

LOWER SALFORD TOWNSHIP  
379 MAIN STREET HARLEYSVILLE, PA 19438  
PHONE 215-256-8087 FAX 215-256-4869

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**SUBDIVISION AND LAND DEVELOPMENT APPLICATION FORM**

**Section I - to be completed by applicant:**

Plan Title \_\_\_\_\_

Date of Application \_\_\_\_\_

Date of Revised Application \_\_\_\_\_

Is zoning relief contemplated for this application? Yes \_\_\_\_\_ No \_\_\_\_\_

Variance \_\_\_\_\_ Special Exception \_\_\_\_\_ Zoning Ordinance - Section \_\_\_\_\_

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**Section II - to be completed by applicant:**

Name of Applicant \_\_\_\_\_

Address \_\_\_\_\_

Phone \_\_\_\_\_ Fax \_\_\_\_\_ E-Mail \_\_\_\_\_

Developer's Name (if different than applicant) \_\_\_\_\_

Developer's Address \_\_\_\_\_

Phone \_\_\_\_\_ Fax \_\_\_\_\_ E-Mail \_\_\_\_\_

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**Section III - to be completed by township at time of application:**

Township Filing Fee: \$ \_\_\_\_\_ Check # \_\_\_\_\_ (payable to Lower Salford Twp.)

Engineering Escrow Fee: \$ \_\_\_\_\_ Check # \_\_\_\_\_ (payable to Lower Salford Twp.)

MCPC Review Fee: \$ \_\_\_\_\_ Check # \_\_\_\_\_ (payable to M. C. Treasurer)

Plans \_\_\_\_\_ (number of copies) Type: Sketch \_\_\_\_\_ Preliminary \_\_\_\_\_ Revised \_\_\_\_\_

Township Extension of Time Form: Yes \_\_\_\_\_ No \_\_\_\_\_

Stormwater Management & Erosion Control Reports: \_\_\_\_\_ (number of copies)

Other Documents: \_\_\_\_\_

Date of Planning Commission Meeting: \_\_\_\_\_