Gateway to the Redwoods

CITY OF WILLITS

COMMUNITY DEVELOPMENT DEPARTMENT

111 E COMMERCIAL STREET, WILLITS CA 95490 • PHONE: (707) 459-7112 • FAX: (707) 459-1562

APPLICATION FOR BOUNDARY LINE ADJUSTMENT

B.L.A. Number: _____ Date Filed:_____

APPLICANT

Name_____

Mailing Address _____

City _____State _____ Zip Code _____

Phone _____Email _____

PROPERTY OWNER

Name_____

Mailing Address _____

City _____State _____ Zip Code _____

Phone _____Email _____

Who shall be listed as the Primary Contact for the Permit Application?

☐ **Applicant** ☐ **Other**

If Other, provide Name, Phone Number and Email of Primary Contact:

_____

LOCATION OF PROJECT

Street Address _____

Assessor's Parcel Number(s) _____

Zoning Designation _____ Parcel Size _____

PROJECT DESCRIPTION

_____

_____

_____

_____

_____

Title Company

Name____

Mailing Address ____

City ______________________State __________ Zip Code __________

Phone _____________Email ______________________________

Surveyor or Engineer

Name____

Mailing Address ____

City ______________________State __________ Zip Code __________

Phone _____________Email ______________________________

- -

1.	Existing Lot Size	Proposed Lot Size	Existing Land Use
Lot 1	________________	________________	________________
Lot 2	________________	________________	________________

2. Is an exception required to any of the zoning regulation?

   Yes __________ No __________

   If yes, a letter stating reasons for the exceptions must accompany this application.

3. Will this application necessitate the filing of a General Plan Amendment, Rezoning, Use Permit or Variance application(s) to permit the proposed use of land and structures?

   Yes __________ No __________

If yes, an application(s) requesting General Plan Amendment, Rezoning, Use Permit, Variance, etc. must accompany the Boundary Line Adjustment application.

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SPECIFIC PROCEDURES FOR PROCESSING A BOUNDARY LINE ADJUSTMENT MAP

The following procedure shall be used to accomplish, and shall apply to any Boundary Line Adjustment.

THE FOLLOWING INFORMATION SHALL BE ON THE TENTATIVE MAP:

FORM – The tentative map shall be a sketch clearly and legibly drawn. The minimum sheet size shall be 8 ½ x 11 inches. The minimum scale shall be one inch equals one hundred feet (1" = 100) unless otherwise approved by the City Engineer.

CONTENT OF THE MAP – The tentative map of a Boundary Line Adjustment shall contain the following information:

1. A site sketch showing the location of affected properties.
2. Assessor's parcel numbers of affected properties.
3. Names, addresses, and phone numbers of affected property owners and their agent.
4. Date map was prepared, north point, and scale.
5. Name, business address and registration number of the civil engineer or land surveyor who prepared the map.
6. The approximate location of all existing or proposed easements together with the purpose thereof.
7. Proposed boundary line adjustment showing approximate location of existing and proposed property boundaries.
8. The outline of any existing buildings, fences, and permanent improvements, identification of those to remain in place, and their locations relative to existing or proposed streets or lot boundaries.
9. The location, character, and identification of all existing public utility facilities on the property or on adjoining properties and on contiguous streets, and the locations and widths of all existing and proposed easements.
10. The locations, names or other approved identification, widths, approximate grade and curve radii of all streets, highways, and ways within the property and immediate vicinity.

MATERIAL REQUIRED FOR SUBMISSION OF A BOUNDARY LINE ADJUSTMENT

_____ Boundary Line Adjustment application fully completed.

_____ One (1) hard copy and one electronic copy of the Tentative Map legibly drawn at a workable scale.

_____ Filing Fee: $350.00.

_____ Revised deeds and legal descriptions.

CERTIFICATION AND AUTHORIZATION

1. I hereby certify that I have read this completed application and that, to the best of my knowledge, the information is this application, and all attached appendices and exhibits, is complete and correct. I understand that the failure to provide any requested information of any misstatements submitted in support of the application shall be grounds for either refusing to accept this application, for denying the permit, for suspending or revoking a permit issued on the basis of such misrepresentatives, or for seeking of such further relief as may seem proper to the City.

2. I hereby grant permission for City staff and hearing bodies to enter upon and site view the premises for which this application is made in order to obtain information necessary for the preparation of required reports and render its decision.

_____ _____

Owner/Authorized Agent Date

NOTE: IF SIGNED BY AGENT, <u>OWNER</u> MUST SIGN BELOW

<u>AUTHORIZATION OF AGENT</u>

I hereby authorize _____ *to act as my representative and to bind me in all matters concerning this application.*

_____ _____

Owner Date