

WRIGHTSTOWN TOWNSHIP, Bucks County, Pennsylvania

2203 Second Street Pike,
Wrightstown, PA 18940-9662
215-598-3313
215-598-0529 FAX



APPLICATION FOR SUBDIVISION AND/OR LAND DEVELOPMENT

- | | |
|--|---|
| <input type="checkbox"/> Minor Subdivision | <input type="checkbox"/> Sketch Plan (optional) |
| | <input type="checkbox"/> Final Plan |
| <input type="checkbox"/> Major Subdivision or
Land Development | <input type="checkbox"/> Sketch Plan (optional) |
| | <input type="checkbox"/> Preliminary Plan |
| | <input type="checkbox"/> Final Plan |
| <input type="checkbox"/> Request for Exemption as Agricultural Subdivision | |
-

Name of Applicant:_____

Address of Applicant:_____

Telephone No.:_____ Fax No.:_____

Name of Owner of Record:_____

Address of Owner:_____

Telephone No.:_____

Name of Subdivision or Land Development:_____

Location of Parcel:_____ No. of Acres_____

TMP No.:_____ Zoning Classification:_____

Proposed Number of Lots/Units:_____ Date of Plan:_____

Date of Any Previously Approved Subdivision of this Tract:_____

The Following Documents Are Submitted Herewith:

- () _____Copies of Plan, including site capacity calculations.
- () Bucks County Planning Commission application plus appropriate fees.
- () Four copies of Planning Modules for land development, signed and notarized.
- () Four copies of Traffic Impact Study, if applicable.
- () Other: (Please List):_____

- () Township fee in the Amount Of:_____
- () Escrow in the Amount Of:_____

Date Submitted:_____ Signature of Applicant:_____

Received by Wrightstown Township on (Date):_____

Submission Is () Complete
 () Incomplete

Township Secretary _____

OFFICE USE ONLY

Forward To () BCPC Date:_____

() ENGINEER Date:_____

() BCHD Date:_____

() P & R Date:_____

() BCCD Date:_____

Reviews Received From:

() BCPC Date:_____

() ENGINEER Date:_____

() BCHD Date:_____

() P & R Date:_____

() BCCD Date:_____

Restrictions, Covenants or Encumbrances: _____

Deed Book: _____ Page: _____

Name of Engineer or Surveyor: _____

Address: _____

Attorney or Agent: _____



I hereby certify that I am familiar with submission requirements of the Wrightstown Township Subdivision and Land Development Ordinance and, to the best of my knowledge and belief, the application/plan(s) conform to submission requirements.

I agree to reimburse Wrightstown Township for all expenses incurred by reason of this Application and that such costs may be deducted from the Escrow Account deposited with the Township. In the event that the amount of the escrow falls below thirty-five percent (35%) of the sums required in the fee schedule attached hereto, I agree to replenish the escrow account to the original amount. I agree that the Township shall not be required to conduct further reviews until the escrow has been replenished to the original amount and that the time for action on the application is extended for a period of thirty (30) days after the date the escrow has been replenished.

A 15% administration charge shall be added to all applicable fees and deducted from the portion of the fees paid in advance. Within sixty (60) days of the withdrawal of the plan by the Applicant, or the plans being signed by the Board of Supervisors and recorded, the difference between the sums deposited by the Applicant and the expenses withdrawn from the escrow account shall be returned to the Applicant.

I agree that the Township is entitled to retain such consultants that in the Township's discretion are reasonably necessary for evaluation of the Application. Fees charged by Professional Consultants, including but not limited to Attorneys, Engineers, Geologists, Architects, Land Surveyors, Landscape Architects, Planners, soils, wetlands, and similar consultants, will be deducted from the escrow account established by the Applicant with the Township at the time the project is accepted by the Township.

I agree that official representatives, employees and/or agents of Wrightstown Township and any professional consultants retained by the Township may enter the property for the purposes of inspecting, testing and performing other evaluations that are reasonably required.

I understand that I am responsible for providing the Township with a written extension request prior to the expiration of the Township's review period for any extension sought. I further understand that the Township will not provide me with notice prior to the expiration of the review period.

In the event revised plans are submitted for reviews which have not been requested in writing by the Township. I authorize an extension in the Township review period for 90 days from the date of receipt by the Township.

Applicant consents and agrees to pay all expenses incurred by the Township pertaining to this application. These shall include, but are not limited to, legal, engineering and consultant fees, regardless of whether or not it is legally required.

Applicant's Signature: _____

Commonwealth of Pennsylvania:

County of : _____

On this, The _____ Day of _____, 20 (year) before me

Personally appeared _____ who

Acknowledge him/herself to be an applicant of (name of Subdivision)

And, being authorized to do so, executed the foregoing

Instrument for the purposes therein contained.

IN WITNESS WHEREOF, I HAVE HEREUNTO SET MY HAND AND
OFFICIAL SEAL.

NOTARY PUBLIC: _____

MY COMMISSION EXPIRES: _____