



## **TOWN OF CLARKDALE**

### **LOT LINE ADJUSTMENT APPLICATION**

An application for Lot Line Adjustment shall be submitted to the Community Development Director with two copies of the Lot Line Adjustment survey and the application fee. The Director shall have thirty (30) working days to approve or reject the application. If approved by the Director, the land survey shall be recorded by the Applicant in the office of the Yavapai County Recorder within ten calendar days of Director's approval. A copy of the recorded Lot Line Adjustment shall be provided to the Clarkdale Community Development Department after recording. If rejected, written notice shall be provided to the Applicant via first class mail, postmarked within ten (10) days after the expiration of the thirty (30) day review period. The written notice shall specify the reasons for denial.

The following information must be provided in its entirety in order for the Town to consider any Lot Line Adjustment application for approval.

Date: \_\_\_\_\_

**Applicant:** \_\_\_\_\_

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

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Contact Person: \_\_\_\_\_

**Engineer:** \_\_\_\_\_

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

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Contact Person: \_\_\_\_\_

**Property Owner of Lot 1:** \_\_\_\_\_  
Address: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_  
Phone: \_\_\_\_\_ Email: \_\_\_\_\_  
Contact Person: \_\_\_\_\_

**Property Owner of Lot 2:** \_\_\_\_\_  
Address: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_  
Phone: \_\_\_\_\_ Email: \_\_\_\_\_  
Contact Person: \_\_\_\_\_

**Property Owner of Lot 1**  
**Owner's Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Property Owner of Lot 2**  
**Owner's Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Application #** \_\_\_\_\_ **Submittal Date:** \_\_\_\_\_ **Fees:** \_\_\_\_\_ **Accepted by:** \_\_\_\_\_

Parcel Number(s) of Lot 1: \_\_\_\_\_ Existing Zoning: \_\_\_\_\_  
Parcel Number(s) of Lot 2: \_\_\_\_\_ Existing Zoning: \_\_\_\_\_

Gross Area of Lot 1 (Acres/Sq. Ft.): Before: \_\_\_\_\_ After: \_\_\_\_\_  
Gross Area of Lot 2 (Acres/Sq. Ft.): Before: \_\_\_\_\_ After: \_\_\_\_\_

Address/Location of Lot 1: \_\_\_\_\_  
Address/Location of Lot 2: \_\_\_\_\_

**Approved ( ) Denied ( )**

**By:** \_\_\_\_\_ **Date:** \_\_\_\_\_  
Community Development Director

Reason for Denial: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_