

SOLEBURY TOWNSHIP RESIDENT CONSULTATION
WITH TOWNSHIP ENGINEER REQUEST FORM

1. Township residents or their designated representative(s), contemplating a proposed building, construction or grading project within the Township, should first contact the Zoning Officer to discuss proposed project prior to scheduling consultation with Township Engineer.
2. Resident consultations are available on the 1st and 3rd Fridays of the month at 9:00 AM thru 12:00 PM (by appointment only), except on holidays, and **MUST** be scheduled with the Township a minimum of 48 hours in advance. Appointments may be used to discuss Zoning/Grading/Stormwater Management/Floodplain Ordinance(s) related issues for building/structure/grading projects (new structures, building additions, accessory structures, landscaping, etc.). **Appointment cancellations MUST be made by a resident or designated representative 24 hours prior to appointment time.**
3. One appointment (at no cost to the resident) is permitted. Additional appointments are available for a non-refundable fee of \$150.00 (cash, bank check, or money order) per additional appointment. Fee must be paid prior to scheduling additional appointment(s).
4. Proof of ownership must be presented to the Township as a prerequisite for scheduling a consultation. Proof of ownership can be established with a Picture ID, Property Deed, Tax Bill or other if found satisfactory to the Township.
5. By scheduling a consultation, execution of this form, and completion of the consultation, the resident (or designated representative) agrees to the conditions identified herein. **The Authorization Affidavit portion must be completed and signed by the Property Owner prior to scheduling appointment.** For your convenience, this consultation form is available on the Township Website or you may contact the Township office for a copy.

*****REFER TO THE BACK SIDE OF THIS FORM FOR ADDITIONAL CONSULTATION INFORMATION*****

Proof of Ownership: ☐ PICTURE ID ☐ PROPERTY DEED ☐ TAX BILL ☐ OTHER _____

PROPERTY OWNER:

Name: _____ Telephone: _____

Mailing Address: _____ Email Address: _____

_____ Site Location if Different: _____

Tax Parcel No.: _____ Lot Number: _____ Lot Area: (acres) _____

Is Parcel Preserved? ☐ YES ☐ NO Preservation Easement is held by? _____

PROJECT DESCRIPTION: _____

DESIGNATED REPRESENTATIVE(S):

Name: _____ Telephone: _____

Mailing Address: _____ Email Address: _____

_____ Project Manager: _____

(MUST BE SIGNED BY PROPERTY OWNER)

AUTHORIZATION AFFIDAVIT

I _____ authorize _____
(NAME OF OWNER - PRINTED) (DESIGNATED REPRESENTATIVE(S))

to consult with the Township Officials/Consultants (on my behalf) regarding the subject potential project.

(SIGNATURE OF OWNER) Date: _____

RESIDENT CONSULTATION REQUEST FORM (CONT'D)**TO BE COMPLETED BY TOWNSHIP/TOWNSHIP ENGINEER** (based on Information provided by the owner/representative):Consultation conducted by: ☐ C. Robert Wynn, P.E. ☐ Other: _____Is this the first consultation regarding this project? ☐ YES ☐ NO How many prior consultations? _____Fee Paid? ☐ YES ☐ NO ☐ NOT APPLICABLE ☐ First Consultation ☐ _____

Date of Consultation: _____ Time of Consultation: _____ Zoning District of Site: _____

Persons Attending Consultation: _____

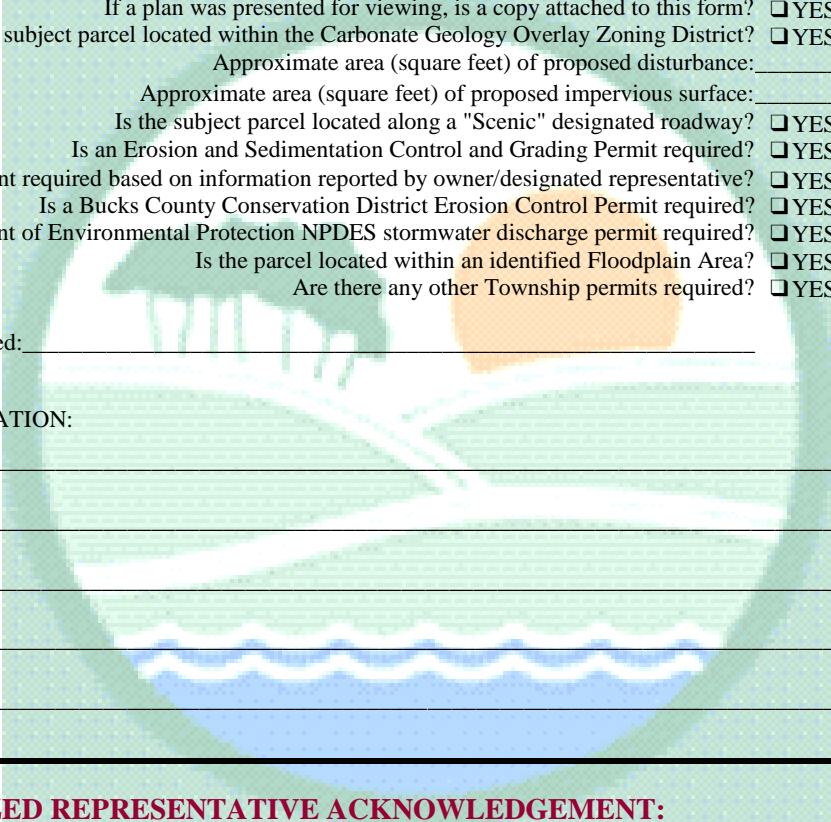
Was a plan, sketch, drawing, etc. presented for viewing? ☐ YES ☐ NOIf a plan was presented for viewing, is a copy attached to this form? ☐ YES ☐ NO ☐ N/AIs the subject parcel located within the Carbonate Geology Overlay Zoning District? ☐ YES ☐ NO

Approximate area (square feet) of proposed disturbance: _____ SF

Approximate area (square feet) of proposed impervious surface: _____ SF

Is the subject parcel located along a "Scenic" designated roadway? ☐ YES ☐ NOIs an Erosion and Sedimentation Control and Grading Permit required? ☐ YES ☐ NOIs stormwater management required based on information reported by owner/designated representative? ☐ YES ☐ NOIs a Bucks County Conservation District Erosion Control Permit required? ☐ YES ☐ NOIs a Pennsylvania Department of Environmental Protection NPDES stormwater discharge permit required? ☐ YES ☐ NOIs the parcel located within an identified Floodplain Area? ☐ YES ☐ NOAre there any other Township permits required? ☐ YES ☐ NO

Other permits possibly required: _____

SUMMARY OF CONSULTATION:

_____**OWNER/AUTHORIZED REPRESENTATIVE ACKNOWLEDGEMENT:**

The above report and information shown on this form effectively summarizes the items discussed at the resident consultation.

(TOWNSHIP OFFICIAL/CONSULTANT SIGNATURE)_____
(DATE)**COPIES OF THIS REPORT GIVEN TO:** ☐ Zoning Officer ☐ Township Engineer ☐ Other: _____**THIS SECTION TO BE COMPLETED BY TOWNSHIP:** ☐ Second ☐ Other _____**Date Paid:** _____ **Payment Type:** _____ **Amount:** _____ **Accepted By:** _____