



MARSHALL TOWNSHIP
525 PLEASANT HILL ROAD
SUITE 100
WEXFORD, PA 15090

**RESIDENTIAL, RESEARCH &
TECHNOLOGY PARK (RRTP)
LAND DEVELOPMENT APPLICATION**

Date Submitted: _____ Date Received: _____ File Number: _____

Refer: Marshall Township Zoning Ordinance, Township Code Chapter 208

TOWNSHIP FILING FEES: (Checks made payable to Marshall Township)

- \$1,000 plus \$100 for each acre or fraction thereof over 2 acres;
- \$10,000 deposit for review fees incurred by the Township;
- Digital Submittal Waiver Fee: \$50 for each 500 square feet of building footprint area;
- Modification/Waiver Request: \$150 per request; and
- \$300 conditional use fee and \$500 deposit (applicant is responsible for all professional/consultant fees, including but not limited to legal, engineering and traffic. Applicant is responsible for one-half of stenographer's fee, if applicable.).

MTMSA FEES: (Checks should be made payable to MTMSA)

- Site Plan/1 Lot \$50.00
- 2-10 Lot Subdivision \$100.00
- 11-20 Lot Subdivision \$150.00
- Over 20 Lot Subdivision \$200.00
- Plan Revisions \$50.00/revision
- In addition to the foregoing fees, all legal, engineering, and other expenses actually incurred by the Authority in the review of plans shall be paid by the party submitting plans for review. Checks should be made payable to MTMSA.

[For Planning Commission review only]:

Plan/Report Submission Copies (**plans must be folded**):

- 5 full size
- 11 half size (not smaller than 11 x 17)
- 1 application
- 2 copies of applicable reports
- Above filing fees

Call the Planning Commission Secretary at 724.935.3090 x 108 for revised plan submission and/or Board of Supervisors submission requirements.

For TOWNSHIP Use:	
CONDITIONAL USE:	_____ YES _____ NO
HEARING ANTICIPATED:	_____ YES _____ NO
DATE OF HEARING: _____	DATE ADVERTISED: _____
DATE POSTED: _____	
IN CORRIDOR ENHANCEMENT OVERLAY DISTRICT:	_____ YES _____ NO

Checklist of Fees Submitted

Township Fees

PLEASE NOTE: CHECKS SHOULD BE MADE PAYABLE TO MARSHALL TOWNSHIP

Fee:	Amount Submitted:
<ul style="list-style-type: none"> • Base: \$1,000 plus \$100 for each acre or fraction thereof Over 2 acres 	_____
<ul style="list-style-type: none"> • Deposit: \$10,000 deposit 	_____
<ul style="list-style-type: none"> • Modification Request: Modification/Waiver Request: \$150 per request 	_____
<ul style="list-style-type: none"> • Digital Submittal Waiver Fee: \$50 for each 500 sq. feet of building footprint area 	_____
<ul style="list-style-type: none"> • Conditional Use: \$300 	_____
<ul style="list-style-type: none"> • Conditional Use Deposit: \$500 	_____
<ul style="list-style-type: none"> • Planning Module Review (if applicable): \$200 	_____
TOTAL:	_____

MTMSA Fees

PLEASE NOTE: CHECKS SHOULD BE MADE PAYABLE TO MTMSA

Fee:	Amount Submitted:
<ul style="list-style-type: none"> • Site Plan/ # of Lots: (select one) Site Plan/1 lot = \$50 2-10 lot Subdivision = \$100 11-20 lot Subdivision = \$150 Over 20 lot Subdivision= \$200 	_____
<ul style="list-style-type: none"> • Plan Revision Fee: \$50 per revision 	_____
TOTAL:	_____

In addition to the foregoing fees, all legal, Engineering and other expenses actually incurred By the Authority in the review of plans shall be Paid by the party submitting the plans for review Fees will be billed if incurred

IF ALL ABOVE FEES ARE NOT SUBMITTED AT TIME OF APPLICATION, THE APPLICATION WIL BE DEEMED INCOMPLETE AND RETURNED TO THE APPLICANT

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NAME OF COMPANY: _____

PHONE: _____

OWNER OF PROPERTY: _____

PHONE: _____

OWNER'S ADDRESS: _____

EMAIL: _____

LOCATION OF PROPERTY: _____

AGENT'S NAME: _____

PHONE: _____

ADDRESS: _____

EMAIL: _____

PROPOSED USE: _____

Proposed Use(s):

Permitted:

- | | |
|--|--|
| Single Family Attached (SF-A) Dwelling [§208-2604(Y)] | Two-Family Dwelling [§208-2604(Y)] |
| Triplex Dwelling [§208-2604(Y)] | Quadrplex Dwelling [§208-2604(Y)] |
| Townhouse Dwelling [§208-2604(Y)] | Forestry / Timber Harvesting [Article 2400] |
| Open Space | Recreation Areas, Outdoor |
| Mineral Removal | Professional Occupations |
| Professional Offices | Research Testing Facility |
| Restaurant & Tavern | Technology Industry |
| Municipal Buildings & Facilities [§208-2604(AA)] | State & Federal Buildings & Facilities [§208-2604(AA)] |
| Public Utility Structures, other than Telecommunications Tower [§208-2604(BB)] | Telecommunications Antenna – Co-Location - Existing Towers [§208-2604(FF)] |
| Essential Services | |

Accessory Uses:

- | | |
|---|--|
| Detached Garage, private | Fences [§208-304(A)] |
| No Impact Home-Based Business [§208-304(B)] | Passenger Shelters [§208-304(D)] |
| Swimming Club [§208-304(F)] | Tennis Court |
| Parking Areas [Article 1900] | Signs [Article 2100] |
| Customarily Associated Accessory Uses of Permitted & Conditional Uses | Employee Lunchroom Facilities and Health Care Facilities |

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Conditional Uses:

Drive-Through Facility [§208-2604(L)]

Hotel, Motel & Hotel-Office Complex
[§208-2604(R)]

Medical Clinic or Laboratory [§208-2604(W)]

Colleges & Universities [§208-2604(M)]

Home Occupations [§208-304(B)]

AREA AND BULK REGULATIONS

Public Sewer and Water required in all cases.

REQUIREMENTS

PROPOSED SITE

- | | | |
|----|---|-----------|
| 1. | Lot size: | _____ ac. |
| 2. | Lot width at building setback line: | _____ ft. |
| 3. | Lot width at street line | _____ ft. |
| 4. | Impervious surface, including pavement, principal & accessory buildings | _____ % |
| 5. | Front yard: | _____ ft. |
| 6. | Side yard | _____ ft. |
| 7. | Rear yard: | _____ ft. |
| 8. | Maximum building height measured at the lowest grade abutting a building: | _____ ft. |
| 9. | Lot depth: | _____ ft. |

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PARKING REQUIREMENTS WORK SHEET

See Article 1900

Floor Area of proposed building for use component:

_____ Sq. ft. + requirement = _____ spaces

_____ Sq. ft. + requirement = _____ spaces

_____ Sq. ft. + requirement = _____ spaces

Number of employees (largest shift):

_____ Number of employees _____ spaces required

Number of rooms (hotel):

_____ Number of rooms _____ spaces required

Number of seats (restaurants, etc.):

_____ Number of seats _____ spaces required

Number of units:

_____ Number of units _____ spaces required

Number of staff:

_____ Number of staff _____ spaces required

Number of students:

_____ Number of students _____ spaces required

Number of courts:

_____ Number of courts _____ spaces required

Number of rooms:

_____ Number of rooms _____ spaces required

Other:

_____ Amount _____ spaces required

_____ Amount _____ spaces required

If additional calculations are required, please attached separate page.

Total spaces required: _____

PARKING REQUIREMENTS WORK SHEET

See Section 208- 1908

Gross Floor Area of Building	Number of Spaces*
1,000 - 19,000	1
20,000 - 79,999	2
80,000 - 127,999	3
128,000 - 191,000	4
192,000 - 255,999	5
256,000 - 319,999	6
320,000 - 391,999	7
(In Square Feet)	
Plus one (1) space for each additional 72,000 square feet or fraction thereof.	
* Minimum dimensions of 12 feet x 55 feet and overhead clearance of 14 feet from street grade required for each space.	

Number of space provided:

_____ spaces

GRADING

Township Code, Chapter 88:

A GRADING PERMIT will be required if anyone of the following limitations are exceeded (includes excavation for structures):

<u>LIMITATIONS</u>	<u>PROPOSED SITE</u>
1. Maximum vertical depth measured from existing grade – 5 ft.	_____ ft.
2. Maximum area of site grading – 20%	_____ %
3. Maximum area of grading – 6,000 sq. ft.	_____ sq. ft.
4. Maximum volume of grading (includes cuts & fill) – 250 cu. Yds	_____ cu. yds.

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GENERAL INFORMATION

1. Water Supply: Type: _____
If public, provider: _____

2. Sewage Disposal: Type: _____
If public, provider: _____

I HEREBY CERTIFY THAT ALL INFORMATION PRESENTED BY ME IN THIS APPLICATION IS TRUE AND CORRECT.

Signature

Date

Interest in this development plan:

PROJECT RESPONSIBILITY FORM:

FINANCIAL RESPONSIBILITY

PROJECT NAME: _____

NAME OF PERSON OR ENTITY RESPONSIBLE FOR MAINTAINING ESCROW BALANCE:

MAILING ADDRESS WHERE ESCROW STATEMENTS WILL BE SENT:

EMAIL ADDRESS: _____

DAYTIME PHONE: _____

SIGNATURE:

PROJECT MANAGEMENT RESPONSIBILITY

NAME OF PERSON RESPONSIBLE FOR RECEIVING AND SIGNING THE TOWNSHIP CONDITIONS OR DENIAL LETTER

MAILING ADDRESS: _____

EMAIL ADDRESS: _____

DAYTIME PHONE: _____

SIGNATURE:

-MUNICIPAL USE ONLY-

TOWNSHIP FILE #: _____

APPLICATION FEE: _____ CHECK #: _____

ESCROW AMOUNT: _____ CHECK #: _____

DIGITAL SUBMITTAL WAIVER FEE: _____ CHECK #: _____

MTMSA FEE: _____ CHECK #: _____

SUBDIVISION AND LAND DEVELOPMENT REVIEW APPLICATION
MPC §502(b) County Advisory Review

COUNTY REVIEW REQUIRED: Municipality has adopted a subdivision and land development ordinance

Complete and submit with plans and other information M-F, 8:30 AM - 4:00 PM to:
ACED Planning Division, One Chatham Center, Suite 900, 112 Washington Place, Pittsburgh, PA 15219

For questions, help, or additional information please email ACEDPlanning@alleghenycounty.us

Part 1: General Information

Property Owner: _____

Contact Name: _____ Phone: _____
Email Address: _____
Mailing Address: _____

Name of Applicant: _____

Contact Name: _____ Phone: _____
Email Address: _____
Mailing Address: _____

Plan Preparer: _____

Contact Name: _____ Phone: _____
Email Address: _____
Mailing Address: _____

Application Status: Preliminary Plan Final Plan

Application Type:

Plat Adj./Lot Consolidation
 Minor Subdivision/Site Development
 Major Subdivision/Site Development

Part 2: Location Information

Project Name: _____

Municipality: _____

Address/Location of Project: _____

Tax Map Parcel(s) #: _____

Part 3: Zoning Information

Zoning:

Existing: _____

Proposed: _____ (if applicable)

Variances Requested: Yes No (if yes, please attached description of all variances requested or approved)

Conditional Use: Yes No

Special Exception: Yes No

Part 4: Project Information

Total Plan Area: _____ (acres)
_____ (square feet)

Total Acreage to be Developed: _____

Total Impervious Area (Sq. Ft.): _____

Total Building Area (Sq. Ft.): _____

Phasing:

Is the development proposed to be constructed in phases? Yes No

If Yes, a phasing plan and a schedule of the projected dates that the final application for each phase will be filed must be provided.

Proposed Utilities:

	Water	Sewer
Public:	<input type="checkbox"/>	<input type="checkbox"/>
Onsite:	<input type="checkbox"/>	<input type="checkbox"/>

Street Information:

Ownership (check any that apply):

<input type="checkbox"/> State	<input type="checkbox"/> Local
<input type="checkbox"/> County	<input type="checkbox"/> Private

Lineal feet of new streets: _____

Part 5: Notification to Others

As applicable, the following agencies have been notified about the proposed subdivision or site development:

- County Health Department
Date: _____
- County Public Works
Date: _____
- County Conservation District
Date: _____

- PennDOT
Date: _____
- PA DEP
Date: _____
- Other: _____
Date: _____

The applicant declares the following:

- He/she is the owner of the property in question; OR
- He/she is the authorized agent for the owner of record to the property for which the application is made; OR
- He/she is a beneficial land owner as defined by the PA Municipalities Planning Code (MPC). If this box is checked, a copy of the agreement recorded with the ACDRE authorizing the applicant to subdivide or develop the property must be provided.

I/We hereby submit the enclosed land development application to the Allegheny County Department of Economic Development for review and consideration in accordance with the PA Municipalities Planning Code (Act 247 of 1968, as amended) and Art. III §780-302 of the Allegheny County Subdivision and Land Development Ordinance:

Signature of Applicant

Date

Revised August 2021