarding	Please see the reimbursement of expenses incurred by	
PERMISSION FOR AER	IAL & GROUND VIEW OF PROPER	RTY:	
staff, Planning Commission		ze members of the Township of Salisbury dually to visit the site and review aerial and orhood as part of this submission.	
Applicant Signature:		Date:	
Owner Signature:		Date:	

ESCROW DEPOSIT SHALL BE RETURNED TO (If not completed, check will be returned to

#### ACKNOWLEDGEMENT/CERTIFICATION:

Applicant agrees to reimburse the Township for all engineering, legal, or other outside agency expenses incurred by the Township, plus a 3% administrative fee for residential projects and a 5% administrative fee for commercial/non-residential projects. At the applicant's request, upon the issuance of a zoning permit and the payment of all expenses, the balance of the escrow will be returned. The escrow will not be returned until all invoices from the Township Solicitor, Township Engineer, and any other outside agency have been received by the Township and paid by the applicant. Invoices are typically submitted at the end of every month. If invoices are not paid within 90 days, the project will be placed on hold and no further activity, with the exception of any necessary time extensions, may take place until the applicant's account is brought to the present or a payment plan has been established with the Township Finance Department.

Each sketch plan submission requires a separate application and application fee. The initial escrow deposit will be rolled over into new sketch plan submissions and any other application submission which would require an escrow deposit (additional funds may be required at the Township's request to increase the deposit amount). After six months of inactivity, the sketch plan application will be considered abandoned and, after verification that all invoices from the Township Solicitor, Township Engineer, and any other outside agency have been received by the Township and paid by the applicant, the escrow deposit will be returned to the applicant. At any point, the applicant may also, in writing, request that the application be withdrawn and the escrow deposit be returned.

The undersigned hereby certifies that they have read and examined this application and that the proposed work is accurately represented in the statements made in this application and that all work shall be executed in accordance with the terms and conditions of said permits, the Township of Salisbury.

Applicant Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Owner Signature:		Date:
Office Use Only		
Use: □ Commercial / Nonresidential	□ Residential	

Date Deposited:

Escrow Amount: