For Warwick	Township	Use	Only.
-------------	----------	-----	-------



WARWICK TOWNSHIP

DEPARTMENT OF PLANNING & ZONING 1733 Township Greene Jamison, PA 18929 (215) 343-6100 www.warwick-bucks.org

Received by: _____

APPLICATION FOR FINAL PLAN REVIEW

Application is hereby made for approval of the Board of Supervisors of the attached plan submitted in accordance with the requirements of the Warwick Township Subdivision & Land Development Ordinance, as amended and ACT 247, the Municipalities Planning Code. Submitted with the application are 5 sets of plans and one full copy on CD Rom together with the application fees of \$______ and required escrow in the amount of \$_____. PLEASE NOTE THAT THE APPLICATION/FILING FEE IS NON-REFUNDABLE. THE ESCROW FEE IS RETURNED IF ALL GENERATED INVOICES ARE PAID IN FULL FOLLOWING THE 18 MONTH MAINTENANCE PERIOD.

APPLICANT

				Phone: Email:			
Signature of Applicant	:					Date:	
ENGINEER				ATTORN	IEY		
Name: Address:							
Phone:				Phone: _			
Email:				Email:			
PROJECT							
Project Name & Summary	:						
Location:				_ Туре: [Minor Sub	division 🗌 Major Subdivision 🗌 Land De	evelopment
Owner of Property:			Ac	ldress:			
Zoning District:		TMP 51	_TMP 51			Deed Recorded Book #:	
Number of Lots or Dwellin	ng Units:	Average Lot Size:	Density of	Dwelling U	nits:	_ Average Building Square Footage: _	
Water Supply:	Public	🗌 On Lot	Sewage Su	pply:	Public	🗌 On Lot	
List of Encumbrances:	Amount	Name & Addres	5		Book #	Page #	

Copy of all restrictions, covenants, etc, if any, under which lots are to be sold: 🗌 Attached 🗌 None

Improvements	Unit Cost	Number of Units	Total
Curbs			
Sidewalks			
Widening of Existing Streets			
Open Space			
Street Lighting			
Storm Drainage			
Water Supply & Fire Hydrants			
Sewage Disposal			
Landscaping			
New Streets			