

**APPLICATION FOR**

**LOT LINE ADJUSTMENT (\$150)**

Property Owner: \_\_\_\_\_

Phone Number: \_\_\_\_\_

Property Address: \_\_\_\_\_

Parcel Number: \_\_\_\_\_

Size of lot to be divided: \_\_\_\_\_

Number of lots: \_\_\_\_\_

Size of new lots: \_\_\_\_\_

Reason for dividing property: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

Parcel Descriptions:

Parcel "A"

Old: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

New: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

Parcel "B"

Old: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

New: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
Name of Surveyor: \_\_\_\_\_

Phone Number: \_\_\_\_\_

Date of Survey: \_\_\_\_\_

Date of Application: \_\_\_\_\_

Signature of Property Owner(s): Parcel "A" \_\_\_\_\_

Parcel "B" \_\_\_\_\_

State of Washington    )  
                                  ) ss.  
County of Pierce        )

I certify that I know or have satisfactory evidence that \_\_\_\_\_, \_\_\_\_\_ are the persons who appeared before me, and that he/she signed this instrument and acknowledged it to be his/her free and voluntary act for the uses and purposes mentioned in the instrument.

Dated: \_\_\_\_\_

\_\_\_\_\_

Notary

My appointment expires:

\_\_\_\_\_

To be completed by the City Clerk.

Completeness Checklist (as per Ordinance No. 629):

- Two completed applications.
- Three copies of lot line adjustment map with legal descriptions in accordance with adopted standards.
- Amount of filing fee (\$150.00).
- Certificate of title from reputable title company containing a legal description of the property on both sides of the lot line to be adjusted and confirmation that the title of the property belongs to the applicants.

\_\_\_\_\_  
City Clerk

\_\_\_\_\_  
Date

To be completed by the City Planner.

\_\_\_ Neither of the two lots affected is made substandard with respect to the requirements for lot size and dimensions.

\_\_\_ No existing building or structure is made substandard or nonconforming in any respect.

\_\_\_ Existing easements are not jeopardized or rendered impractical to serve their intended purpose.

This application does not meet the requirement of the City of Roy and is denied for the following reasons:

\_\_\_\_\_  
\_\_\_\_\_

This application meets all the requirements of the City of Roy and is subject to appeal for 20 days.

\_\_\_\_\_  
City Planner

\_\_\_\_\_  
Date

If not appealed to the City Clerk by twenty days from the above date, this application is preliminarily approved for purposes of filing as required by Pierce County (filing fees are to be paid by the applicant) and will be finalized when a copy of the recorded map is returned to the City of Roy.