



Office Use Only
Application No. _____

APPLICATION – CONCEPT PLAN

Town of Cheswold Planning and Zoning P.O. Box 220; 691 Main Street, Cheswold, DE 19936
Phone: 302-734-6991 Fax: 302-734-1355 Email: cheswoldoffice@comcast.net
Website: <http://chewold.delaware.gov>

APPLICATION DEVELOPMENT TYPE

- | | |
|---|--|
| <input type="checkbox"/> Single Family Development Plan | <input type="checkbox"/> Single Lot Plan |
| <input type="checkbox"/> Combining Lots Plan | <input type="checkbox"/> Redesigning Lots Plan |
| <input type="checkbox"/> Commercial Industrial Plan (up to 10,000 sq. ft.) | <input type="checkbox"/> Commercial Industrial Plan (10,000 to 50,000 sq. ft.) |
| <input type="checkbox"/> Commercial Industrial Plan (greater than 50,000 sq. ft.) | <input type="checkbox"/> Subdivision (less than 50 parcels) |
| <input type="checkbox"/> Subdivision 50 to 150 parcels | <input type="checkbox"/> Subdivision (greater than 151 parcels) |
| <input type="checkbox"/> Other Residential Development Plan (please explain) | |

- Other Commercial Development Plan (please explain)

APPLICANT INFORMATION

_____ (LAST NAME)	_____ (FIRST NAME)	_____ (HOME PHONE)	_____ (CELL PHONE)
_____ (MAILING ADDRESS)	_____ (CITY)	_____ (STATE)	_____ (ZIP)
_____ (EMAIL ADDRESS)			_____ (WORK PHONE)

PROJECT SITE/PROPERTY & OWNER INFORMATION

_____ (LAST NAME)	_____ (FIRST NAME)	_____ (HOME PHONE)	_____ (CELL PHONE)
_____ (MAILING ADDRESS)	_____ (CITY)	_____ (STATE)	_____ (ZIP)
_____ (EMAIL ADDRESS)			_____ (WORK PHONE)

(E911 or AVENUE/STREET ADDRESS) (MAP ID)

- OLD TOWN FOX POINTE MAIN ST. LEYLAND PK. STRIMMEL'S PARKERS RUN STONINGTON BUSINESS PARK
(SECTION of TOWN – Check One)

(PIDN) (LOT #) (ACRES) WELL TIDEWATER



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CURRENT/PROPOSED LAND USE *(Check all that apply)*

CURRENT	PROPOSED
<input type="checkbox"/> Agricultural	<input type="checkbox"/> Agricultural
<input type="checkbox"/> Institutional	<input type="checkbox"/> Institutional
<input type="checkbox"/> Manufacturing	<input type="checkbox"/> Manufacturing
<input type="checkbox"/> Office	<input type="checkbox"/> Office
<input type="checkbox"/> Public Services	<input type="checkbox"/> Public Services
<input type="checkbox"/> Residential	<input type="checkbox"/> Residential
<input type="checkbox"/> Sales	<input type="checkbox"/> Sales
<input type="checkbox"/> Storage	<input type="checkbox"/> Storage
<input type="checkbox"/> Transportation	<input type="checkbox"/> Transportation
<input type="checkbox"/> Other <i>(Explain Below)</i>	<input type="checkbox"/> Other <i>(Explain Below)</i>

PROPOSED USE INFORMATION

Please provide a summary of the proposed USE for the change/s; improvement/s; construction, (ex: *"This will be my residence."*; or *The building will be used for offices; or storage, etc.,*), in the space provided below:

ZONING CODE INFORMATION

CURRENT	REQUESTED
<input type="checkbox"/> R1 <input type="checkbox"/> R2 <input type="checkbox"/> R3 <input type="checkbox"/> R4 <input type="checkbox"/> C1 <input type="checkbox"/> C2 <input type="checkbox"/> I1 <input type="checkbox"/> I2	<input type="checkbox"/> R1 <input type="checkbox"/> R2 <input type="checkbox"/> R3 <input type="checkbox"/> R4 <input type="checkbox"/> C1 <input type="checkbox"/> C2 <input type="checkbox"/> I1 <input type="checkbox"/> I2
R1 = Residential – Old Town Only R2 = Residential – Single/2 Family R3 = Residential – Multi-family/Townhouse R4 = Manufactured/Trailer Park	C1 = Commercial Neighborhood C2 = Commercial Highway I1 = Light Industrial I2 = Heavy Industrial

For Office Use Only

Application No. _____	Certificate No. _____	Date Issued: _____
Check Received: _____	Check No. _____	Check/Cash Amount: _____
Amount Reimbursed: _____	Check No. _____	Date Issued: _____

APPLICANT/OWNER CERTIFICATION

I certify that the information and exhibits submitted are true and correct to the best of my knowledge. Pursuant to said authority, I hereby permit Town of Cheswold Officials to enter upon my property for the purpose of inspection, and, if necessary, for posting a public notice on the property. And I am requesting approval of the specified development plan/s submitted as part of this application.

_____ (APPLICANT SIGNATURE)	_____ (DATE)
_____ (OWNER SIGNATURE – <i>REQUIRED if not the Applicant</i>)	_____ (DATE)



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Application Date: _____

SITE PLAN

Scale: _____" = _____ ft.

