

For more information, see our website at: [Home | Windemere Township](#)

REQUIRED APPLICATION CHECKLIST

- Completed application form – *Submitted only via email to zoning@windemeretownship.com*
- \$750.00 application fee - *Check Only – Payable to “Windemere Township” and mailed to the above mailing address*
- Legal description of the original parcel and of the resulting lots
- Professional survey of Property to be subdivided with the following information:
 - Existing parcel boundaries
 - Proposed parcel boundaries
 - Total acreage for each parcel(s) created
 - Location and linear frontage of roads serving each parcel
 - Soil boring locations
 - Location of all existing rights-of-way, easements, or utilities with document numbers identified
 - Location of existing buildings, septic systems, or other improvements and their distance from proposed property lines
 - Topographic data at ten (10) foot contour intervals
- Drainage, grading, and erosion control plans
- Wetland deliniation report and map
- Buildable area on the proposed lots
- Proof the real estate taxes are paid
- Information about the municipal sewer or soils tests information for a primary and secondary septic system
- Driveway access points

APPLICANT INFORMATION

Name	Phone		
Mailing Address	City	State	ZIP
Email Address			

OWNER INFORMATION (if different from applicant)

Name	Phone		
Mailing Address	City	State	ZIP
Email Address			

EXISTING PARCEL INFORMATION

Site Address or Location	City	State	ZIP
PID	Section	Twp.	Range
Acres	Existing Land Use	Current Zoning	

Requested Action:

AGREEMENT

I understand that by signing this form, the property in question may be visited by Windemere Township and its agents throughout the application process. I certify that the information and exhibits submitted are true and correct to the best of my knowledge and that I am to file this application and act on behalf of the above signatures.

The undersigned certifies that they are familiar with application fees and other associated costs, and also with the procedural requirements of the Zoning Ordinance and other applicable ordinances.

*Applicant Name	*Applicant Signature	*Date
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*Applicant Name	*Applicant Signature	*Date
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-FOR OFFICE USE ONLY-

Date Received:	File #:
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Note: Owner(s), or their authorized agent are required to attend the Planning Commission meeting to answer questions about the application. Owners and applicants will be notified of the date and time of Planning Commission by Township Staff.