Carbon County Planning & ZoningLot Line Adjustment Application



Name:	
Zone:	
Parcel /Tax ID	
Date Received	
Reviewed By:	
Date Completed:	
Date Recorded:	

Application Fee-NO FEE

Full Name				Date	
Full Name				<u>Date</u>	
Address					
	Street	City	Zip		
Phone		1	Email Addres	55:	
<u>Signature</u>		Signature			
Full Name				Date	
Address					
	Street		City	Zip	
Phone			Email Addres	SS:	

Carbon County Planning & ZoningLot Line Adjustment Application



Location Info:					
Street Addr	ess C	ity	Zip		
Parcel # (s)	Section	/Township/Ran	ge	Zo	ne
<u>brief description o</u> :	f project:				
Name	Address/Phone	Parcel#	Current Acres	Proposed Acres	Zone

The below checklist must be included with your application with all items checked off as complete or your application will not be processed.

Carbon County Planning & Zoning

Lot Line Adjustment Application



To Consider a Lot Line Adjustment the proposal must be in compliance with the following:

□ Provide a copy of agreement between owners of adjacent properties adjusting their mutual boundary

No new dwelling lot or housing unit will result fro	
	m the adjustment AND;
The adjustment will not violate any applicable la	nd use ordinance.
 The lots are not in a recorded Subdivision 	
This application must contain the following:	
□ Complete Application and checklist, with all appropriate	documentation;
$\ ^{\square}$ Provide a copy of the plat as it is now recorded with the	Carbon County Recorder
□ Provide the new legal descriptions from a licensed certification	ed surveyor and copies of documents (deeds) to be
recorded;	
□Provide a drawing of the proposed Lot Line Adjustment,	including:
□Acreage of each lot;	
Lot line dimensions;	
□Existing structures;	
Septic tanks; and	
Drainfields.	
Planning and Zoning Administrator	 Date
Planning and Zoning Administrator Please Read and Sign Before	
	re Application Submittal nuthorized agent of the property subject to this request uments are true and correct. I also certify that I have eve listed items other than those specifically deemed ant for this proposal, I understand that applications t staff. If complete, the application will be vested ation was submitted. Incomplete applications will be
Please Read and Sign Beform I declare under penalty of perjury that I am the owner or a and the foregoing statements, answers and attached door fully completed the application and provided all of the about not necessary by the Planning Department. As the application will be reviewed for completeness by planning department under laws and ordinances in place at the time the application returned to the applicant. I further understand I will be no complete. Signature of	re Application Submittal authorized agent of the property subject to this request uments are true and correct. I also certify that I have ove listed items other than those specifically deemed ant for this proposal, I understand that applications it staff. If complete, the application will be vested ation was submitted. Incomplete applications will be tified when my application has been deemed
Please Read and Sign Beform I declare under penalty of perjury that I am the owner or a and the foregoing statements, answers and attached door fully completed the application and provided all of the about not necessary by the Planning Department. As the application will be reviewed for completeness by planning department under laws and ordinances in place at the time the application returned to the applicant. I further understand I will be no complete.	re Application Submittal authorized agent of the property subject to this request uments are true and correct. I also certify that I have ove listed items other than those specifically deemed ant for this proposal, I understand that applications it staff. If complete, the application will be vested ation was submitted. Incomplete applications will be tified when my application has been deemed