

LOT LINE ADJUSTMENT APPLICATION

APNs: _____; _____; _____
(Assessor's Parcel Numbers may be obtained from the Assessor's Office, 831/454-2002)

Property Address: _____ CITY: _____ CA ZIP: _____

Property Location: (If no address) _____

APPLICANT (Authorized Agent), NAME if different from Owner _____		
APPLICANT MAILING ADDRESS _____		
CITY/STATE _____	ZIP _____	EMAIL _____
PHONE NO. (____) _____	FAX NO. (____) _____	CELL NO. (____) _____
<i>A signed Owner/Agent Approval form (attached) must be submitted prior to application by anyone other than the owner.</i>		

OWNER NAME _____	APN: _____	
OWNER MAILING ADDRESS _____		
CITY/STATE _____	ZIP _____	EMAIL _____
PHONE NO. (____) _____	FAX NO. (____) _____	CELL NO. (____) _____

OWNER NAME _____	APN: _____	
OWNER MAILING ADDRESS _____		
CITY/STATE _____	ZIP _____	EMAIL _____
PHONE NO. (____) _____	FAX NO. (____) _____	CELL NO. (____) _____

Add additional sheets as necessary.

Proposal to transfer:

_____ sq.ft. / ac. from APN _____ to APN _____,
_____ sq.ft. / ac. from APN _____ to APN _____,
_____ sq.ft. / ac. from APN _____ to APN _____,
_____ sq.ft. / ac. from APN _____ to APN _____,

resulting in (2) (3) (4) parcels of _____ sq.ft. / ac., _____ sq.ft. / ac.,
_____ sq.ft. / ac., _____ sq.ft. / ac., respectively. State purpose of
adjustment here:

BUILDABILITY DETERMINATION REQUIRED OTHER PERMIT REQUIREMENTS (List)

APPLICANT'S SIGNATURE

I certify that I am the applicant and that the information submitted with this application is true and accurate to the best of my knowledge and belief. I understand that the County of Santa Cruz is not responsible for inaccuracies in information presented, and that inaccuracies may result in the revocation of planning permits as determined by the Planning Director. I further certify that I am the owner or purchaser (or option holder) of the property involved in this application, or the lessee or agent fully authorized by the owner to make this submission, and that proof of such is on file with the Zoning Section.

I understand that the County of Santa Cruz has attempted to request everything necessary for an accurate and complete review of your proposal; however, after Planning staff has taken in the application and reviewed it further, it may be necessary to request additional information and clarification. I authorize County staff to enter the property involved in this application to conduct site visits necessary for the processing of my application.

Signature of Owner or Authorized Agent

Date



COUNTY OF SANTA CRUZ

PLANNING DEPARTMENT

701 OCEAN STREET, 4TH FLOOR, SANTA CRUZ, CA 95060
(831) 454-2580 FAX: (831) 454-2131

OWNER-AGENT APPROVAL FORM

For persons other than the owner who wish to obtain a building, development or other permit, owner approval is required. This is the County's authorization to issue a permit to the agent listed below:

Agent: **Name:** _____

Address: _____

City: _____

State/Zip Code: _____

Telephone: __ (____) _____

Email: _____

Owner: **Name:** _____

Address: _____

City: _____

State/Zip Code: _____

Telephone: __ (____) _____

Email: _____

Date:

Signature of Owner

Assessor's Parcel Number(s)

Project Location

Note: One Owner-Agent form will be required for each permit required. In the case where there is more than one owner of a parcel, the owner signing this form represents that he/ she has the consent from all other owners of the parcel. For development permits, by signing this form, the owner is authorizing the agent to legally bind the owner to responsibility for payment of the County's cost for inspections and all other actions related to noncompliance with permit conditions. The agent will be required to provide the department with proof of service by mail, that the owner was mailed a copy of the executed acceptance of permit conditions. Finally, by signing this form, the owner is designating the agent as their Agent for Service of Process for all matters relating to this application.

****Any refunds will be made to whomever made the payment**

LOT LINE ADJUSTMENT

LIST OF REQUIRED INFORMATION (PAGE 1 OF 2)

Submitted materials shall include the following information.

Plans shall be submitted in full size plan sets (24" x 36" or 18" x 24" format) If comprising multiple sheets, plans must be stapled together with site plan on top and folded (as shown on the plan folding instructions brochure).

ALL PLANS

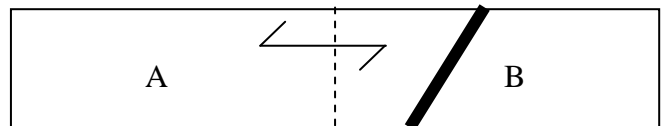
- Application packet (please do not unclip or separate sheets).
- Assessor's Parcel Number on every sheet.
- Name, address, phone, fax and cell numbers and e-mail address of applicant, plan preparer and owners.
- Scale and north arrow on every sheet. Acceptable scales are: 1 inch = 10 feet, 1 inch = 20 feet, ¼ inch = 1 foot, 1/8 inch = 1 foot. Other scales may be appropriate but should be approved by Planning staff before filing.
- Date of preparation, submittal date and revision date(s) on every sheet.
- Sheet titles on every sheet.
- Explicit and complete directions to the property. Include mention of any locked gates, dogs or other concerns.
- Vicinity map showing the location of the parcel within the County of Santa Cruz including names of existing streets, cross streets and arrow indicating location of parcels.

DOCUMENTATION

- Copies of current deeds of all parcels – required to confirm property dimensions, ownership and rights-of-way.
- Owner/Agent forms – An Owner/Agent form is required for all parcels for other than the applicant's.
- Disclosure Statement for Hazardous Materials.
- Common Interest Ownership Disclosure.
- Assessor's Parcel Map (one copy) – You may purchase a copy at the County Surveyor's Office (4th Floor) or County Assessor's Office (1st Floor, Room 130).
- **SITE PLAN** with documentation for entire property:
 - Location and dimensions of all property lines, drawn to a standard scale and labeled.

Display property lines in the following way:

Existing property line to be unchanged: _____
 Existing property line to be deleted: - - - - -
 Proposed property line: **_____**



- Square footage of area transferred, along with existing and resulting parcel sizes.

When the adjustment involves two parcels, display the transfer areas in the following table:

	Existing	Proposed	Difference
Parcel A	5,000	6,000	+ 1,000
Parcel B	6,000	5,000	- 1,000

LOT LINE ADJUSTMENT
LIST OF REQUIRED INFORMATION (PAGE 2 OF 2)

*When the adjustment involves three or four parcels, display the transfer areas in the following table:
 (Note: if a proposed Lot Line Adjustment involves 5 or more parcels, a subdivision is required.)*

Proposed Adjustments						
	Existing (acres/ square feet)	Area of land to be transferred to or from Parcel A	Area of land to be transferred to or from Parcel B	Area of land to be transferred to or from Parcel C	Area of land to be transferred to or from Parcel D	Proposed (acres/ square feet)
Parcel A	20	---	+10	-5	---	25
Parcel B	40	-10	---	---	+5	35
Parcel C	30	+5	---	---	-10	25
Parcel D	50	---	-5	+10	---	55
TOTAL	140					140

- Location and dimensions of all rights of way and vehicular easements, labeled. Also show edge of pavement if outside right-of-way.
- Location and dimensions of driveways, parking spaces, maneuvering aisles, loading areas, trash and recycling areas.
- Location of all septic systems, leach fields and wells.
- Location, dimensions and uses of all existing and proposed buildings. All existing building/structures shall be labeled “EXISTING,” “PROPOSED,” OR “TO BE REMOVED.”
- Building footprints, including decks.
- State distance between property lines (both existing and proposed) and every structure within 150 feet.
- Location of fences and retaining walls.
- Location of all underground utilities, including water, sewer, gas and power lines. Note on the plans whether abandonment or relocation of an existing lateral or drainage easement is proposed.
- Location of drainage ways, drainage structures, creeks, rivers and wetlands (check with Public Works Drainage Engineering Staff for information on drainage structures).

PROJECT-SPECIFIC INFORMATION – Required if applicable

- A preliminary title report for all involved parcels (usually required to determine rights-of-way, easements and other encumbrances).
- Lot slope indicated by contours at regular intervals, if required to determine buildability.
- Location of slope instability, fault traces or floodplains, if required to determine buildability.
- Geologic Report, if required to determine buildability.
- Geological Hazards Assessment, if required to determine buildability.
- Location and dimensions of any open space easements.
- Location of existing and proposed public pedestrian rights of ways and shoreline access points.
- Surveyed location of public sewer and easements that are located on your parcel (if not on septic).
- Staking – If the septic system location is within 50 feet of property boundary, please stake the septic tank and leachfield locations to assist staff in locating these fixtures in the field.



COUNTY OF SANTA CRUZ

PLANNING DEPARTMENT

701 OCEAN STREET, 4TH FLOOR, SANTA CRUZ, CA 95060
 (831) 454-2580 FAX: (831) 454-2131 TDD: (831) 454-2123

REQUIRED REVIEW AGENCIES

LOT LINE ADJUSTMENT

(SUBMIT THIS FORM WITH YOUR APPLICATION)

BASIC ROUTING		MISCELLANEOUS	
PROJECT REVIEW	2		
CODE COMPLIANCE			
ENVIRONMENTAL HEALTH SERVICES			
DPW SANITATION			
SALSIPUEDES SANITATION DISTRICT			
(FOR BUILDABILITY DETERMINATION)			
ENVIRONMENTAL PLANNING			
FIRE AGENCIES (If project involves a buildability determination affecting fire access. One set only.)			
APTOS/LA SELVA FIRE PROTECTION			
AROMAS FIRE DISTRICT			
BOULDER CREEK FIRE DEPARTMENT			
BEN LOMOND FIRE DEPARTMENT			
BRANCIFORTE FIRE PROTECT			
CA DEPT OF FORESTRY/COUNTY FIRE			
CENTRAL FIRE			
CITY OF SANTA CRUZ FIRE			
CITY OF WATSONVILLE FIRE			
CITY OF SCOTTS VALLEY FIRE			
FELTON FIRE DEPARTMENT			
PAJARO VALLEY FIRE DISTRICT			
UCSC FIRE			
ZAYANTE FIRE DEPARTMENT			



COUNTY OF SANTA CRUZ

PLANNING DEPARTMENT

701 OCEAN STREET, 4TH FLOOR, SANTA CRUZ, CA 95060
(831) 454-2580 FAX: (831) 454-2131

PLEASE BRING THIS FORM WITH YOU WHEN YOU SUBMIT YOUR APPLICATION.

ESTIMATED FEES for LOT LINE ADJUSTMENTS

(Accessory Structures, Height Exceptions, Additions to Nonconforming Structures, Agricultural Buffer Reductions)

(Fees are subject to change and are current as of the date this form is filled out.
Additional fees may be required based on further review.)

AT COST DEPOSIT FEES

DEVELOPMENT REVIEW FEES

Charge 1/2 of main permit fee or deposit fee for Amendments and Extensions.
When more than one type of permit applies, take in one deposit only for the highest cost permit.

FEE CODE **AT-COST
DEPOSIT OR
"INCLUDED"**

LOT LINE ADJUSTMENT _____	LBA _____	_____
_____	_____	_____
_____	_____	_____

ENVIRONMENTAL REVIEW FEES

Envir. Resource Review (Envir Planner Site Visit & Evaluation)	E _____	_____
Other EP reviews (e.g. Riparian, Miscellaneous)	E _____	_____
CEQA Review: Environmental Assessment (EIE/JIE)	N/A _____	<u>INCLUDED</u>
Environmental Exemption: Fee is included in At Cost deposit.		

OTHER FEES

Building Plan Check (At Cost) - For review of Modification Plan /Worksheet	_____	_____
--	-------	-------

TOTAL AT COST DEPOSIT \$ _____ *

***The current billing rate for a Project Planner is \$ _____ / hour (other staff rates may vary)**

(The At Cost deposit above is an estimate of the amount required to cover work necessary for the processing of the project. The Department will mail a monthly statement of actual costs incurred based on staff time, and other indirect costs and if additional deposit amount is needed to complete the review, staff will notify the Applicant. If at project final there is a balance remaining, these monies shall be refunded.)

FLAT FEES

INTAKE FEES

Application Intake **INA/INB** (ONLY For Projects taken in at counter and with NO application Intake Appointment/At Cost deposit)

FEE CODE LIST FEE GENERAL PLAN 8%

IN _____ _____ N/A

Records Management Fee

RMF _____ _____ N/A

ENVIRONMENTAL / DEVELOPMENT REVIEW FEES

Clerk of the Board Filing Fee for Exemptions (not if Env. Assess. - below)

COB _____ _____ N/A

Envir. Review/Studies (eg. Soils, Geo, Biotic, Arch, , Sig.Tree Removal)

_____ _____ _____

Miscellaneous EP/Dev Rev reviews (eg Fence Certification, Coastal Exclusion, Additional/Misc. EP fees)

_____ _____ _____

DEPARTMENT OF PUBLIC WORKS REVIEW FEES

FEE CODE LIST FEE DPW AT-COST/FEE

Dept of Public Works Sanitation (*If in Santa Cruz Sanitation District SC2*)

SC _____ _____ FEE

Dept of Public Works Encroachment
(*Only, if changes to driveways proposed etc.*)

WDG _____ _____ _____

FIRE REVIEW FEE (*If buildability determination required*)

FAR = County (CDF)/**FZA** = Zayante/ **FVA** = Pajaro
(All other fire agencies charge their own fees)

F _____ _____ N/A

HEALTH SERVICES DEPARTMENT REVIEW FEE

(*HDR if buildability determination required, HDS if not*)

H _____ _____ N/A

ESTIMATED TOTAL FEES (due at time of application intake): \$

*

* This fee does not include building permit fees or code violation fees. During intake, the planner will provide you with a slip to bring to the cashier showing any code violation fees, if appropriate.

NOTES: