

APPENDIX NO. 1

CERTIFICATION OF ACCURACY (PLAN)

I hereby certify that, to the best of my knowledge, the plan shown and described hereon is true and correct to the accuracy required by the Adamstown Borough Subdivision and Land Development Ordinance.

_____, 19____ * _____

*Signature and seal of a professional registered in the Commonwealth of Pennsylvania qualified to perform such duties and responsible for the preparation of the plan.

APPENDIX NO. 2

CERTIFICATION OF ACCURACY (SURVEY)

I hereby certify that, to the best of my knowledge, the survey shown and described hereon is true and correct to the accuracy required by the Adamstown Borough Subdivision and Land Development Ordinance.

_____, 19____ * _____

*Signature and seal of a professional registered in the Commonwealth of Pennsylvania qualified to perform such duties and responsible for the preparation of the plan.

APPENDIX NO. 3

STORM DRAINAGE PLAN CERTIFICATION

I hereby certify that, to the best of my knowledge, the storm drainage facilities shown and described hereon are designed in conformance with the Adamstown Borough Subdivision and Land Development Ordinance.

_____, 19____ * _____

*Signature and seal of a professional registered in the Commonwealth of Pennsylvania qualified to perform such duties and responsible for the preparation of the storm drainage plan.

APPENDIX NO. 4

CERTIFICATE OF OWNERSHIP, ACKNOWLEDGMENT OF PLAN
AND OFFER OF DEDICATION

COPARTNERSHIP

COMMONWEALTH OF PENNSYLVANIA

COUNTY OF LANCASTER

On this, the _____ day of _____, 19____, before me, the undersigned officer, personally appeared _____, being the members of the firm of _____ who being duly sworn according to law, deposes and says that the copartnership is the * _____ of the property shown on this plan, that the plan thereof was made at its direction, that it acknowledges the same to be its act and plan that all necessary approval of the plan has been obtained and is endorsed thereon, and desires the same to be recorded, and that all streets and other property identified as proposed public property (excepting those areas labeled "NOT FOR DEDICATION") are hereby dedicated to the public use.

** _____

*** _____

My Commission Expires _____, 19_____

- * Identify Ownership or Equitable Ownership
- ** Signature of the Individual
- *** Signature and Seal of Notary Public or Other Officer Authorized to Acknowledge Deeds.

APPENDIX NO. 5

**ADAMSTOWN BOROUGH COUNCIL
PRELIMINARY PLAN APPROVAL CERTIFICATE**

At a meeting on _____, 19_____, the Adamstown Borough Council granted PRELIMINARY PLAN APPROVAL of this project, including the complete set of plans marked sheet(s) _____ through _____ which form a part of the application dated _____, last revised _____, and bearing Adamstown Borough File No. _____. This plan may not be recorded in the office of the Lancaster County Recorder of Deeds, nor may any construction be initiated.

BOROUGH OF ADAMSTOWN Lancaster and Berks Counties, Pennsylvania

Attest: _____
(Assistant) Secretary

By: _____
(Vice) President
Borough Council

[BOROUGH SEAL]

APPENDIX NO. 6

**ADAMSTOWN BOROUGH COUNCIL
IMPROVEMENT CONSTRUCTION PLAN APPROVAL CERTIFICATE**

At a meeting on _____, 19_____, the Adamstown Borough Council granted IMPROVEMENT CONSTRUCTION PLAN APPROVAL of this plan, bearing Adamstown Borough File No. _____. When combined with the necessary Borough and/or Commonwealth approvals and permits, this approval grants the authority to install the improvements required by the Adamstown Borough Subdivision and Land Development Ordinance. This plan may not be recorded in the office of the Lancaster County Recorder of Deeds.

BOROUGH OF ADAMSTOWN Lancaster and Berks Counties, Pennsylvania

Attest: _____
(Assistant) Secretary

By: _____
(Vice) President
Borough Council

[BOROUGH SEAL]

APPENDIX NO. 7

**ADAMSTOWN BOROUGH COUNCIL
FINAL PLAN APPROVAL CERTIFICATE**

At a meeting held on _____, 19____, the Adamstown Borough Council approved this project including the complete set of plans and information which are filed with the Borough Council in File No. _____ based upon its conformity with the standards of the Adamstown Borough Subdivision and Land Development Ordinance.

BOROUGH OF ADAMSTOWN Lancaster and Berks Counties, Pennsylvania

Attest: _____
(Assistant) Secretary

By: _____
(Vice) President
Borough Council

[BOROUGH SEAL]

APPENDIX NO. 8

**ADAMSTOWN BOROUGH COUNCIL
APPROVAL CERTIFICATE FOR A LOT ADD-ON PLAN**

This lot add-on plan, bearing Adamstown Borough File No. _____, approved by the Adamstown Borough Council this _____ day of _____, 19____.

BOROUGH OF ADAMSTOWN Lancaster and Berks Counties, Pennsylvania

Attest: _____
(Assistant) Secretary

By: _____
(Vice) President
Borough Council

[BOROUGH SEAL]

APPENDIX NO. 9

ADAMSTOWN BOROUGH PLANNING COMMISSION
REVIEW CERTIFICATE

At a meeting held on _____, 19_____, the Adamstown Borough Planning Commission reviewed this plan and a copy of the review comments is on file in the Borough office.

* _____

* _____

*Signatures of the Chairman and Secretary or their designees.

APPENDIX NO. 10

**LANCASTER COUNTY PLANNING COMMISSION
REVIEW CERTIFICATE**

The Lancaster County Planning Commission, as required by the Pennsylvania Municipalities Planning Code, Act 247 of 1968, as amended, reviewed this plan on _____, 19 _____, and a copy of the review is on file at the office of the Planning Commission in LCPC File No. _____. This certificate does not indicate approval or disapproval of the plan by the Lancaster County Planning Commission, and the Commission does not represent nor guarantee that this plan complies with the various ordinances, rules, regulations, or laws of the local municipality, the Commonwealth or the Federal government.

* _____

* _____

*Signatures of the Chairman and Vice Chairman or their designees.

APPENDIX NO. 11

RECORDER OF DEEDS CERTIFICATE

Recorded in the office for Recording of Deeds, in and for Lancaster County, Pennsylvania, in Subdivision Plan Book _____, Volume _____, Page _____. Witness by hand and seal of office this _____ day of _____ A.D. 19_____.

Recorder