LEHIGH COUNTY SUBDIVISION AND LAND DEVELOPMENT ORDINANCE
SUBDIVISION APPROVAL APPLICATION FORM

Type of Subdivision: (check one)

Sketch ________ Preliminary ________ Final ________ Minor ________

Name of Subdivision: ____________________________________________________________

Date of Application: ____________________________________________________________

Owner’s Name: _________________________________________________________________

Address: _______________________________________________________________________

Phone #: _______________________________________________________________________

Applicant’s Name: _________________________________________________________________

Address: _______________________________________________________________________

Phone #: _______________________________________________________________________

Engineer or Surveyor Responsible for Plan: _________________________________________

Address: _______________________________________________________________________

Phone #: _______________________________________________________________________

Municipality in Which Site is Located: ______________________________________________

Number of Lots Proposed: _________________________________________________________

Total Acreage of Site: ____________________________________________________________

Lineal Feet of New Streets: _______________________________________________________

Water Supply: (check one)  Public ________ On-Lot ________ None ________

Sewerage System: (check one)  Public ________ On-Lot ________ None ________

I hereby agree to pay the Lehigh Valley Planning Commission for all review fees required by the
Lehigh County Subdivision and Land Development Ordinance.

_________________________________________________________
Signature of Applicant