



LIBERTY TOWNSHIP
 39 TOPPER ROAD
 FAIRFIELD, PENNSYLVANIA 17320
 Office: (717) 642-3780 Fax: (717) 642-5307

APPLICATION FOR PLANNING COMMISSION REVIEW

APPLICATION DATE: _____

APPLICANT INFORMATION

NAME: _____

ADDRESS: _____

PHONE: _____ EMAIL: _____

OWNER INFORMATION (if different from applicant)

NAME: _____

ADDRESS: _____

PHONE: _____ EMAIL: _____

PROPERTY INFORMATION

PROPERTY ADDRESS: _____

PARCEL #: _____

DESCRIPTION OF REQUEST: _____

TYPE OF REVIEW REQUESTED

- _____ Subdivision _____ *Minor* _____ *Major*
- _____ Land Development Plan
- _____ Lot Addition
- _____ Sketch Plan _____ Preliminary _____ Final
- _____ StormWater Plan Review

Liberty Township, Adams County, PA
 Subdivision & Land Development Plan Completeness Review Checklist

Plan Name: _____ Date: _____

Developer: _____

Prepared by: _____

Preliminary Plan Final Plan

NOTE: *P: Indicates preliminary Plan Requirements, F: Indicates Final Plan Requirement*

- 1. Complete Completed application signed by the owner or owner's agent (*this form*)
 Incomplete
 Not Applicable

- 2. Complete Correct application fee.
 Incomplete (275-104)
 Not Applicable

- 3. Complete The Cover Sheet must include (at a minimum) the following:
 Incomplete - Site Location Map (263-65)
 Not Applicable - Signature Blocks (275-303)

- 4. Complete Stormwater Management Plan and Report
 Incomplete (275-506)
 Not Applicable

- 5. Complete Sanitary Sewage Facilities Planning Module.
 Incomplete (275-907)
 Not Applicable

- 6. Complete Ownership acknowledgement box
 Incomplete (263-65, 275-303)
 Not Applicable

- 7. Complete Where public water and/or sewage services are to be provided,
 Incomplete acknowledgement in writing from the appropriate agency that
 Not Applicable serves the proposed development.
(275-504)

- 8. Complete Any supplemental information (if applicable):
 Incomplete
 Not Applicable

PRINTED NAME OF APPLICANT

SIGNATURE OF APPLICANT AND DATE

TWP USE ONLY		
DATE DEPOSIT RECEIVED _____	AMOUNT \$ _____	CHECK # _____
SUBMISSION DATE: _____	BOARD OF SUPERVISORS: _____	
PLANNING COMMISSION: _____	DECISION DUE: _____	
<small>UPDATED 2024</small>		