

EAST COVENTRY TOWNSHIP, CHESTER COUNTY, PENNSYLVANIA

GENERAL INFORMATION REQUEST APPLICATION

SECTION I: GENERAL

A. Applicant(s):

1. Name(s): _____

2. Address: _____

3. Telephone Number: _____

B. Interest of Applicant(s) in subject property described in Section II (check one):

1. _____ Owner(s) of record title;

2. _____ Owner(s) of equitable title;

3. _____ Lessee(s); or

4. _____ Other, Describe _____

C. Owner(s) of record title of subject property described in Section II [if other than applicant(s)]:

1. Name(s): _____

2. Address: _____

3. Telephone Number: _____

SECTION II: SUBJECT PROPERTY

1. Location (Include reference to nearby intersections and/or prominent features):

2. Corner Lot? ____ Yes; ____ No. If "Yes", indicate all streets abutting the subject property:

3. Chester County Tax Map Designation: Tax Map No. _____;
Parcel No. _____.

4. Zoning District Classification (if known): _____

5. Lot Area: _____ square feet (_____ acres).

6. Dimensions:

a. Length of front lot line: _____ ft.;

b. Lot width (at building setback line): : _____ ft.;

c. Length of side lot lines: _____ ft., and _____ ft.; and

d. Length of rear lot line: _____ ft.

7. Size, Construction Type, and Use of Existing Improvements; or Use of Land if Unimproved:

8. My Question Is (Please provide as much detail as is necessary to accurately convey your request; you may include any additional documents that may be relevant):

9. The following to be executed by the owner(s) of record title of the subject property if he(she)(they) is(are) not the applicant(s):

The undersigned hereby acknowledge(s) and verify(ies) that he(she)(they) is(are) the owner(s) of record title of the subject property described herein, and that the applicant(s) named herein is(are) authorized to submit this application.

Signature of Applicant

Signature of Owner of Record Title
(If Other Than Applicant)

Date: _____