



County of Chester Subdivision / Land Development Information Form



*Indicates required information.

*UPI _____ - _____ - _____ *Municipality _____
 _____ - _____ - _____ DEP Code # 1-15 _____ - _____ - _____
 _____ - _____ - _____ *Subdivision Name _____

*Site Address and/or Street Intersection _____
 (i.e.: 201 W Market St. or NE Corner of W Market St & N New St)

*Developer _____ Phone # _____

*Developer Mailing Address _____

*Property Owner _____

Agent/Consultant _____ Phone # _____

Agent/Consultant Mailing Address _____

*Total # of proposed lots _____ - # of parent tract lot(s) _____ = # of new proposed lots _____

OR

Development of existing lot (i.e., an approved, vacant lot)

Additional structure on lot (i.e., in-law suite, other structure on lot)

Existing structure, change in use (i.e., office to apartment)

Explain _____

*Type of Development	*Type of Sewage Disposal	*Type of Water Supply
<input type="checkbox"/> Residential	<input type="checkbox"/> Individual	<input type="checkbox"/> Individual
<input type="checkbox"/> Non-Residential	<input type="checkbox"/> Community <input type="checkbox"/> DEP Permit	<input type="checkbox"/> Public
<input type="checkbox"/> Non-Building	<input type="checkbox"/> Public	<input type="checkbox"/> Community Well
<input type="checkbox"/> Lot Line Change (0 lots)	<input type="checkbox"/> Clean Streams (Repair, 0 lots)	<input type="checkbox"/> None
<input type="checkbox"/> Change of Use (0 lots)	<input type="checkbox"/> Community Clean Streams	
<input type="checkbox"/> Mixed Use	<input type="checkbox"/> None	

For Chester County Health Department Use Only Unique ID # _____

Subdivision Review Fee \$ _____ Receipt # _____ Date _____ / _____ / _____
 \$ _____ Receipt # _____ Date _____ / _____ / _____
 \$ _____ Receipt # _____ Date _____ / _____ / _____

CCHD Review Date _____ / _____ / _____ DEP Approval Date _____ / _____ / _____

Total # of approved lots _____ - # of parent tract lot(s) _____ = # of new lots created _____

SEO # _____ Database updated _____ / _____ / _____