Planning & Development Services 5280 Northwest Drive Bellingham, WA 98226-9097 360-778-5900, TTY 800-833-6384 360-778-5901 Fax



Mark Personius, AICP
Director

# Boundary Line Adjustment Application

#### How do I apply for a Boundary Line Adjustment?

After you have completed all applicable application materials you may submit the application to the Subdivision Counter Monday through Friday between 8:30 AM and 12 Noon. The applications will be taken in at the front counter and considered vested upon receipt of the applicable fees and a Determination of Completeness letter has been issued or as provided for in WCC 22.05.050.

#### **Boundary Line Adjustment Processing Sequence**

- 1) Once the application and fees are submitted, staff will review the project and if all items have been submitted a Determination of Completeness letter will be issued to the applicant or as provided for in WCC 22.05.050. In addition, the project will be routed to the **Technical Review Committee** (engineering, critical areas, shorelines, and the Health Department), as applicable.
- 2) When the basic requirements of WCC 21.03.060 appear to be reasonably satisfied, the Technical Review Committee will issue a **Notice of Preliminary Approval** pursuant to WCC 21.03.060(1) (c). This authorizes you to prepare your deed(s) and/or maps.
- 3) If there are still items that need to be addressed by the applicant the Technical Review Committee will issue a **Notice of Additional Requirements** (NOAR). The applicant shall have 180 days from issuance of the NOAR to submit requested items.
- 4) A Boundary Line Adjustment is not considered approved until certified legal descriptions of the area to be conveyed and a final boundary line map, prepared by a surveyor have been stamped as exempt by Whatcom County PDS and filed for record with the Whatcom County Auditor. The instrument of conveyance or deed and map must be stamped and recorded within twelve months of pre-approval by the Whatcom County PDS.
- 5) Failure to record the Boundary Line Adjustment within twelve moths of approval results in an expired application and must be resubmitted for review and approval (WCC 21.03.060).

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WHATCOM COUNTY

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# Application for Boundary Line Adjustment (Lot Line Adjustment)

File #Exe:		Date	
<u>Applicant</u>			
Name		Phone	
Mailing Address		City	
State Zip	Email		
<u>Contact</u>			
Name		Phone	
Mailing Address		City	
StateZip	Email		
	<u>Parcels Being</u>	ı Adjusted	
Parcel (A) Assessor's Parcel 7	Гах Number		
Current Zoning			
		_ (After Adjustment)	
Site Address			
		Phone	
Mailing Address		City	
State Zip	Email		

Parcel (B) Assessor's Parcel Tax Number
Current Zoning
Size (Prior To Adjustment) (After Adjustment)
Site Address
Legal Property Owner(s) Phone
Mailing Address City
State Zip Email
Parcel (C) Assessor's Parcel Tax Number
Current Zoning
Size (Prior To Adjustment) (After Adjustment)
Site Address
Legal Property Owner(s) Phone
Mailing Address City
State Zip Email
Please use additional paper if there are more than 3 parcels involved.
Water Source & Sewage Disposal Method for:
Lot 1:
Lot 2:
Lot 3:
Watershed  Yes  No If so, which watershed
Shoreline
Will any road be altered, vacated, or dedicated?
Will any new access (ingress/egress) to a public right-of-way be created? $\ \square$ Yes $\ \square$ No
Are there any structures on any of the properties involved in the boundary line adjustment? $\square$ Yes $\square$ No

I/we	hereby	certify	that	the	above
statements and the information contained in	any papers or pla	ns subm	nitted	herew	ith are
true and accurate to the best of my knowledge					
Signature of Applicant/Owner	Date				
Signature of Applicant/Owner	Date				
Signature of Applicant/Owner	Date				
Signature of Applicant/Owner	Date				

NOTE: Fees will be assessed in accordance with the Whatcom County Unified Fee Schedule (UFS) in effect at the time of application submittal. Please contact Planning and Development Services to determine project specific fees. Click <a href="here">here</a> to see the 2019/2020 UFS.

Per UFS 2843 all permits and applications are subject to a Technology fee. The fee is calculated on the permit/application fees due.

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# **Materials Required Prior To Submittal**

Applicant Checklist			PDS Checklist
	bel	itten Data and Fees- <b>Six (6) sets</b> of the information (listed ow) shall be submitted- <b>unless otherwise indicated</b> .	
		ation which shall contain:  Name, address and phone number of land owner, applicant, and contact person	
	b)	Intended Uses	
	,	A current title report or update of title report issued no more than 60 calendar days prior to application	
	d)	Assessor's parcel numbers of existing parcels	
	e)	Fees as specified in the Unified Fee Schedule	
	f)	Signature of all owners as shown on Title report, and authorization for any agent to act on behalf of owners	
	-	p Data	
	,	Names of land owners	
	-	Name of proposed Boundary Adjustment	
		Common language description of the general location of the land division	
	d)	Map at a common engineering scale of boundaries of existing parcels that are contributing to or receiving land from the proposed adjustment	
	e)	Appropriate location and labeling of any disputed or undetermined property lines proposing to be resolved by the adjustment	
	f)	Clear depiction of property lines proposed for adjustment which identifies existing property lines and proposed property lines	
	g)	Legal description and area of original parcels	
	_	Legal description and area of proposed adjusted parcels	
	i)	Approximate location and names of existing roads identified as either public or private	
	j)	Approximate location of existing buildings and existing on- site septic systems and wells	
	k)	Approximate locations of existing utilities and infrastructure	
	I)	Vicinity map	
	m)	Common engineering map scale/north arrow/sheet numbers (on each sheet containing a map)	
	n)	Section, township, range, and municipal and county lines in the vicinity	
	o)	General boundaries of the site with general dimensions shown	
	p)	If the proposed Boundary Line Adjustment is located in the Agricultural zone and the proposed farmstead site exceeds 1 acre in size, provide written evidence that the proposal fulfills the requirements of WCC 20.40.252	

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# Lot of Record Application

#### What is a Lot of Record?

WCC 20.97.220 defines "Lot of Record" as "a lot which is described by final plat, short plat, or metes and bounds and is established pursuant to applicable local and state regulations at the date a legal instrument creating the lot is recorded at the Whatcom County auditor's office."

**Note**: "Lot of Record" is in no way synonymous with "buildable lot", it just means that it was legally created/subdivided.

Note: A COMPLETE DEED HISTORY and CORRESPONDING MAP must accompany this application. You may obtain a deed history of your property from any local title company. Use an Assessor's parcel map from the PDS office (You will need to know your Section, Township, and Range) to show the parent parcel and subsequent division/creation of your lot. Color-code the map, deeds and deed list. Do this by showing the pre- 1972 parcel as one color and each subsequent division or alteration with a different color, both on the map, on the deeds and on the deed history chronology on page three. Depending on the complexity of the deed history, you may need professional assistance to do this.

File # (PDS will assign)\_\_\_\_\_\_ Date \_\_\_\_\_

Applicant	Name		Phone	
			City	
Contact N	lame		Phone	
Address			City	
State	Zip	Email		
Property	Owners(s) Nam	e	Phone	
Address			City	
State	Zip	Email		
Site addres	ss (if any) or nea	est public road		
Assessor T	ax parcel number	(s)		
Acreage/so	quare footage		Current Zoning	
		<u></u>	ricultura Othor	

When was the parcel created in its current configuration?
(Check deed history)
Have there been any subsequent boundary line adjustments, vacations, dedications, foreclosures, etc.? Yes No (If yes, please show on map with corresponding auditor's file numbers)
Is it a platted parcel?
If yes, name of plat
Has the property ever been surveyed?
(Please include record of survey with application) AF#
Does the owner of this parcel own any contiguous property? $\square$ Yes $\square$ No (If yes, please show on map)
Is the parcel located in the Lake Whatcom or Lake Samish watershed, or other wateresource protection overlay district? $\square$ Yes $\square$ No
Is the parcel subject to any county conditional use permit? $\square$ Yes $\square$ No
If yes, CUP #
Is the parcel subject to a Forest Practice Application (FPA) from the State Department of Natural Resources?   Yes No (If so, please submit a copy of the application with your completed lot of record application)
Is the parcel within 330 feet of an area designated as mineral resource land, and/or within 660 feet of a pipeline, and/or within one-half mile of land that is designated forestry, and/o land upon which agricultural operations are being conducted?   Yes  No
(If yes which?)
Please list any current county, state, or federal permits affecting the subject property
How many dwelling units (residences) are on the property?
(Show on map)
Are there any other structures (barns, shops, sheds, garages, etc.) on the property?  Yes No (If so, show on map)
Water source
Sewage disposal method

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# **DEED HISTORY**

List deeds from oldest to most recent. Color-code your section map, deeds and deed list.

Auditor's File Number (AF#), Grantor and Grantee of Pre-1970 Parent Parcel:

Auditor's File#	Date:	
Grantor (From)	Grantee (To)	
AF# of Subsequent Conveyar (You May Need To Include Addit	nces, Adjustments or Divisions: ional Pages)	
Auditor's File#	Date:	
Grantor (From)	Grantee (To)	
Auditor's File#	Date:	
Grantor (From)	Grantee (To)	
Auditor's File#	Date:	
Grantor (From)	Grantee (To)	
Auditor's File#	Date:	
Grantor (From)	Grantee (To)	
Auditor's File#	Date:	
Grantor (From)		
Auditor's File#	Date:	
Grantor (From)		
Auditor's File#	Date:	
	Grantee (To)	

Auditor's File#	Date:
Grantor (From)	Grantee (To)
Auditor's File#	Date:
Grantor (From)	Grantee (To)
Auditor's File#	Date:
Grantor (From)	Grantee (To)
Auditor's File#	Date:
Grantor (From)	Grantee (To)
deed filed under auditor sold 20 of the 40 acres	40 acres from Grandpa Smith in 1964 with a r's file number (AF#) 1234567. Farmer Jones to Cousin Bill in 1976 with AF# 93872980. Bill to give to his daughter in 1998"

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# **Fee Responsibility**

<u>Venue and Jurisdiction:</u> The parties hereto recognize and agree that the venue of any action involving their rights or obligations related to this application shall be in Whatcom County, and the parties' rights and obligations hereunder shall be determined, in accordance with the laws of the State of Washington.

Fee Guaranty: Notwithstanding to name of a company, I personally of the terms listed in the Whatcom Conguarantee is part of the consideration	guarantee payment of ounty Unified Fee Sche	fees accrued according to dule and that my personal
I/we,statements and the information herewith are true and accurate to the statements are true and accurate to the statement of the statem	contained in any pa	apers or plans submitted
Signature of Applicant		Date
Signature of Owner		Date
is/are the person(s) who appeared be his/her free and voluntary act for the u	•	_
	Notary Signature:	
		the State of Washington
	My appointment expires	://
Application received by:		Date:
		D 40 544

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# **Agent Authorization**

complete this form, which will pr for permits on your behalf. This owner. Planning and Developm	ot to apply for permits on your behalf you must ovide authorization for a designated agent to apply form is required for the protection of the property lent Services will not accept an application that is owners or accompanied by this form.
	, the owner(s) of that by completing this form I hereby authorize
	to act as my agent. I understand zed to submit applications on my behalf. I also oplication has been submitted that all future to the agent.
Property Owner(s) Printed Name	Date
Property Owner(s) Signature	Date
is/are the person(s) who appeared	tory evidence that before me, and said person(s) acknowledged it to be e uses and purposes mentioned in this instrument.
	Notary Signature:
	Printed Name:
	Notary Public in and for the State of Washington
	Residing at
	My appointment expires://
Application received by	Date