FORM 1
APPLICATION FOR REVIEW OF SKETCH PLAN

Application is hereby made for review of the Sketch Plan submitted herewith and more particularly described below:

1. Name of Subdivision:_____ Plan Dated:_____

2. Name of Applicant(s):_____

   Address:_____
   _____Phone No._____

3. Name of Owner(s): _____
   (If other than Applicant)

4. Applicant's interest, if other than owner:_____

5. Location of Subdivision: _____
   _____

6. Engineer of Surveyor responsible for plan: _____
   Address:_____
   _____ Phone No._____

7. Acreage being subdivided:_____ Number of Lots_____

8. Acreage of adjoining land in same ownership (if any):_____

9. Lot use proposed:_____ Single Family _____Commercial
   _____ Two Family _____Industrial
   _____ Townhouse _____Other (Specify)
   _____Multi-Family

10. Zoning Classification:_____

    Zoning changes to be requested:_____

11. Type of water supply proposed: _____Public System

12. Type of sanitary sewage disposal proposed: _____ Public System

    _____ Individual On-Site

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13. Type of off-street parking proposed: _____Garages
_____Driveways
_____Other

14. List proposed Improvements 1._____
2._____
3._____

15. Intent: Sell Lots Only _____
Construct houses for sale _____
Other _____

_____
Signature of Applicant

FORM 2

APPLICATION FOR REVIEW OF PRELIMINARY PLAN

Application is hereby made for review of the Preliminary Plan submitted herewith and more particularly described below:

1. Name of Subdivision:_____ Plan Dated:_____
2. Source of Title:

   Northampton County Deed Book No.:_____ Page No._____

3. Name of Applicant(s):_____
   Address:_____

   _____Phone No.:_____

4. Name of Property Owner(s):_____
   (If other than applicant)
   Address:_____
   _____Phone No.:_____

5. Applicant's interest, if other than owner:_____

6. Engineer or Surveyor responsible for plan:_____
   Address:_____
   _____Phone No.:_____

7. Acreage being subdivided: _____Number of Lots:_____

8. Acreage of adjoining land in same ownership (if any):_____

9. Minimum Lot area proposed:_____

10. Lot use proposed: _____Single Family _____Commercial
    _____Two Family _____Industrial
    _____ Townhouse
    Other (Specify)
    _____Mufti-Family

11. Will construction of buildings be undertaken immediately? _____Yes _____No

    By Whom? _____Applicant
    _____Other Applicants
    _____Purchasers of individual lots

12. Type of water supply planned: _____ Public System

13. Type of sanitary sewage disposal planned: _____ Public System
_____ Individual On-Site

14. Type of off-street parking proposed: _____ Garages
_____ Driveways
_____ Other (Specify)

15. Lineal feet of new streets planned:_____
16. Are all streets proposed for dedication? _____ Yes _____ No
17. Deed restrictions that apply or are contemplated. (if no restrictions, state "none", if "yes" attach copy): _____

18. Acreage proposed for parks or other public use: _____

19. Zoning classification: _____

20. Have appropriate public utilities been consulted? _____ Yes _____ No

21. List proposed Improvements and utilities and intentions to install or post Improvements Guarantee prior to final Endorsement by the Borough.

	Improvement	Intention
1.		
2.		
3.		
4.		
5.		

22. List of maps and other material accompanying application and number of each:

	Item	Number
a.		
b.		
c.		
d.		
e.		
f.		
g.		

Date: _____

Signature of Applicant:

_____

FORM 4

FORM FOR SUBMITTAL OF IMPROVEMENTS COSTS ESTIMATES

Item No.	Description	Units	Escrowed Quantities Quantity	Unit Price	Total
A.					
1.					
2.					
3.					
	Subtotal Item A				
B.					
1.					
2.					
3.					
	Subtotal Item B				
	Subtotal of Items A and B				
	Escalation				
	Contingencies				
	TOTAL AMOUNT OF ESCROW				

I hereby certify that the foregoing estimate of the cost of completion of the required improvements is a fair and reasonable estimate of such cost.

_____

Professional Engineer

FORM 3

APPLICATION FOR REVIEW OF FINAL PLAN

Application is hereby made for review of the Final Plan submitted herewith and described in the accompanying maps and documents.

1. Name of Subdivision:_____Plan Dated:_____

2. Name of Applicant(s):_____

   Address:_____

   _____ Phone No._____

3. Name of Property Owner(s): _____
   (if other than applicant)
   Address:_____

   _____ Phone No._____

4. Date of approval of Preliminary Plan:_____

5. Final Plan follows exactly the approved Preliminary Plan: _____ Yes _____ No
   If no, list changes _____
   _____
   _____
   _____
   _____

6. List of maps and other documents accompanying application and the number of each.

	Item	Number
(a)		
(b)		
(c)		
(d)		
(e)		
(f)		
(g)		
(h)		

Date:_____ Signature of Applicant:_____