



CITY OF PORT ORCHARD

Permit Center

Office located at 720 Prospect Street
 Mailing address: 216 Prospect Street
 Port Orchard, WA 98366
 (360) 874-5533 • permitcenter@cityofportorchard.us

BOUNDARY LINE ADJUSTMENT APPLICATION

<i>For Staff Use Only</i>	File #:	Receipt #:
---------------------------	---------	------------

Incomplete Application Will Not Be Accepted

<u>1. PROPERTY INFORMATION.</u>		
General Location of Property:		
Property area:	sq.ft.	Zoning Classification:
Smallest proposed lot area:	sq.ft.	Comp. Plan Designation:
Average Lot size:	sq.ft.	Proposed Access:
Number of parcels:		Nearest intersection:
Nearest intersection:		
Section:	Township:	Range:
<u>2. PROJECT INFORMATION.</u>		
Current Use of Property <i>(Please describe and include any existing structures):</i>		
Proposed Use of Property <i>(Please describe):</i>		
Reason for Boundary Line Adjustment:		
<u>3. SUBMITTAL REQUIREMENTS.</u>		
<i>Electronic submittals are required. Contact the Permit Center for formatting and resolution requirements.</i>		
Check the box for each item included with this application:		

This application shall include the following, unless specifically waived by DCD. Other documentation may be required in addition to what is listed.

- The Master Permit Application Form**, completed.
- Boundary Line Adjustment Application** (*this form*), completed. Include the **original** signed and notarized Owner Statement.
- A Title Report**, dated by the title company within thirty (30) days of the date of this application submission, confirming that the title of the property is in the name of the owner.
- A vicinity map**, 8 ½" x 11":
 - Include North arrow.
 - Site must be clearly marked.
 - Show site in relation to the nearest major streets, roads and waterways in the area.
- Legal Descriptions** of the existing property configuration and proposed property configuration.

- Map Sets** depicting the existing and proposed property configurations on separate sheets:
 - Prepared by a licensed professional land surveyor.
 - Scaled to not less than one inch equal to 100 feet.
 - Print to scale at 18" x 24" or larger.
 - North arrow and scale on all sheets.
 - The proposed property configuration, including all lot line dimensions, names and locations of existing roads, structures and easements, with lines marking the original boundaries of the site.
 - The proposed property configuration, including all lot line dimensions, names and locations of existing or proposed roads and easements within or adjacent to the tract, the location(s) of existing structures within the tract, and the location(s) of all utilities.

OWNER

SELECT THE APPROPRIATE STATEMENT:

- I affirm that the property affected by this application is in my exclusive ownership.
- I affirm that the property affected by this application is not in my exclusive ownership. This application is submitted with the consent of all owners of the affected property.

IF AN AGENT IS SUBMITTING THIS APPLICATION ON YOUR BEHALF, complete this verification statement:

As the record owner of the property listed above, I authorize _____,
 as my Authorized Agent to submit this application on my behalf. *Print name*

The application as completed is true and correct to the best of my knowledge.

 Signature of Owner (Must be notarized)

 Print Name of Owner

 Date

STATE OF WASHINGTON)
) SS
 COUNTY OF KITSAP)

I certify that I know or have satisfactory evidence that _____
 is the person who appeared before me, and said person acknowledged 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.

WITNESS MY HAND AND OFFICIAL SEAL this _____ day of _____, 20____.

 NOTARY PUBLIC in and for the
 State of Washington, residing at

 My appointment expires:
