

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:
\$115.00

Fee Verified _____