



Sketch Plan Application

1. Date of Application: _____

2. Applicant:

a. Name: _____

b. Mailing Address: _____

c. Telephone Number: _____

d. Email Address: _____

e. State whether owner of legal title or equitable owner: _____

f. If not legal owner, list names and addresses of all legal owners:

Please attach Deed to the Property to prove ownership or an Agreement of Sale to prove equitable ownership.

3. Applicant's attorney, if any:

a. Name: _____

b. Mailing Address: _____

c. Telephone Number: _____

d. Email Address: _____

4. Property Details:

a. Present Zoning Classification: _____

b. Present Land Use: _____

c. Location (Street Address): _____

d. Parcel #: _____

e. Lot Dimensions:

i. Area: _____

ii. Frontage: _____

iii. Depth: _____

f. Water and Sewer Service to the Property (Check one or more, if applicable)

- i. Public Water _____
- ii. Public Sewer _____
- iii. Private Water _____
- iv. Private Sewer _____

g. Size, construction, and use of existing improvements; use of land, if unimproved:
(Please submit as an attachment)

5. Proposed Use(s):

- a. Proposed use(s) and construction:
(Please submit as an attachment)

6. One original and seven (7) copies of this application and all attachments including a digital version of said application and attachments must be filed with the Township Manager. Additionally, please provide eight (8) detailed Sketch Plans of the real estate affected indicating the location and size of improvements now erected and proposed to be used, and a copy of the deed, agreement of sale, lease agreement, etc. Digital versions of these plans and documents must also be provided in conjunction with this application submission.

7. A Sketch Plan Application Fee and Escrow deposit must also be included in this submission in the amount indicated within the official Township Fee Schedule in the format of a check made out to Worcester Township.

8. Has any submission been filed for this parcel/tract? (Check one)

- a. Yes
- b. No

If yes, elaborate: **(Please submit as an attachment)**

CERTIFICATION

I (We) hereby certify that the above (and enclosed) information is true and correct to the best of my (our) knowledge, information or belief.

Signature

Printed Name

Signature

Printed Name

Date