

LAND DEVELOPMENT APPLICATION
CLARION COUNTY SUBDIVISION AND LAND DEVELOPMENT ORDINANCE

Owner: Name: _____

Address: _____

Parcel Location: Municipality: _____ Tax Map Number: _____

Applying For: Preliminary Approval _____ Final Approval _____

Type of Land Development:

Commercial _____ Sanitary Landfill _____

Industrial _____ Communications Tower _____

Multi-Family Dwellings _____

Tentative Timetable _____

Acreege of Land and Number of Lots Prepared For:

Residential Lots _____ Streets _____

Commercial Lots _____ Easements _____

Industrial Lots _____ Open Space _____

Other Land Use (Please Specify) _____

I/We, the undersigned, do hereby give permission to the County of Clarion for any one or more of its representatives to enter upon my property for the purpose of reviewing this land development.

Submitted By: _____

Return To: Name: _____

Address: _____ Phone Number _____

Fax Number _____

The Land Development Checklist, Preliminary Plan/Final Plan Requirements Checklist(s), appropriate fee and any and all additional documentation must be submitted with this form.

OFFICIAL USE ONLY

⌘ NOTICE: Part or all of this property may be in a flood hazard area. Please see attached map.

APPROVAL FOR CLARION COUNTY PLANNING COMMISSION

Chairman DATE _____

COMMENTS: _____
