



DEVELOPMENT INFORMATION SHEET

CONTACT INFORMATION	
DEVELOPER Company _____ Contact _____ Phone _____ Email _____ Federal ID Number _____	SITE CONSULTING ENGINEER Company _____ Contact _____ Phone _____ Email _____
DEVELOPMENT INFORMATION	
Development Name _____	
Road Name (number) where entrance is located _____	
Has a County Approved site plan been submitted?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Has an AutoCAD drawing been submitted?	<input type="checkbox"/> Yes <input type="checkbox"/> No
- If Yes, is the drawing in State Plane Coordinates?	<input type="checkbox"/> Yes <input type="checkbox"/> No
How many proposed lots will the development have? _____	
Will the Development be split into construction phases?	<input type="checkbox"/> Yes <input type="checkbox"/> No
- What construction phase is currently being requested? _____	
- How many lots will be in the requested phase? _____	
- What are the lot numbers in this phase? _____	
- Target date for site to be within 6-in of final grade _____	
Will there be a Wastewater Pump Station on-site?	<input type="checkbox"/> Yes <input type="checkbox"/> No
- If Yes, has a Load Sheet been submitted?	<input type="checkbox"/> Yes <input type="checkbox"/> No
- If Yes, what phase will it be constructed in? _____	
Will there be a Clubhouse on-site?	<input type="checkbox"/> Yes <input type="checkbox"/> No
- If Yes, has a Load Sheet been submitted?	<input type="checkbox"/> Yes <input type="checkbox"/> No
- If Yes, what phase will it be constructed in? _____	

Please note: In addition to completing the above, please review the DEVELOPER CHECKLIST as there is detailed information in the checklist pertaining to the submittals.

Developers will be required to complete a DEVELOPMENT INFORMATION SHEET for each phase of construction.

The developer shall be responsible for any damage to DEC's equipment where the party at fault can't be determined. This will be in effect until the development is turned over to the HOA.

Applicant's Name _____

Date _____

Signature _____

Company Name _____

Company Address _____

Date you require the estimate from DEC _____

Questions? Please contact New Service Department: nservices@delaware.coop -or- 302.349.9090 x-258

FOR OFFICE USE ONLY	
Work Order Number _____	
Field Engineer Assigned to Work Order _____	
Form Revised 2/2023	