



**GREENE TOWNSHIP BOARD OF SUPERVISORS**

1145 Garver Lane • P.O. Box 215  
Scotland, Pennsylvania 17254-0215

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**SUPERVISORS**

TODD E. BURNS  
TRAVIS L. BROOKENS  
SHAWN M. CORWELL

Diann Weller, *Secretary*  
Lindsay Loney, *Treasurer*  
Welton J. Fischer, *Solicitor*  
Daniel R. Bachman, *Zoning Officer*  
Gregory P. Lambert, P.E., *Engineer*

**PLAN SUBMISSION APPLICATION**

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**TYPE OF PLAN SUBMISSION:**

\_\_\_\_\_ PARKING & CIRCULATION PLAN    \_\_\_\_\_ SKETCH PLAN    \_\_\_\_\_ STORMWATER PLAN  
\_\_\_\_\_ PRELIMINARY SUBDIVISION PLAN    \_\_\_\_\_ FINAL SUBDIVISION PLAN  
\_\_\_\_\_ PRELIMINARY LAND DEVELOPMENT PLAN    \_\_\_\_\_ FINAL LAND DEVELOPMENT PLAN

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NAME OF OWNER: \_\_\_\_\_

MAILING ADDRESS: \_\_\_\_\_

TELEPHONE NUMBER: \_\_\_\_\_ FAX NUMBER: \_\_\_\_\_

EMAIL ADDRESS: \_\_\_\_\_

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NAME OF APPLICANT: \_\_\_\_\_

MAILING ADDRESS: \_\_\_\_\_

TELEPHONE NUMBER: \_\_\_\_\_ FAX NUMBER: \_\_\_\_\_

EMAIL ADDRESS: \_\_\_\_\_

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NAME OF CONSULTANT: \_\_\_\_\_

MAILING ADDRESS: \_\_\_\_\_

TELEPHONE NUMBER: \_\_\_\_\_ FAX NUMBER: \_\_\_\_\_

EMAIL ADDRESS: \_\_\_\_\_

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**DEVELOPMENT INFORMATION:**

LOCATION (PROPERTY ADDRESS / ROAD NAME): \_\_\_\_\_

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PROPOSED LAND USE:    \_\_\_\_\_ RESIDENTIAL    \_\_\_\_\_ COMMERCIAL    \_\_\_\_\_ INDUSTRIAL

ACREAGE: \_\_\_\_\_    # OF LOTS: \_\_\_\_\_    # OF DWELLING UNITS: \_\_\_\_\_

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THE APPLICANT SHALL ANSWER THE FOLLOWING QUESTIONS AS APPLICABLE. THE APPLICANT IS ADVISED TO REVIEW THE ORDINANCES ADOPTED BY GREENE TOWNSHIP AND CONFER WITH THEIR PROFESSIONAL CONSULTANT OR REPRESENTATIVE PRIOR TO ANSWERING. IF REQUIRED, ZONING HEARING BOARD APPROVAL SHALL BE PREREQUISITE TO PLAN SUBMISSION.

--DOES THIS APPLICATION COMPLY WITH THE GREENE TOWNSHIP ZONING ORDINANCE ?.....  YES  NO  N/A

--HAS THE SUBJECT PROPERTY GONE BEFORE THE ZONING HEARING BOARD IN THE PAST FOR ANY REASON ?.....  YES  NO  N/A

--WILL A CONDITIONAL USE APPLICATION BE REQUIRED TO PERMIT THE PROPOSED USE PRIOR PLAN APPROVAL?.....  YES  NO  N/A

--WILL ANY PLAN OR DESIGN WAIVERS BE REQUESTED FOR THIS PLAN SUBMISSION ? .....  YES  NO  N/A

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**SUBMISSION CHECKLIST:**

FRANKLIN CO. PLANNING COMISSION APPLICATION & FEE:  YES  NO  N/A

FRANKLIN CO. CONSERVATION DISTRICT APPLICATION & FEE  YES  NO  N/A

PA DEP SEWAGE PLANNING MODULE (4 COPIES COMPLETE)  YES  NO  N/A

PA DEP NON-BUILDING WAIVER (4 COPIES COMPLETE)  YES  NO  N/A

SKETCH PLAN SUBMISSION PER § 85-17 (4 COPIES)  YES  NO  N/A

PARKING AND CIRCULATION PLAN PER § 105-29 (4 COPIES)  YES  NO  N/A

STORMWATER MANAGEMENT PLAN PER § 80-10 (4 COPIES)  YES  NO  N/A

COMPLETED DRAINAGE PLAN APPLICATION PER § 80, Att.3:1  YES  NO  N/A

PRELIMINARY PLAN SUBMISSION PER § 80-18 & § 80-18.1  YES  NO  N/A

FINAL PLAN SUBMISSION PER § 85-20  YES  NO  N/A

GREENE TOWNSHIP PLAN SUBMISSION FEE \*\*  YES  NO  N/A

GREENE TOWNSHIP PLAN REVIEW FEE ESCROW \*\*  YES  NO  N/A

\*\* PER GREENE TOWNSHIP FEE SCHEDULE

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I, \_\_\_\_\_, AM THE AUTHORIZED REPRESENTATIVE OF THE APPLICANT AND HEREBY REQUEST REVIEW OF THIS APPLICATION BY GREENE TOWNSHIP. TO THE BEST OF MY KNOWLEDGE, ALL OF THE INFORMATION CONTAINED WITHIN THIS APPLICATION IS CORRECT AND COMPLETE. FURTHER, I HEREBY AGREE TO THE FOLLOWING SPECIFIC TERMS AND CONDITIONS:

- 1.) I hereby permit any elected, appointed and/ or assigned representative of Greene Township to enter onto the property in which this application pertains for the purposes of conducting a site inspection while the application is being reviewed and considered by Greene Township.
- 2.) I hereby agree to pay for all administrative, consultant and or application fees that are required to review this application.
- 3.) I hereby agree to comply with the provisions established for zoning, land use, subdivision and land development as specified by Greene Township.

SIGNATURE OF AUTHORIZED REPRESENTATIVE: \_\_\_\_\_

PRINT NAME: \_\_\_\_\_ DATE: \_\_\_\_\_

*FAILURE TO SUBMIT COMPLETE AND TRUTHFUL DATA MAY RESULT IN REFUSAL TO PROCESS APPLICATIONS FOR PLAN APPROVAL. GREENE TOWNSHIP, AT THEIR SOLE DISCRETION MAY REFUSE TO ACCEPT OR FURTHER PROCESS AN INCOMPLETE APPLICATION.*

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FOR TOWNSHIP USE ONLY

DATE THE APPLICATION WAS SUBMITTED FOR MUNICIPAL REVIEW: \_\_\_\_\_

DATE THE APPLICATION WAS DEEMED COMPLETE: \_\_\_\_\_

GREENE TOWNSHIP PROJECT NUMBER: \_\_\_\_\_

90 DAY DEADLINE: \_\_\_\_\_ SUPERVISOR'S DEADLINE: \_\_\_\_\_

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