NEW CASTLE COUNTY DEPARTMENT OF LAND USE

SLD-1 Form
(Application for Plan Review)

Level of Plan Submission	Plan Type	
( ) Exploratory Sketch Plan	( ) Major Land Development	**Date Rec'd.** _____
( ) Preliminary Plan	( ) Minor Land Development	
( ) Check Print	( ) Resubdivision	**App. No.** _____
( ) Record Plan	( ) Site	
( ) Revised Plan	( ) Utility	
	( ) Parking	**Assigned Planner** _____
( ) Engineering Section Submission Only	( ) Sanitary Sewer	
	( ) Grading / E&S / Stormwater	**Assigned Engineer** _____
	( ) Floodplain	
	( ) General Permit	

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1) Name of Plan _____

Former Plan Name or Alias _____

Tax Parcel Number(s) _____

2) Name of Legal Property Owner(s) _____ _____
If legal owner is a business entity, name of responsible employee acting for the business. Phone #

Address _____

3) Name of Applicant _____ _____
If applicant is a business entity, name of responsible employee acting for the business. Phone #

Address _____

4) Firm or Person Responsible for the Preparation of the Plan (Engineer/Surveyor) :

Name and Title _____

Firm _____

Address _____

Telephone _____

FAX _____

Email _____

5) Existing Zoning _____ Proposed Zoning Changes (if applicable) _____

6) Also submitted are the following applicable fees as indicated: (See Appendix 2 for Details)

Exploratory Sketch Plan Submission
( ) Planning Land Development &/or Rezoning Review and Processing Fee
Amount of Check $_____
( ) Engineering Review and Processing Fee
Amount of Check $_____

Preliminary Plan Submission
( ) Planning Land Development &/or Rezoning Review and Processing Fee
Amount of Check $_____
( ) Engineering Review and Processing Fee
Amount of Check $_____

Record Plan Submission
( ) Planning Check Print Filing Fee
Amount of Check $_____
( ) Planning Land Development &/or Rezoning Review and Processing Fee
Amount of Check $_____
( ) Engineering Review and Processing Fee
Amount of Check $_____
( ) Recorder of Deeds Fee
Amount of Check $_____
( ) Delaware Document Account Fee
Amount of Check $_____

7) Other Items: (See Appendix 1 for Details)

_____

_____

_____

8) It is required that the applicant notify the Federal Aviation Administration on their Form 7460-1, available at the New Castle County Airport Manager's Office if proposed construction, or crane operation will exceed 200 feet above ground level, or will penetrate a slope of 100:1 outward and upward from the nearest point of the nearest runway for a distance of 20,000 feet. For construction, or crane operations in closer proximity to any other airport or heliport in New Castle County, the obstruction/height criteria may vary. Clarification should be made by contacting the New Castle County Airport Manager's Office.

I certify that, to the best of my knowledge, all information listed above and all information and statements contained in any documents or plans submitted with this application are true, correct, and complete and the legal owner of the land agrees with the filing of this application. I understand that any person who falsifies any information on any application made with the Department shall be subject to criminal proceedings under Title 11 of the Delaware Code.

I certify that I will post an application notice for this Major/Minor Land Development Plan according to New Castle County Code Chapter 40 (UDC) §31.320(F)(2) within 10 days of submission of this completed SLD application.

MANDATORY
PLAN SUBMISSION DATA

( ) Residential ( ) Non-Residential

Site Acreage _____

Disturbed Acreage: _____

Number of Lots: _____

Estimated Number of Pumps: _____

Estimated Sanitary Sewer Flow: _____ **(GPD)**

Non-Residential Proposed GFA: _____ **(If Applicable)**

Building Footprint: _____ **(if Applicable)**

Acreage Paved: _____

Acreage Open: _____

Sewer: _____

Water: _____

Residential:

Acreage Open Space: _____

Acreage Lots: _____

Acreage ROW: _____

Signature of Legal Property Owner

_____
Date

_____
(Print Legal Owner Name)

Signature of Applicant

_____
Date

_____
(Print Applicant Name)

Signature and Seal of Engineer/Surveyor

_____
Date

_____
(Print Engineer/Surveyor Name)