



# UPPER MACUNGIE TOWNSHIP APPLICATION FOR CONSIDERATION OF A SUBDIVISION AND/OR LAND DEVELOPMENT PLAN

## DIRECTIONS FOR COMPLETING THE APPLICATION

1. Fill out the entire application (print legibly or type the information). Sign and Date the application.

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2. A **complete** application, along with three (3) copies of the plan, applicable reports, drawings, and any additional relevant information must be submitted to the Township’s Community Development Office, **by Noon**, 30 calendar days before the next Planning Commission Meeting. The Township reserves the right to immediately deny any incomplete applications and return it to the applicant without the Planning Commission’s and/or Board of Supervisor’s review and action on the application. *If the submission date falls on a holiday, the following business day will be the submission date.*
3. The application and all materials must be originals. The Township will not accept fax copies of any materials associated with this application.
4. A copy of all plan sheets, pictures, applicable reports, drawings, and any additional information shall be submitted in an electronic format at the time of plan submission. They may be submitted on a CD or flash drive or emailed to the Township’s Planning & Zoning Specialist, John Toner, at [jtoner@uppermac.org](mailto:jtoner@uppermac.org).
5. All applicants are required to submit copies of all materials (including, the plan, application, and supporting documentation) to the Lehigh Valley Planning Commission (LVPC). The fillable application is available online at: <https://lvpc.org/>. Fees and payment methods are also listed on their website. If you have questions regarding the application, please call the LVPC at 610-264-4544. *Sketch Plan Submission **do not** need to be provided to the LVPC.*
6. A copy of the Lehigh Valley Planning Commission application and/or proof of submission shall be submitted to the Township, along with all other application materials.
7. **All applicable fees and escrow must be paid at the time of application submission, or the application will not be accepted. All checks are to be made payable to Upper Macungie Township (separate checks are required for escrow). Additional fees may be required beyond the initial fee submission and escrow payment and must be paid in full by the applicant. Fee Schedule can be found in this application packet.**
8. Any subdivision and/or land development application which requires a variance, special exception, and/or conditional use shall be deemed incomplete until the necessary permit has been granted.
9. All applicants are encouraged to review the Upper Macungie Township Ordinances prior to applying. Township Ordinances are available online at <https://ecode360.com/UP2477> Applicants are expected to comply with all applicable Township Ordinances, state, and federal laws.
10. I have read and understand the directions:

\_\_\_\_\_  
Signature of Applicant

\_\_\_\_\_  
Date

\_\_\_\_\_  
Print Name

Date Received: \_\_\_\_\_  
(Township Use Only)

UMT Docket #: \_\_\_\_\_  
(Township Use Only)

**GENERAL INFORMATION**

Plan Name/Title \_\_\_\_\_

Project Location/Address \_\_\_\_\_

Parcel Identification Number (PIN) \_\_\_\_\_

**PLAN CLASSIFICATION**

**PLAN TYPE**

Subdivision

Sketch Plan

Lot Consolidation or Lot Line Adjustment

Preliminary Plan

Land Development

Final Plan

Combined Subdivision/Land Development

Combined Preliminary/Final

Resubmission

Is this plan a revision to a previously approved and/or recorded plan?  Yes  No

If yes, list the approval/recording date or recording #: \_\_\_\_\_

**LAND USE**

Current Use of Property: \_\_\_\_\_ Zoning District: \_\_\_\_\_

Gross Acreage of Tract: \_\_\_\_\_ Developable Acreage of Tract: \_\_\_\_\_

Proposed Use of the Property – Describe the purpose of this project. Indicate whether it is residential, commercial, industrial, or institutional. (Attach additional sheets if necessary):

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

**ADDITIONAL PLAN INFORMATION**

Yes       No

1. Is a Zoning Variance, Special Exception, or Conditional Use required?  
If yes, provide the date in which the special permit was approved: \_\_\_\_\_

2. Does the property lie within the boundaries of another municipality?  Yes       No  
If yes, which municipality? \_\_\_\_\_

3. Was this tract of land part of a prior subdivision?  Yes       No  
If yes, what is the name of the subdivision? \_\_\_\_\_  
Recording Date: \_\_\_\_\_ Recording Number: \_\_\_\_\_

4. Are there any known deed restrictions or covenants placed on the property?  Yes       No  
*If yes, please provide a copy of the deed with your application.*

5. Are there any known existing nonconformities (e.g., lot, setback, building, use, etc.) on the property?  Yes       No  
If yes, what is the nonconformity? \_\_\_\_\_

6. Is any part of the property outside of the Township Urban Growth Boundary Line?  Yes       No

7. Is any portion of the property considered an environmentally sensitive area? (e.g., steep slopes, wetlands, floodplain/floodway, etc.)  Yes       No  
If yes, describe the area and if any current and/or proposed structures are located in these areas:

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

## CONTACT INFORMATION

<b>APPLICANT</b> (Contact Person)	Name
	Company
	Address
	Telephone # <span style="float: right;">Fax #</span>
	Email
	HOW DO YOU WISH TO RECEIVE CORRESPONDENCE <input type="checkbox"/> EMAIL <input type="checkbox"/> MAIL
<b>PROPERTY OWNER</b>	Name
	Company
	Address
	Telephone # <span style="float: right;">Fax #</span>
	Email
	DO YOU WISH TO RECEIVE CORRESPONDENCE? <input type="checkbox"/> EMAIL <input type="checkbox"/> MAIL
<b>ENGINEER</b>	Name
	Company
	Address
	Telephone # <span style="float: right;">Fax #</span>
	Email
	DO YOU WISH TO RECEIVE CORRESPONDENCE? <input type="checkbox"/> EMAIL <input type="checkbox"/> MAIL
<b>OTHER</b>	Name
	Company
	Address
	Telephone # <span style="float: right;">Fax #</span>
	Email

## CONSIDERATION OF WAIVERS AND/OR DEFERRALS

All requests for waivers, or deferrals of the Township Subdivision & Land Development Ordinance shall be submitted in writing at the time that the plan is submitted with the Township. The applicant shall state fully the justification of the request(s). Attach an additional sheet if necessary.

Section Number: \_\_\_\_\_ Section Name: \_\_\_\_\_  Waiver  Deferral

Reason for the request and justification as to why this section of the ordinance cannot be achieved.

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Section Number: \_\_\_\_\_ Section Name: \_\_\_\_\_  Waiver  Deferral

Reason for the request and justification as to why this section of the ordinance cannot be achieved.

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Section Number: \_\_\_\_\_ Section Name: \_\_\_\_\_  Waiver  Deferral

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Section Number: \_\_\_\_\_ Section Name: \_\_\_\_\_  Waiver  Deferral

Reason for the request and justification as to why this section of the ordinance cannot be achieved.

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# SUBMISSION CHECKLIST

## Township Submission

- |  |   |
|--|---|
| <input type="checkbox"/> Application Fee \$ _____<br><i>Fee Schedule Attached to this Packet</i> | <input type="checkbox"/> Landscape Plan   |
| <input type="checkbox"/> Escrow Fee \$ _____   | <input type="checkbox"/> Stormwater Management Report   |
| <input type="checkbox"/> W9 Form<br><i>Form Attached to this Packet</i>                          | <input type="checkbox"/> PCSM Plan  |
| <input type="checkbox"/> Project Narrative   | <input type="checkbox"/> E & S Plan   |
| <input type="checkbox"/> Existing Features Plan  | <input type="checkbox"/> E & S Narrative  |
| <input type="checkbox"/> Sketch Plan   | <input type="checkbox"/> Traffic Report   |
| <input type="checkbox"/> Record Plan   | <input type="checkbox"/> Planning Module Data   |
| <input type="checkbox"/> Grading Plan  | <input type="checkbox"/> Review Response Letter (Resubmissions)                                       |
| <input type="checkbox"/> Utility Plan & Profiles   | <input type="checkbox"/> Escrow & Reimbursement Agreement<br><i>Agreement Attached to this Packet</i> |

## Documentation of Transmittals to:

- |  |  |
|--|--|
| <input type="checkbox"/> Lehigh Valley Planning Commission                     | <input type="checkbox"/> Lehigh County Authority             |
| <input type="checkbox"/> PennDOT (District 5-0)                                | <input type="checkbox"/> Lehigh County Conservation District |
| <input type="checkbox"/> Lehigh & Northampton Transportation Authority (LANTA) |  |

## PLAN REVIEW ESCROW FEE

Check Number: \_\_\_\_\_ Amount: \$ \_\_\_\_\_

W9 Form Enclosed: \_\_\_\_\_ Escrow Number: \_\_\_\_\_  
*Township Use Only*

Should the Township have questions regarding your escrow account, who may we contact?

Name: \_\_\_\_\_ Company: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Phone Number: \_\_\_\_\_ Email: \_\_\_\_\_

Does an Escrow Account currently exist with the Township for this project?       Yes       No

*If yes, signing below gives Upper Macungie Township permission to apply any remaining funds from the previous submission into this submission. In addition, gives Upper Macungie Township permission to adjust required minimum amounts in accordance with the Upper Macungie Township Escrow & Reimbursement Agreement and Fee Schedule "E", Subdivision & Land Development Fees.*

\_\_\_\_\_  
*Applicant Signature*

\_\_\_\_\_  
*Township Representative Signature*

\_\_\_\_\_  
*Print Name*

\_\_\_\_\_  
*Print Name*