

**SUBMITTAL CHECKLIST: PETITION FOR MUNICIPAL PLAN CONFORMANCE**

Washington Township, Warren County		(√) or N/A
1.	<b>Cover Letter.</b> Identifies portion of municipality for which Plan Conformance required, municipal point of contact.	√
2.	<b>Submittal Checklist.</b> This completed Plan Conformance Checklist.	√
3.	<b>Preservation Area Resolution.</b> Certified governing body resolution submitting the proposed planning program revisions and petitioning the Highlands Council for Plan Conformance.	√
4.	<b>Planning Area Resolution.</b> For Planning Area lands, copy of adopted ordinance petitioning the Highlands Council for a determination of conformance with the Regional Master Plan (may also include Preservation Area).	N/A
5.	<b>Record of Public Involvement.</b> A summary of public involvement in the development of materials for the Petition for Plan Conformance.	√
6.	<b>2009 Plan Conformance Grant Program Documents.</b> Materials from the results of Modules 3 through 6 of the 2009 Plan Conformance Grant Program as detailed in Appendix E, plus proposed substantive revisions, updates or supplements required for Plan Conformance.	√
7.	<b>List of Current Municipal Planning and Regulatory Documents.</b> A list of existing municipal planning and regulatory documents with the dates of most recent adoption.	√
8.	<b>Municipal Self-Assessment Report.</b> Report discussing: a) progress made toward achieving Plan Conformance as of the date of petition; b) steps remaining to achieve Full Plan Conformance; and c) general plan and anticipated timeframe for completion (including Appendix A, Self-Assessment Report Status of Checklist Items).	√
9.	<b>Implementation Plan and Schedule.</b> Proposed Highlands Implementation Plan and Schedule charting outstanding items on timeline and specifically indicating the completion and implementation dates for each (including Appendix A Implementation Plan and Schedule).	√
10.	<b>RMP Updates (Optional).</b> If applicable, updates to RMP maps, charts, and technical data along with verifiable documentation in support. If none are requested, indicate "N/A," not applicable.	N/A
11.	<b>Map Adjustments (Optional).</b> If applicable, requests for changes in Land Use Capability Zone Map designations along with information, justification, and evidence in support of same. If none are requested, indicate "N/A," not applicable.	N/A
12.	<b>Additional Supporting Materials (Optional).</b> Materials in support of Plan Conformance.	N/A