

**APPLICATION FOR SITE PLAN REVIEW**  
**Please Review Instruction Page Before Completing**

**1) Applicant:**

Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
City, State, Zip: \_\_\_\_\_  
Phone: Home \_\_\_\_\_ Office \_\_\_\_\_  
E-mail: \_\_\_\_\_  
Interest: \_\_\_\_\_

**2) All Parties Of Interest (Title Holder, Contract Purchaser, Partners): Include for each.**

Name: _____	Name: _____
Address: _____	Address: _____
Phone: _____	Phone: _____
E-mail: _____	E-mail: _____
Interest: _____	Interest: _____

Name: _____	Name: _____
Address: _____	Address: _____
Phone: _____	Phone: _____
E-mail: _____	E-mail: _____
Interest: _____	Interest: _____

**3) Designer: (Registered Engineer, Architect, Surveyor, Landscape Architect or Planner)**

Name: _____	Name: _____
Address: _____	Address: _____
Phone: _____	Phone: _____
E-mail: _____	E-mail: _____
Interest: _____	Interest: _____

Name: _____	Name: _____
Address: _____	Address: _____
Phone: _____	Phone: _____
E-mail: _____	E-mail: _____
Interest: _____	Interest: _____

**4) Other Consultants:**

Name: _____	Name: _____
Address: _____	Address: _____
Phone: _____	Phone: _____
E-mail: _____	E-mail: _____

**5) General Property Information and Description:**

**General Location:** \_\_\_\_\_  
**Acreage:** \_\_\_\_\_  
**Sidwell Number:** **07-** \_\_\_\_\_  
**Legal Description:** \_\_\_\_\_  
**(attach metes and bounds description where applicable)**

**6) Current Zoning:** \_\_\_\_\_

**7) Purpose Of Request And Intended Use:**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**CERTIFICATION:** I hereby certify that I have reviewed the Springfield Township Code of Ordinances and Design & Constructions Standards, and agree to comply with those requirements. I have also read and understand the Instructions to Applicant. I understand that the fee entitles me to reviews of the original plan and one revision. Each additional revision will require a fee of 50% of the original.

I hereby grant permission to any township official, consultant or employee to access the property in order to review the site plan submitted.

Signature of Applicant: \_\_\_\_\_ Date \_\_\_\_\_  
\_\_\_\_\_  
(Print Name)

Signature of Owner: \_\_\_\_\_ Date \_\_\_\_\_  
\_\_\_\_\_  
(Print Name)

Signature of Applicant Representative \_\_\_\_\_ Date \_\_\_\_\_  
\_\_\_\_\_  
(Print Name)

<p><b>For Township Use Only</b> File No. _____</p> <p><b>CONCEPT</b> [ ] Date Received _____ Fee \$ _____</p> <p><b>Third Review Fee</b> \$ _____ <b>Fourth Review Fee</b> \$ _____</p> <p><b>FINAL</b> [ ] Date Received _____ Fee \$ _____</p> <p><b>Third Review Fee</b> \$ _____ <b>Fourth Review Fee</b> \$ _____</p>
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