

BOUNDARY LINE ADJUSTMENT

Permit# _____

Property description (address) for application _____

General information

Applicant _____ Day phone# _____

Address _____

Owner of record (attach affidavit if not applicant)

Name _____ Day Phone# _____

Address _____

Applicant's agent (s)

Name _____ Day phone # _____

Address _____

Property information

Zoning District _____ Current Land Use _____

Surrounding zoning: North _____ South _____ East _____ West _____

Surrounding use: North _____ South _____ East _____ West _____

Tax Map page # _____ Lot # _____ Lot size/sq ft. _____

Lot coverage (include all structures and impervious surfaces)

Existing (sq ft.) _____ plus proposed _____ (sq. ft) equals _____ total sq. fit.

Divided by _____ lot sq. ft. equals _____ percent lot coverage.

Briefly describe your proposal: _____

I certify that the information on this application is true and correct. I agree to abide by all the rules and regulations as specified in the Land Development Code and any conditions placed upon approval of this application.

Applicant_____
Date_____
Landowner (if different)_____
Date**Staff Action**

Date received _____ Approved _____ Denied _____

Other approvals/conditions: _____

Staff signature_____
Date

Fee Amount:

\$110.00

Fee Verified _____