

**CHANCEFORD TOWNSHIP**

**Request for Building Rights Determination**

Requestor Name: \_\_\_\_\_

Address: \_\_\_\_\_

Phone: \_\_\_\_\_

Email: \_\_\_\_\_

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Address of Property requested: \_\_\_\_\_

Owner of Property: \_\_\_\_\_

Parcel No. \_\_\_\_\_

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Address of Property requested: \_\_\_\_\_

Owner of Property: \_\_\_\_\_

Parcel No. \_\_\_\_\_

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**\*Chanceford Township charges \$125 per parcel for building rights determination\***

*Please make checks payable to: Chanceford Township*

I request the following determination be sent to me at: \_\_\_\_\_

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For Township use only:

Payment received:

Yes

No