

# ARCHITECTURAL/LANDSCAPE REVIEW

ALL ITEMS ON THIS FORM MUST BE COMPLETED.

PLEASE TYPE OR PRINT CLEARLY

DEVELOPMENT/APPLICANT'S NAME \_\_\_\_\_

APPLICANT'S ADDRESS \_\_\_\_\_

PHONE NO. \_\_\_\_\_

BLOCK NUMBER \_\_\_\_\_ LOT NUMBER \_\_\_\_\_ TAX MAP SHEET \_\_\_\_\_

PROPERTY ADDRESS \_\_\_\_\_

ARCHITECTURAL PLANS PREPARED BY: \_\_\_\_\_

SHEET # \_\_\_\_\_ TITLE \_\_\_\_\_ DATE \_\_\_\_\_ DATE LAST REVISED \_\_\_\_\_

Overall Appearance  
(does building enhance surrounding area, silhouette, type of building)

Photos of Similar Buildings at other Locations YES/NO \_\_\_\_\_

(If available, attach to back of this form)

Siding  
(Wall panel type, color, supplier, Manufacturer, Location on Structure)

Block  
(unpainted/painted, type, color, Manufacture, location on building, split-face, fluted, etc.)

Paint Colors (supplier, Location on Building)

Columns Supporting Canopy (type, color, covering)

Window (details, color and type of trim, manufacturer)

Doors (material, color, etc.)

Trim/Fascia

Roof Shingle (type, color, sample, weight)

Roof Leaders

(location, type, how many, color, supplier, gauge, disposition of runoff)

Gutters (color, materials, location)

HVAC units (location, screening, noise)

Refuse Area (location, screening) \*

\*Applicant is advised to contact the Planning Board's Staff for suggestions in Locating Refuse Area and compiling Refuse Area Detail.

Small Refuse Containers

(type, color, covering, supplier, amount, location, near building and throughout Parking area if necessary.)

Cart Corrals (location, details)

BOLLARDS (type, location, amount)

Sign

(Wall mounted, ground mounted, colors, type, material, nature of construction, Square footage required and provided, setback required and provided lettering, items of information) (typical location of wall mounted signs must be shown on architectural plans and conform to the Dover Township Land Use and Development Regulations.)

Handicap Ramps (size height, type and location of railings; height ramp and platforms)

Light (type, colors, standards, lens color, details, location on building and site.)

Landscaping

(indigenous planting; ground cover types; and location of sprinklers; maintenance; Schedule of quantity, type, common name, botanical name, size, screening plants around refuse area.

LANDSCAPE PLANS PREPARED BY: \_\_\_\_\_

SHEET #                      TITLE                      DATED                      DATE LAST REVISED

NOTE: A landscape schedule/table shall be included on the plan.

Utility Services (meter locations)

Contact person(s) responsible for construction and eventual maintenance:  
(Name, Phone Number, Address)

NAME \_\_\_\_\_

ADDRESS \_\_\_\_\_

PHONE NUMBER \_\_\_\_\_

Comments: (Applicant must use this space to give a brief description of the proposal or provide additional information relative the proposed architectural and or landscape improvements.)

APPLICANT'S REPRESENTATIVES ATTENDING MEETING:

| NAME | ADDRESS | TELEPHONE # |
|------|---------|-------------|
|------|---------|-------------|

ALL ITEMS MUST BE COMPLETED BY APPLICANT BEFORE MEETING IS SCHEDULED WITH THE BOARD.

\*\*\*\*\* DO NOT WRITE BELOW THIS LINE. FOR BOARD USE ONLY.\*\*\*\*\*

File Name (Applicant):

Date of Meeting:

Committee Members Present:

Staff Members Present:

Additional notes/minutes: