

Certificate of Compliance

(for Administrative Subdivisions)

Township of Avon

Legal description of property to be certified (*attach if necessary*):

Name of property owner(s): _____

Mailing address: _____

City: _____ State: _____ Zip code: _____

I, chairperson of the Avon Township Board of Supervisors, hereby certify that the property owner(s), or a designated legal representative, on _____ (*insert date*), requested necessary action of said commission to certify that the administrative subdivision of the above described property is in compliance with applicable Avon Township ordinances and related documents in effect on the signature date.

I further certify that the Avon Township Board of Supervisors, on _____ (*insert date*), approved the administrative subdivision of this property as being in compliance with requirements of Avon Township ordinances and related documents in effect on the signature date, subject to the following conditions:

Chair name (*print*): _____

Chair signature: _____

Date: _____

Fee : _____