



Name: \_\_\_\_\_  
Property Owner (1) Signature Date

Phone Number: \_\_\_\_\_ Email Address: \_\_\_\_\_

Name: \_\_\_\_\_  
Property Owner (2) Signature Date

Phone Number: \_\_\_\_\_ Email Address: \_\_\_\_\_

### FOR DEPARTMENTAL USE ONLY

**Fees:** (Refer to Master Fee Schedule)

- ☐ \$ \_\_\_\_\_, Lot Line Adjustment Fee  
☐ \$ \_\_\_\_\_, Other

**Application complete:**

☐ Date: \_\_\_\_\_ Staff Member \_\_\_\_\_

**Processing:** In order to expedite this Lot Line Adjustment Application, and to eliminate unnecessary delays, Planning Staff will not accept this application unless all items have been checked off, the application form has been signed and dated, and fees have been paid.

\*\*\*\*\*In the event errors or omissions are discovered, the application will be deemed incomplete and will be returned to the applicant for revision. A Lot Line Adjustment public hearing will be scheduled for the Planning Commission when the application has been accepted as complete.\*\*\*\*\*