INTERNAL OFFIC	CE USE ONLY		Revised 3/25/17
Map, Block, Lot Approved By: Title: Approval Date:	<u> </u>	Fee: Cash/Check: Receipt No: Received By:	\$

## Upper Mount Bethel Township 387 Ye Olde Highway Mt. Bethel, PA 18343 Plot and Grading Plan Application

Phone: (570) 897-6127

Fax: (570)897-0108

Township Engineer Justin Coyle (215) – 343 – 5700 ext. 317

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Property Tax Id #		
Property Owner		Telephone:
Property Address		•
City	State	Zip Code
Name of Applicant		•
Applicant Mailing Address		Telephone:
City	State	Zip Code
Size of Lotacres or _	square feet - Present use of	Property
		(residential, commercial, vacant, etc.)
SECTION B:		
Engineer/Surveyor:		
Mailing Address:		Telephone:
City	State	Zip Code

## SECTION C:

Attach a final plot, grading and erosion/sedimentation control plan drawn on a scale of 1"=20ft (or other scale I f reasonable and approved by the Township Board of Supervisors) which contains the following:

- (a) Name of all lot owner(s) along with the proper Deed Book Reference, tax parcel Identification Number and lot
- (b) Required building setback lines from all lot lines.
- (c) All lot lines defined by bearings and distances or curve date.
- (d) Existing and proposed contour elevation lines at maximum intervals of two (2) feet.
- (e) Elevations for the first floor level of any structure or garage floor (with slope of garage floor); spot elevations adjacent to any door, widow opening to grade or Bilco-style basement door, primary and secondary on-lot sewage disposal systems, finished street elevations at point of entry. Finished drive elevations at point of intersection of centerlines, intersection with gutters and at maximum of 50 feet intervals (any other area deemed necessary by the Township Engineer).

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(g)	North reference, easements and rights-of-way within or adjacent to the subject property.		
(h)	Location, size and elevations of all existing or proposed storm drainage structures or swales within or adjacent to the subject property.		
(i)	Lot numbers and Owner's names of all adjoining lots and names of adjoining street(s).		
(j)	Locations of all percolation test holes, soil probes and wells, and the location and dimensions of primary and secondary on 0-lot sewage disposal systems with isolation distances.		
(k)	The exact location and dimensions of any proposed structure, appurtenant structure, street, road or driveway, with tie-in dimensions to property lines.		
(1)	Building footprint with all wall dimensions necessary to lay-out the shape of the building. Street cartway and right-of-way lines shall be shown and dimensioned. For corner lots, a dimension shall be given from the centerline of the proposed driveway to the centerline of the parallel street and clear sight triangle easement shall be shown for street intersections and driveway intersections.		
(m)	Location, size and detailed calculations of dry wells, leach areas or other Stormwater control measures, as required.		
(n)	Erosion and sedimentation control measures and sequence of operations.		
(o)	Engineer's or Surveyor's seal.		
(p) .	Any type of basement pump or foundation drainage system shall be noted on the plan. Any such system shall be designed onto public roads and that avoids drainage problems for neighboring properties. Four (4) copies of any calculations, designs and methods for handling any such discharged water shall be submitted with the Plot and Lot Grading Plan.		
Engineer or Sur	ance of a Certificate of Occupancy, Applicant is responsible for submitting a statement, certified by their veyor, verifying that all Stormwater and grading was completed as per the approved Plot and Grading Plan. the Plot and Grading Plan Ordinance 2004-03 may result in the prevention of an Occupancy Permit being		
SECTION D:			
Bethel Township	reby made for Plot and Grading Plan approval. I understand that I must comply with all provision of Upper Mount Plot and Grading Plan Ordinance 2004-03 and with any and all other Federal, State and local laws. The information rue and correct to the best of my knowledge.		
(Signature of	Applicant) Date		
(Signature of O	wner of record required)  Date		
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