



UPPER MACUNGIE TOWNSHIP APPLICATION FOR CONSIDERATION OF A SUBDIVISION AND/OR LAND DEVELOPMENT PLAN

INSTRUCTIONS FOR COMPLETING THE APPLICATION

1. Fill out the entire application (print legibly or type the information). Sign and Date the application.
2. A **complete** application, along with three (3) copies of the plan, applicable reports, drawings, and any additional relevant information must be submitted to the Township's Community Development Office, **by 12:00 Noon**, 30 calendar days before the Planning Commission or Board of Supervisors meeting date which the applicant intends to be considered at. The Township reserves the right to immediately deny any incomplete applications and return it to the applicant without the Planning Commission's and/or Board of Supervisor's review and action on the application. *If the submission date falls on a holiday, the following business day will be the submission date.*
3. The application and all materials must be originals. The Township will not accept fax copies of any materials associated with this application.
4. A copy of all plan sheets, pictures, applicable reports, drawings, and any additional information shall be submitted in an electronic format at the time of plan submission. They may be submitted on a CD or flash drive or emailed via a cloud storage service (e.g., Dropbox, SharePoint, etc.) to Meredith Keller, Director of Community Development, at mkeller@uppermac.org.
5. A letter detailing any requests for modification, including requests for waivers or deferrals of any part of the Township's Subdivision and Land Development Ordinance (SALDO). Each request for modification shall be accompanied by a thorough justification as to why the modification is necessary as per §22-906 of the SALDO.
6. A completed Vision Zero Action Plan Checklist.
7. All applicants are required to submit copies of all materials (including, the plan, application, and supporting documentation) to the Lehigh Valley Planning Commission (LVPC). Their fillable application is available online at: <https://lvpc.org/>. Fees and payment methods are also listed on their website. If you have questions regarding the application, please call the LVPC at 610-264-4544. *Sketch Plan Submission **do not** need to be provided to the LVPC.*
8. A copy of the Lehigh Valley Planning Commission application and/or proof of submission shall be submitted to the Township, along with all other application materials.
9. **All applicable fees and escrow must be paid at the time of application submission, or the application will not be accepted. All checks are to be made payable to Upper Macungie Township (separate checks are required for escrow). Additional fees may be required beyond the initial fee submission and escrow payment and must be paid in full by the applicant. Fee Schedule can be found in this application packet.**
10. Any subdivision and/or land development application which requires a variance, special exception, and/or conditional use shall be deemed incomplete until the necessary request has been granted.
11. All applicants are strongly encouraged to review the Upper Macungie Township Ordinances prior to applying. Township Ordinances are available online at <https://ecode360.com/UP2477> Applicants are expected to comply with all applicable Township Ordinances and State and Federal laws.

12. I have read and understand the directions:

Signature of Applicant

Date

Print Name

Date Received: _____
(Township Use Only)

UMT Docket #: _____
(Township Use Only)

GENERAL INFORMATION

Plan Name/Title

Project Location/Address

Parcel Identification Number (PIN) _____

PLAN CLASSIFICATION

PLAN TYPE

- Subdivision
- Lot Consolidation or Lot Line Adjustment
- Land Development
- Combined Subdivision/Land Development

- Sketch Plan
- Preliminary Plan
- Final Plan
- Combined Preliminary/Final
- Resubmission

Is this plan a revision to a previously approved and/or recorded plan? Yes No

If yes, list the approval/recording date or recording #: _____

LAND USE

Current Use of Property: _____ Zoning District: _____

Gross Acreage of Tract: _____ Developable Acreage of Tract: _____

Proposed Use of the Property – Describe the purpose of this project. Indicate whether it is residential, commercial, industrial, or institutional. (Attach additional sheets if necessary):

ADDITIONAL PLAN INFORMATION

Yes No

1. Is a Zoning Variance, Special Exception, or Conditional Use required?
If yes, provide the date in which the special permit was approved: _____

2. Does the property lie within the boundaries of another municipality? Yes No
If yes, which municipality? _____

3. Was this tract of land part of a prior subdivision? Yes No
If yes, what is the name of the subdivision? _____
Recording Date: _____ Recording Number: _____

4. Are there any known deed restrictions or covenants placed on the property? Yes No
If yes, please provide a copy of the deed with your application.

5. Are there any known existing nonconformities (e.g., lot, setback, building, use, etc.) on the property? Yes No
If yes, what is the nonconformity? _____

6. Is any part of the property outside of the Township Urban Growth Boundary Line? Yes No

7. Is any portion of the property considered an environmentally sensitive area? (e.g., steep slopes, wetlands, floodplain/floodway, etc.) Yes No
If yes, describe the area and if any current and/or proposed structures are located in these areas:

CONTACT INFORMATION

APPLICANT (Contact Person)	Name	
	Company	
	Address	
	Telephone #	Fax #
	Email	
	HOW DO YOU WISH TO RECEIVE CORRESPONDENCE <input type="checkbox"/> EMAIL <input type="checkbox"/> MAIL	
PROPERTY OWNER	Name	
	Company	
	Address	
	Telephone #	Fax #
	Email	
	DO YOU WISH TO RECEIVE CORRESPONDENCE? <input type="checkbox"/> EMAIL <input type="checkbox"/> MAIL	
ENGINEER	Name	
	Company	
	Address	
	Telephone #	Fax #
	Email	
	DO YOU WISH TO RECEIVE CORRESPONDENCE? <input type="checkbox"/> EMAIL <input type="checkbox"/> MAIL	
OTHER	Name	
	Company	
	Address	
	Telephone #	Fax #
	Email	

PLAN REVIEW ESCROW FEE

Check Number: _____

Amount: \$ _____

W9 Form Enclosed: _____

Escrow Number: _____
Township Use Only

Should the Township have questions regarding your escrow account, who may we contact?

Name: _____

Company: _____

Address: _____

City: _____ State: _____ Zip Code: _____

Phone Number: _____ Email: _____

Does an Escrow Account currently exist with the Township for this project? Yes No

If yes, signing below gives Upper Macungie Township permission to apply any remaining funds from the previous submission into this submission. In addition, gives Upper Macungie Township permission to adjust required minimum amounts in accordance with the Upper Macungie Township Escrow & Reimbursement Agreement and Fee Schedule "E", Subdivision & Land Development Fees.

Applicant Signature

Township Representative Signature

Print Name

Print Name

SUBMISSION CHECKLIST

- | | |
|---|---|
| <input type="checkbox"/> Application Fee \$ _____
<i>Fee Schedule Attached to this Packet</i> | <input type="checkbox"/> Landscape Plan |
| <input type="checkbox"/> Escrow Fee \$ _____ | <input type="checkbox"/> Stormwater Management Report |
| <input type="checkbox"/> W9 Form
<i>Form Attached to this Packet</i> | <input type="checkbox"/> PCSM Plan |
| <input type="checkbox"/> Project Narrative | <input type="checkbox"/> E & S Plan |
| <input type="checkbox"/> Existing Features Plan | <input type="checkbox"/> E & S Narrative |
| <input type="checkbox"/> Sketch Plan | <input type="checkbox"/> Traffic Report |
| <input type="checkbox"/> Record Plan | <input type="checkbox"/> Planning Module Data |
| <input type="checkbox"/> Grading Plan | <input type="checkbox"/> Review Response Letter (Resubmissions) |
| <input type="checkbox"/> Utility Plan & Profiles | <input type="checkbox"/> Escrow & Reimbursement Agreement
<i>Agreement Attached to this Packet</i> |
| <input type="checkbox"/> Vision Zero Action Plan Checklist
<i>Form Attached to this Packet</i> | |

Documentation of Transmittals to:

- | | |
|--|--|
| <input type="checkbox"/> Lehigh Valley Planning Commission | <input type="checkbox"/> Lehigh County Authority |
| <input type="checkbox"/> PennDOT (District 5-0) | <input type="checkbox"/> Lehigh County Conservation District |
| <input type="checkbox"/> Lehigh & Northampton Transportation Authority (LANTA) | |

VISION ZERO ACTION PLAN CHECKLIST

The **Vision Zero Action Plan** (VZAP) was adopted by the Upper Macungie Township Board of Supervisors by resolution in 2023 and seeks to eliminate all traffic fatalities and severe injuries, while increasing safe, healthy, and equitable mobility for all through the creation of safe pedestrian and bicycling connections throughout the Township. The plan can be viewed at the following link: <https://www.uppermac.org/departments/parks-recreation/vision-zero-action-plan>.

All applicants applying for land development shall review and incorporate the recommendations of the Proposed Improvements Plan contained within the VZAP (pp. 79-89). See also Part 2 of the Subdivision and Land Development Ordinance for definitions of each improvement type.

Below, please identify all improvement types in the Proposed Improvements Plan that abut or are contained within any property proposed for development as part of this application. Confirm whether those improvements have been included on the land development plans.

Improvement Type	Improvement(s) Abutting or Contained Within the Property Identified by Proposed Improvements Plan (VZAP) (Check box if identified)	Included on Land Development Plans (Check box if included)
Bicycle Box	<input type="checkbox"/>	<input type="checkbox"/>
Bicycle Lane	<input type="checkbox"/>	<input type="checkbox"/>
Multi-use Path	<input type="checkbox"/>	<input type="checkbox"/>
Sidepath	<input type="checkbox"/>	<input type="checkbox"/>
Sidewalk	<input type="checkbox"/>	<input type="checkbox"/>
Sharrow	<input type="checkbox"/>	<input type="checkbox"/>

Design Standards

Improvement Type	Specifications	Materials
Bicycle Box	Signalized intersections where bicycle lane is present. See bicycle lane requirements.	Painted markings
Bicycle Lane	4 ft. min. on streets with no curbing. 5 ft. min. on streets with curbing. 6 ft. min. where posted speed limit is greater than 25 mph.	Painted markings
Multi-Use Path	10 ft. min. width. Must be ADA compliant. Must have 5-foot separation from street.	Bituminous surface or equivalent
Sidepath	5 ft. min. width. Must be ADA compliant. Must have 5-foot separation from street.	Bituminous surface or equivalent
Sidewalk	See § 22-704.9 Sidewalks and Curbs.	Concrete
Sharrow	Shared lane markings to reinforce legitimacy of bicycle traffic on street.	Painted markings