

# PLAN REVIEW ONLY



Application Received By \_\_\_\_\_  
Date Received \_\_\_\_\_  
Borough Fee of \$ \_\_\_\_\_ received  
*For Office Use only*

Applicant Name: \_\_\_\_\_  
Applicant Mailing Address: \_\_\_\_\_  
Contact Name (if different than applicant): \_\_\_\_\_  
Contact Number \_\_\_\_\_ Contact Email \_\_\_\_\_  
  
Request for plan review for compliance of proposed \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
  
Applicant Signature \_\_\_\_\_ Date \_\_\_\_\_

Property/Site Address: \_\_\_\_\_  
Property Type:    Residential    Commercial    Industrial    Mixed Residential/Commercial  
If Commercial (check all that apply):  
 Office    Mercantile    Assembly    Manufacturing    Other \_\_\_\_\_

Zoning District: \_\_\_\_\_ Zoning Use \_\_\_\_\_  
Reviewed By: \_\_\_\_\_ Review Date \_\_\_\_\_  
Plan Review Letter Sent: \_\_\_\_\_  
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