



CALN TWP RTKO

STANDARD RIGHT-TO-KNOW REQUEST FORM

 DATE REQUESTED:
 4/12/19

 REQUEST SUBMITTED BY:
 X E-MAIL
 U.S. MAIL
 FAX
 IN-PERSON

 REQUEST SUBMITTED TO (Agency name & address):
 Caln Township, Chester County, PA

 NAME OF REQUESTER:
 Maria Fraguada and Barbara Wisniewski, Construction Information Systems

 STREET ADDRESS:
 170 Kinnelon Road

 CITY/STATE/COUNTY/ZIP (Required):
 Kinnelon, NJ - Morris County,

 TELEPHONE (Optional):
 EMAIL (optional):

RECORDS REQUESTED: **Provide as much specific detail as possible so the agency can identify the information. Please use additional sheets if necessary*

Please email a copy of only those pages of the Planning Commission applications for:

- 50 Rock Raymond Rd., Taco Bell
- 15 Fox Ave. (Townshouses)

that include

- # of units (townhomes)
- Description of what applicant proposes to build
- Square footage of any new construction (not site plans)
- the names, addresses and telephone numbers for: 1) Applicant, 2) Owner, 3) Architect, 4) Attorney and 5) Engineer.

Thank you!

DO YOU WANT COPIES? YES (Digital) or NO DO YOU WANT TO INSPECT THE RECORDS? YES or NO DO YOU WANT CERTIFIED COPIES OF RECORDS? YES or NO

> ** PLEASE NOTE: <u>RETAIN A COPY</u> OF THIS REQUEST FOR YOUR FILES ** ** IT IS A REQUIRED DOCUMENT IF YOU WOULD NEED TO FILE AN APPEAL **

> > FOR AGENCY USE ONLY

RIGHT TO KNOW OFFICER: O'Aum DATE RECEIVED BY THE AGENCY: 4/12/19 AGENCY FIVE (5) BUSINESS DAY RESPONSE DUE: 4/22/19 (Good Friday closed)

**Public bodies may fill anonymous verbal or written requests. If the requestor wishes to pursue the relief and remedies provided for in this Act, the request must be in writing. (Section 702.) Written requests need not include an explanation why information is sought or the intended use of the information unless otherwise required by law. (Section 703.)



SUBDIVISION / LAND DEVELOPMENT PLAN APPLICATION

PROJECT NAME (TO BE COMPLETED BY TOWNSHIP):				
NAME OF APPLICANT	: Downingtown Investors, LLC			
DATE OF APPLICATION: September 14, 2018 SUBMISSION #				
LOCATION OF PROPE	RTY: 50 Rock Raymond Road, Downingtown, PA 19335			
TAX PARCEL ID NUM	BER: 39-2-27 C-2 and Route 30 Bypass ZONING DISTRICT: Interchange Overlay			
TYPE OF SUBMISSION: SKETCH PLAN (5) X FINAL PLAN (10) PRELIMINARY PLAN (10) IN ADDITION: (1) 11X17 PLAN AND A CD CONTAINING ALL DOCUMENTATION. ADDITIONAL PLANS MAY BE REQUIRED.				
APPLICANT'S NAME: Downingtown Investors, LLC MAILING ADDRESS: 14 Balligomingo Road, P.O. Box 429, Conshohocken, PA 19428 PHONE NUMBER: FAX NUMBER: E-MAIL ADDRESS: FAX NUMBER:				
OWNER OF RECORD: P. McLaughlin Builders, Inc. MAILING ADDRESS: P.O. Box 488, Unionville, PA 19375 PHONE NUMBER: FAX NUMBER: E-MAIL ADDRESS: FAX NUMBER:				
PROJECT ATTORNEY: Louis J. Colagreco, Jr., Esquire and Gina M. Gerber, Esquire MAILING ADDRESS: 717 Constitution Drive, Suite 201, Exton, PA 19341 PHONE NUMBER: FAX NUMBER: E-MAIL ADDRESS: FAX NUMBER:				
PROJECT ENGINEER Ryan Whitmore, P.E., Landcore Engineering Consultants, P.C. MAILING ADDRESS: 8614 Montgomery Avenue, Wyndmoor, PA 19083 PHONE NUMBER: FAX NUMBER: E-MAIL ADDRESS: Image: Consultant set of the set of				

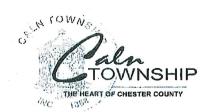


PROPOSED LAND USE (X)		SPECIFIC TYPE OF USE, AS TOTAL NUMBER OF DEFINED BY CALN TOWNSHIP LOTS / UNITS		TOTAL SQ. FOOTAGE OF NON-RESID. BUILDINGS	
AGRICULTURAL					
CONSERVATION					
RESIDENTIAL					
COMMERCIAL	X	Restaurant and Drive-Thru	1	2,753 sq. ft.	
INDUSTRIAL					
INSTITUTIONAL					
MUNICIPAL					
OTHER		Γ			

TOTAL LAND AREA (ACRES): <u>±1.74</u>	RESIDENTI	AL DENSITY: N/A		
TOTAL LAND AREA BEING DEVELOPED:	<u>+</u> 1.74		TOTAL PHASES:	1
TOTAL LENGTH OF NEW ROADS (LINEAR	N/A			
PROPOSED METHOD OF SEWAGE DISPOSAL:		Public		
PROPOSED METHOD OF WATER SUPPLY:		Public		

TEN COMPLETE SETS OF PLANS, ONE ORIGINAL APPLICATION AND THREE COPIES OF ALL SUPPLEMENTAL DOCUMENTS OR REPORTS SHALL BE SUBMITTED TO CALN TOWNSHIP IN ACCORDANCE WITH THE PROCEDURES ADOPTED BY THE CALN TOWNSHIP BOARD OF COMMISSIONERS. THE FOLLOWING INFORMATION HAS BEEN SUBMITTED WITH THIS APPLICATION

COMMISSIONERS. THE FOLLOWING INFORMATION HAS B	EEN SUBMI	<u>TTED WITH THIS APPI</u>	ICATION:
TITLE OF SUBMISSION AND DESCRIPTION CONTENTS	COPIES	REFERENCE NUMBER	DATE
Please see enclosure letter for full list of Application Materials			
	<u> </u>		



I <u>Robert J</u> Nasuti (AUTHORIZED REPRESENTATIVE OF THE APPLICANT) HEREBY REQUEST REVIEW OF THIS APPLICATION BY CALN TOWNSHIP. TO THE BEST OF MY KNOWLEDGE, ALL OF THE INFORMATION CONTAINED WITHIN THIS APPLICATION IS TRUE, CORRECT AND COMPLETE. FURTHER, I HEREBY AGREE TO THE FOLLOWING SPECIFIC TERMS AND CONDITIONS:

- (1) I HEREBY PERMIT ANY ELECTED, APPOINTED AND/OR ASSIGNED STAFF MEMBER OF CALN TOWNSHIP TO ENTER THE EXTERIOR PREMISES OF THE PROPERTY, IN WHICH THIS APPLICATION PERTAINS, FOR THE PURPOSES OF CONDUCTING SITE INSPECTIONS WHILE THE PROPOSED APPLICATION IS BEING CONSIDERED BY CALN TOWNSHIP.
- (2) I HEREBY AGREE TO PAY ALL CONSULTANT, ADMINISTRATIVE AND/OR APPLICATION FEES REQUIRED FOR THE REVIEW OF THIS APPLICATION.
- (3) I HEREBY AGREE TO COMPLETE AND SUBMIT TO CALN TOWNSHIP, THE CHESTER COUNTY REFERRAL FORM AND APPLICABLE FEES WITH THIS APPLICATION.

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SIGNATURE OF APPLICANT OR AUTHORIZED	DATE OF APPLICATION
REPRESENTATIVE	
AhK-	9/14/18
SIGNATURE OF WITNESS	DATE

FOR MUNICIPAL USE ONLY	AUTHORIZED STAFF MEMBER:	
APPLICATION NAME:	APPLICATION #	
SUBMISSION DATE:	SUBMISSION NUMBER:	
CALN TWP. FEE:	CHECK NUMBER: DATE:	
CHESTER COUNTY PC FEE:	OTHER APPLICATION FEES:	
DATE APPLICATION WILL BE REVIEWED BY TOWNSHIP PLANNING COMMISSION:		
APPLICATION COMPLETENES	S REVIEW: DATE:	



SUBDIVISION / LAND DEVELOPMENT PLAN APPLICATION

PROJECT NAME (TO BE COMPLETED BY TOWNSHIP):				
NAME OF APPLICANT: Jagger Investments, LLC				
DATE OF APPLICATION: October 31, 2018 SUBMISSION # 1				
LOCATION OF PROPERTY: 15 Fox Avenue, Coatesville, PA 19320	47 7 1			
TAX PARCEL ID NUMBER:				
X TYPE OF SUBMISSION: SKETCH PLAN (5) FINAL PLAN (10) PRELIMINARY PLAN (10) OTHER IN ADDITION: (1) 11X17 PLAN AND A CD CONTAINING ALL DOCUMENTATION. ADDITIONAL PLANS MAY BE REQUIRED.				
APPLICANT'S NAME: Jagger Investments, LLC; c/o David Bollinger MAILING ADDRESS: 275 Hess Boulevard, Lancaster, PA 17601 PHONE NUMBER: FAX NUMBER: E-MAIL ADDRESS: FAX NUMBER:				
OWNER OF RECORD: CJD Group, LLC MAILING ADDRESS: 275 Hess Boulevard, Lancaster, PA 17601 PHONE NUMBER: FAX NUMBER: E-MAIL ADDRESS: FAX NUMBER:				
PROJECT ATTORNEY:				
PROJECT ENGINEER JMR Engineering, LLC; c/o David E. Rentschler, P.E. MAILING ADDRESS: 55 Country Club Drive, Suite 201, Downingtown, PA 19335 PHONE NUMBER: FAX NUMBER: E-MAIL ADDRESS: FAX NUMBER:				



PROPOSED LAND USE (X)		SPECIFIC TYPE OF USE, AS DEFINED BY CALN TOWNSHIP	TOTAL NUMBER OF LOTS / UNITS	TOTAL SQ. FOOTAGE OF NON-RESID, BUILDINGS
AGRICULTURAL				
CONSERVATION				
RESIDENTIAL	Х	Townhouse Development	1 Lot / 8 Units	N/A
COMMERCIAL				
INDUSTRIAL				
INSTITUTIONAL				
MUNICIPAL				
OTHER				
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TOTAL LAND AREA (ACRES): <u>1.12 Acres</u>	RESIDENTIAL DENSITY: 7.14 units/acre
TOTAL LAND AREA BEING DEVELOPED:	CresTOTAL PHASES: 1
TOTAL LENGTH OF NEW ROADS (LINEAR FEET):	N/A
-PROPOSED METHOD OF SEWAGE DISPOSAL:	Public
PROPOSED METHOD OF WATER SUPPLY:	Public

TEN COMPLETE SETS OF PLANS, ONE ORIGINAL APPLICATION AND THREE COPIES OF ALL SUPPLEMENTAL DOCUMENTS OR REPORTS SHALL BE SUBMITTED TO CALN TOWNSHIP IN ACCORDANCE WITH THE PROCEDURES ADOPTED BY THE CALN TOWNSHIP BOARD OF COMMISSIONERS. THE FOLLOWING INFORMATION HAS BEEN SUBMITTED WITH THIS APPLICATION:					
TITLE OF SUBMISSION AND DESCRIPTION CONTENTS	COPIES	REFERENCE NUMBER	DATE		
Sketch Plan For Proposed 15 Fox Avenue Development	5		03/15/18		



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253 Municipal Dr, PO Box 72149, Thorndale, PA 19372 Phone: 610-384-0600 | Fax: 610-384-0617 www.calntownship.org

 I <u>David Bollinger</u> (AUTHORIZED REPRESENTATIVE OF THE APPLICANT) HEREBY REQUEST REVIEW OF THIS APPLICATION BY CALN TOWNSHIP. TO THE BEST OF MY KNOWLEDGE, ALL OF THE INFORMATION CONTAINED WITHIN THIS APPLICATION IS TRUE, CORRECT AND COMPLETE. FURTHER, I HEREBY AGREE TO THE FOLLOWING SPECIFIC TERMS AND CONDITIONS: I HEREBY PERMIT ANY ELECTED, APPOINTED AND/OR ASSIGNED STAFF MEMBER OF CALN TOWNSHIP TO ENTER THE EXTERIOR PREMISES OF THE PROPERTY, IN WHICH THIS APPLICATION PERTAINS, FOR THE PURPOSES OF CONDUCTING SITE INSPECTIONS WHILE THE PROPOSED APPLICATION IS BEING CONSIDERED BY CALN TOWNSHIP. I HEREBY AGREE TO PAY ALL CONSULTANT, ADMINISTRATIVE AND/OR APPLICATION FEES REQUIRED FOR THE REVIEW OF THIS APPLICATION. I HEREBY AGREE TO COMPLETE AND SUBMIT TO CALN TOWNSHIP, THE CHESTER COUNTY REFERRAL FORM AND APPLICABLE FEES WITH THIS APPLICATION. 				
SIGNATURE OF APPLICANT OR AUTHORIZED	 DATE OF APPLICATION			
SIGNATURE OF WITNESS	<u>11/5/18</u> DATE			
FOR MUNICIPAL USE ONLY AUTH	IORIZED STAFF MEMBER:			
APPLICATION NAME:	APPLICATION #			
SUBMISSION DATE:	SUBMISSION NUMBER:			
CALN TWP. FEE: CH	ECK NUMBER: DATE:			
CHESTER COUNTY PC FEE:	OTHER APPLICATION FEES:			
DATE APPLICATION WILL BE REVIEWED BY TOWNSHIP PLANNING COMMISSION:				
APPLICATION COMPLETENESS REVIEW:	DATE:			