

Middlesex Township, Butler County
133 Browns Hill Road, Valencia, PA 16059
Phone (724) 898-3571 Fax (724) 898-4607

LAND DEVELOPMENT APPLICATION

APPLICANT:

Name: _____

Address: _____

Phone: _____

FAX: _____

E-mail: _____

PROPERTY OWNER: () Check Here if Same as Applicant

Name: _____

Address: _____

Phone: _____

FAX: _____

E-mail: _____

ENGINEER/ARCHITECT/SURVEYOR:

Name: _____

Address: _____

Phone: _____

FAX: _____

E-mail: _____

LAND DEVELOPMENT APPLICATION (Cont.)

LOCATION:

- a. Development Name: _____
- b. Property Location / Street Address: _____
- c. Tax Parcel ID Number: _____
- d. Total Acreage: _____ Number of Acres to be Developed: _____
- e. Proposed use as defined in Chapter 175 of the Township Code, Zoning: _____

- f. Zoning District: _____
- g. Water Supply: ☐ Public ☐ Other (Specify): _____
- h. Sewage Disposal: ☐ Public ☐ Other (Specify): _____
- i. Existing condition(s)/use(s):
1. Existing use(s): _____
 2. Number of structures: _____
 3. Number of existing parking spaces: _____
 4. Number of existing handicap spaces: _____
 5. Number of existing van accessible spaces: _____
 6. Pervious/impervious lot coverage percentage: _____
- j. List any variances, modifications or waivers PREVIOUSLY GRANTED for site: _____

- k. List any modifications or waivers BEING REQUESTED for site: _____

- l. Comments/other information: _____

LAND DEVELOPMENT APPLICATION (Cont.)

Applicant, being duly sworn, says he/she is: (Please mark the appropriate response)

- ☐ The owner of the property in question.
- ☐ The authorized agent for the owner of record of the property for which the application is made. The owner's signed and notarized authorization to his/her agent to act on owner's behalf is required to be submitted.
- ☐ Has an equitable interest in the property as submitted and documentation is attached to this application.

All information provided is true and correct to the best of my knowledge:

INDIVIDUAL APPLICANT	PARTNERSHIP APPLICANT	CORPORATE APPLICANT
_____ Signature of individual	_____ Name of Applicant	_____ Name of Applicant
	By: _____ Signature Partner	By: _____ Signature
		_____ Title

FOR TOWNSHIP USE ONLY

Application Number: _____	Date Received: _____
	TLD Date: _____
<input type="checkbox"/> Preliminary Application	
<input type="checkbox"/> Final Application	
Zoning District: _____	Escrow Acct. No.: _____
Use Permitted by:	
<input type="checkbox"/> Right	
<input type="checkbox"/> Conditional Use	
<input type="checkbox"/> Special Exception	