



# Application for Subdivision and/or Land Development Plan Review

\_\_\_\_\_  
Date of Application

*For Planning Bureau Use Only*

|               |  |                |  |
|---------------|--|----------------|--|
| MUNIS NO.     |  | CITY FILE NO.  |  |
| LCPC FILE NO. |  | SUBMITTED FEES |  |

Application Status

|               |                          |                          |  |
|---------------|--------------------------|--------------------------|--|
| Completed     | <input type="checkbox"/> | Required Action Due Date |  |
| Not Completed | <input type="checkbox"/> | Time Extension Required? | <input type="checkbox"/> No <input type="checkbox"/> Yes |

**PLEASE PRINT OR WRITE LEGIBLY**

| Project Review Information    |                          |                                |                          |                              |                          |                                   |
|-------------------------------|--------------------------|--------------------------------|--------------------------|------------------------------|--------------------------|-----------------------------------|
| 1. Application Classification | <input type="checkbox"/> | <b>Subdivision Plan (only)</b> | <input type="checkbox"/> | <b>Land Development Plan</b> | <input type="checkbox"/> | <b>No Impact Land Development</b> |
|                               | <input type="checkbox"/> | Sketch Plan                    | <input type="checkbox"/> | Sketch Plan                  |                          |                                   |
|                               | <input type="checkbox"/> | Preliminary Plan               | <input type="checkbox"/> | Preliminary Plan             |                          |                                   |
|                               | <input type="checkbox"/> | Final Plan                     | <input type="checkbox"/> | Preliminary/Final Plan       |                          |                                   |
|                               | <input type="checkbox"/> | Lot Add-on Plan                | <input type="checkbox"/> | Final Plan                   |                          |                                   |
|                               | <input type="checkbox"/> | Minor Plan                     | <input type="checkbox"/> | Minor Plan                   |                          |                                   |
| 2. Project Name               |                          |                                |                          |                              |                          |                                   |
| 3. Project Address            |                          |                                |                          |                              |                          |                                   |
| 4. Parcel(s) IDs              |                          |                                |                          |                              |                          |                                   |
| 5. Site Area (Acre/SF)        |                          |                                |                          |                              |                          |                                   |
| 6. Project Description        |                          |                                |                          |                              |                          |                                   |

|  |        |                    |                   |                              |                             |
|--|--------|--------------------|-------------------|------------------------------|-----------------------------|
|  |        |                    |                   |                              |                             |
| <b>Property Owner Information</b>  |        |                    |                   |                              |                             |
| 7. Name of Property Owner  |        |                    |                   |                              |                             |
| Street Address:  |        |                    |                   |                              |                             |
| City:  | State: | Zip:               | Phone #           |                              |                             |
| Email address:   |        |                    |                   |                              |                             |
| Deed#  |        | Acct. # (13-digit) |                   |                              |                             |
| <b>Application Information (if other than the Owner)</b>   |        |                    |                   |                              |                             |
| 8. Name of Applicant   |        |                    |                   |                              |                             |
| Street Address:  |        |                    |                   |                              |                             |
| City:  | State: | Zip:               | Phone #           |                              |                             |
| Email address:   |        |                    |                   |                              |                             |
| <b>Consulting Firm</b>   |        |                    |                   |                              |                             |
| 9. Name of Consulting Firm:  |        |                    |                   |                              |                             |
| Contact Person (Name/Title)  |        |                    |                   |                              |                             |
| Street Address:  |        |                    |                   |                              |                             |
| City:  | State: | Zip:               | Phone #           |                              |                             |
| Email Address  |        |                    |                   |                              |                             |
| <b>Plan Information</b>  |        |                    |                   |                              |                             |
| 10. Type of Construction   |        | New Building       | Internal Division |                              |                             |
|  |        | Addition           | Other (Specify)   |                              |                             |
| 11. Existing Zoning District(s):   |        |                    |                   |                              |                             |
| 12. Is/was a Zoning Variance, Special Exception, and/or Conditional Approval Necessary?<br><i>(If yes, attach Zoning Hearing Board documents for this application)</i> |        |                    |                   | <input type="checkbox"/> Yes | <input type="checkbox"/> NO |
| 13. Is this project located in the Streetscape District?   |        |                    |                   | <input type="checkbox"/> Yes | <input type="checkbox"/> NO |
| 14. Is this project located in Downtown area where Traffic Impact Study (TIS) is exempt?   |        |                    |                   | <input type="checkbox"/> Yes | <input type="checkbox"/> NO |

|  |   |   |                      |                          |                     |       |                      |
|--|---|---|----------------------|--------------------------|---------------------|-------|----------------------|
| 15. Is this project located in the Floodplain District/Zone?   | <input type="checkbox"/> Yes                          | <input type="checkbox"/> NO                               |                      |                          |                     |       |                      |
| 16. Does this project propose encroachments, obstructions, or dams that will affect wetlands?<br>If yes, describe impacts _____<br>_____   | <input type="checkbox"/> Yes                          | <input type="checkbox"/> NO                               |                      |                          |                     |       |                      |
| 17. Will any known historical or archaeological resources be impacted by this project?<br>If yes, describe impacts _____<br>_____  | <input type="checkbox"/> Yes                          | <input type="checkbox"/> NO                               |                      |                          |                     |       |                      |
| 18. Will any known endangered or threatened species of plant or animal be impacted by this project?<br>If yes, describe impacts _____<br>_____   | <input type="checkbox"/> Yes                          | <input type="checkbox"/> NO                               |                      |                          |                     |       |                      |
| 19. Are there any trees within or adjacent to the construction limits of the site? If yes, provide a Tree Appraisal report as part of the submission.in accordance with §273-10. B of the City Trees Ordinance and Lancaster Tree Manual §4.00-A | <input type="checkbox"/> Yes                          | <input type="checkbox"/> NO                               |                      |                          |                     |       |                      |
| 20. Are there any building’s encroachments (including balconies and foundation) on Public ROWs?  | <input type="checkbox"/> Yes                          | <input type="checkbox"/> NO                               |                      |                          |                     |       |                      |
| 21. Existing Land Use (Check all that apply)   |   |   |                      |                          |                     |       |                      |
| <input type="checkbox"/> Agriculture   | <input type="checkbox"/> Single-Family (Detached)     | <input type="checkbox"/> Mixed Use                        |                      |                          |                     |       |                      |
| <input type="checkbox"/> Commercial  | <input type="checkbox"/> Single-Family (Semidetached) | <input type="checkbox"/> Undeveloped/Vacant               |                      |                          |                     |       |                      |
| <input type="checkbox"/> Industrial  | <input type="checkbox"/> Townhouses                   | <input type="checkbox"/> Recreational/Cultural            |                      |                          |                     |       |                      |
| <input type="checkbox"/> Institutional   | <input type="checkbox"/> Multi-Family (Attached)      | <input type="checkbox"/> Other ( <i>specify</i> ):        |                      |                          |                     |       |                      |
| 22. Proposed Development Pattern   |   |   |                      |                          |                     |       |                      |
| <input type="checkbox"/> Single Use  | <input type="checkbox"/> Mixed-Use                    | <input type="checkbox"/> Flexible Residential Development |                      |                          |                     |       |                      |
| <input type="checkbox"/> Age Restricted Development  | <input type="checkbox"/> Youth Housing                | <input type="checkbox"/> Industrial Park                  |                      |                          |                     |       |                      |
| 23. Proposed Use and Units   |   |   |                      |                          |                     |       |                      |
|  | Use   | Unit #  | Aggregated Area (SF) |                          | Use                 | Unit# | Aggregated Area (SF) |
| <input type="checkbox"/>   | Single-Family (Detached)                              |   |                      | <input type="checkbox"/> | Institutional       |       |                      |
| <input type="checkbox"/>   | Single-Family (Semidetached)                          |   |                      | <input type="checkbox"/> | Office (Commercial) |       |                      |
| <input type="checkbox"/>   | Townhouses  |   |                      | <input type="checkbox"/> | Retail              |       |                      |
| <input type="checkbox"/>   | Multi-Family (Attached)                               |   |                      | <input type="checkbox"/> | Industrial          |       |                      |
| <input type="checkbox"/>   | Age Restricted Units                                  |   |                      | <input type="checkbox"/> | Park & Recreational |       |                      |
| <input type="checkbox"/>   | Rooming House   |   |                      | <input type="checkbox"/> | Other (Specify)     |       |                      |
| Total  |   |   |                      |                          |                     |       |                      |
| 24. Total Affordable Housing Units   |   |   |                      |                          |                     |       |                      |
| 25. Total Non-affordable Housing Units   |   |   |                      |                          |                     |       |                      |

|   |  |
|---|--|
| 26. Building Height in ft. and Floor #. |  |
| 27. Building(s) Footprint (SF)          |  |
| 28. Gross Floor Area (SF)               |  |
| 29. Floor Area Ratio (FAR)              |  |
| 30. Density (Dwelling Units/Acre)       |  |
| 31. Estimated Population                |  |
| 32. Public Street Frontage (ft.)        |  |
| 33. Required Street Trees (#)           |  |
| 34. Provided Street Trees (#)           |  |
| 35. Removed Landmark Trees (#)          |  |
| 36. Proposed Earth Disturbance (SF)     |  |

**SALDO Modification Request**

| SADO Sections | Description | Hardship and Proposed Alternative |
|---------------|-------------|-----------------------------------|
|               |             |                                   |
|               |             |                                   |
|               |             |                                   |
|               |             |                                   |
|               |             |                                   |

**Phasing and Construction Activities**

|   |  |                              |                             |
|---|--|------------------------------|-----------------------------|
| Is this development a multi-phased project?<br><i>(If yes, provide details on the number of phases and start/finish date for each phase.)</i> |  | <input type="checkbox"/> Yes | <input type="checkbox"/> NO |
| Start Date  |  | Operation Date               |                             |
| Finish Date   |  | Construction Guarantee (\$)  |                             |
| Start Date  |  | Operation Date               |                             |
| Finish Date   |  | Construction Guarantee (\$)  |                             |