



304 South State Street
Clarks Summit, PA 18411

Phone 570-585-4811
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SUBDIVISION OR LAND USE PLAN REVIEW APPLICATION

APPLICATION IS HEREBY MADE FOR REIVEW OF THE SUBDIVISION OR LAND USE PLAN AND RELATED DATE AS SUBMITTED HERewith IN ACCORDANCE WITH THE BOROUGH OF CLARKS SUMMIT SUBDIVISION AND LAND USE ORDINANCE

Major Subdivision _____ Minor Subdivision _____ Land Use _____

Sketch Plan _____ Preliminary Plan _____ Final Plan _____

1. Name of Subdivision or Land Use _____

2. Address of Subdivision or Land Use _____

3. Name of Applicant _____

4. Address of Applicant _____

5. Telephone Number _____

6. Applicants interest in the subdivision or land use _____

(If other than property owner- please gives owner(s) name and address) _____

7. Type of Subdivision or Land Use _____

8. Type of Sewerage Disposal _____

9. Type of Water Supply _____

10. New Roads and/or Streets Proposed: _____

Arterial _____ lin. Ft. Local Access _____ lin. Ft.
Connector _____ lin. Ft. Marginal Access _____ lin. Ft.
Collector _____ lin. Ft. Alleys _____ lin. Ft.
Minor _____ lin. Ft. Private Access _____ lin. Ft.

11. Roads and/or Streets proposed for dedication to borough: _____ lin. Ft.

12. Borough Zoning District in which subdivision or land use is proposed: _____

13. Lackawanna County Property Tax I. D. Number: _____

14. Deed of Record: Deed Book Volume _____ Page _____ Date _____

NOTE: INCLUDE A TRUE COPY OF DEED OF RECORD TO THIS APPLICATION

15. Total Acreage: _____ Total Square Feet _____

16. Total Square Footage of adjoining lands in same ownership: _____

17. Total number of lots or units proposed: _____

18. Are there any steep slope areas (if yes, note locations on topographical map) _____

19. Are there any Flood Hazard Areas (if yes, note locations on topographical map) _____

20. Are there any Wetlands Areas (if yes, note locations on topographical map) _____

21. Does a stream abut or traverse the area (if yes, note locations on topographical map)

22. General comments about the subdivision or land use not disclosed above: _____

23. Signature: _____ Date: _____

Borough Use Only

Fee: _____ Check #: _____ Cash: _____

Date Rec.: _____ Rec. By: _____