

Development Engineering 300 Richards Blvd., 3rd Floor Sacramento, CA 95811

Phone: 916-808-8300

LOT MERGER / LOT LINE ADJUSTMENT APPLICATION

PRIOR TO SUBMITTAL OF THIS APPLICATION, PLEASE READ

"LOT MERGER / LOT LINE ADJUSTMENT PROCESS AND REQUIREMENTS"

Note: Prior to submittal of a Lot Merger, ALL PARCELS must be in exact common ownership.

| TYF | PE OR PRINT LEGIBLY – SHOW ALL INFO | RMATION - add page if ne | eeded STAFF USE ONLY | : LM COMMON OWNERSHIP VERIFIED | | |
|-------------------------------------|--|--------------------------|-------------------------|--------------------------------|--|--|
| Р | PROJECT ADDRESS | | | Date of Submittal | | |
| R O | PROJECT LOCATION (INCLUDE CROSS | сос | | | | |
| JEC | TYPE OF PROJECT LOT MERGER LOT LINE ADJUSTMENT | | | eCAPS P15000007 | | |
| Ť | APN (ALL PARCELS) | | | Planning # (if applicable) | | |
| | 1) NAME OF LEGAL OWNER(S) (AS SHOWN IN VESTING DEED) | | | | | |
| O MAILING ADDRESS, CITY, STATE, ZIP | | | | | | |
| NE | CONTACT PERSON (OWNER) | PHONE | PROPERTY OWNER'S E-MAIL | | | |
| ı | R 2) NAME OF LEGAL OWNER(S) (AS SHOWN IN VESTING DEED) (IF APPLICABLE) | | | | | |
| N F | MAILING ADDRESS, CITY, STATE, ZIP | | | | | |
| 0 | CONTACT PERSON (OWNER) | PHONE | PROPERTY OWNER'S E-MAIL | | | |
| | | | | | | |
| | NAME OF CONSULTING FIRM | | | | | |
| S | | | | | | |
| | MAILING ADDRESS, CITY, STATE, ZIP | | | | | |
| URVEY | | | | | | |
| U R V E | MAILING ADDRESS, CITY, STATE, ZIP | | | SURVEYOR LICENSE # | | |
| URVEYOR | MAILING ADDRESS, CITY, STATE, ZIP PHONE E-MAIL | THIS PROJECT? | OWNER SURV | | | |
| URVEYO | MAILING ADDRESS, CITY, STATE, ZIP PHONE E-MAIL CONTACT PERSON (OWNER) | THIS PROJECT? | OWNER SURV | | | |
| URVEYOR CONTA | MAILING ADDRESS, CITY, STATE, ZIP PHONE E-MAIL CONTACT PERSON (OWNER) WHO WILL BE THE CONTACT FOR | THIS PROJECT? | OWNER SURV | | | |
| URVEYOR CONT | MAILING ADDRESS, CITY, STATE, ZIP PHONE E-MAIL CONTACT PERSON (OWNER) WHO WILL BE THE CONTACT FOR NAME OF CONTACT PERSON | THIS PROJECT? | OWNER SURV | | | |
| URVEYOR CONTAC | MAILING ADDRESS, CITY, STATE, ZIP PHONE E-MAIL CONTACT PERSON (OWNER) WHO WILL BE THE CONTACT FOR NAME OF CONTACT PERSON MAILING ADDRESS, CITY, STATE, ZIP PHONE E-MAIL NAME OF TITLE COMPANY | | OWNER SURV | | | |
| URVEYOR CONTAC | MAILING ADDRESS, CITY, STATE, ZIP PHONE E-MAIL CONTACT PERSON (OWNER) WHO WILL BE THE CONTACT FOR NAME OF CONTACT PERSON MAILING ADDRESS, CITY, STATE, ZIP PHONE E-MAIL | | OWNER SURV | | | |



Engineering Services Division

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PROJECT QUESTIONNAIRE

| 1. | Please give a d | etailed explana | tion as to the | reason vou are | applying for the | his project: |
|----|-----------------|-----------------|----------------|----------------|------------------|--------------|
| | | | | | | |

| 3. List | COMMERC | AL – USE OF STRUCTURE(S) IAL – USE OF STRUCTURE(S) ng Division and Building Division projects associated with this projects | VACANT |
|--|---|---|---------------------------------|
| SUBMI | TTAL CHE | <u>CKLIST</u> | |
| CITY/ STAFF INITIAL | | OT MERGER / LOT LINE ADJ. PROCESS AND REQUIREMENTS" ETAILED DESCRIPTION OF ITEMS 1-9 BELOW | DATE OF SUBMITTAL / COMMENTS |
| | 1) | Completed Application Form | |
| | 2) | Title Report (all parcels, 90 days old max.) | _ |
| | 3) | Vesting Deed(s) (most current) | |
| | 4) | Site Plan | |
| | 5) | New Legal Description | |
| | 6) | Exhibit Map | |
| | 7) | Closure Calculations | |
| | 8) | Supporting Documents (All deeds, recorded maps, cert of compliance & rec of surveys within subject boundary & also adj to boundary). | |
| | 9) | Electronic File of AutoCAD Drawing (.dwg) | |
| Electronic be submitted link for the services/ | tted in persor location and public-hours- | can be emailed to DE@cityofsacramento.org. In-person submittals are n with CD or flash drive containing electronic copies of all project document hours of operation: | |

Please see the following document for alternative methods of payment: https://www.citvofsacramento.gov/content/dam/portal/pw/Forms/Enginee

 $\frac{\text{https://www.cityofsacramento.gov/content/dam/portal/pw/Forms/Engineering/Development-Engineering/Payment Methods DE.pdf}{\text{Notice of the property of the$

COUNTY TAX REQUIREMENTS (prior to project approval)

LOT MERGER - Any Delinquent County Taxes must be paid and receipts submitted to City staff

LOT LINE ADJUSTMENT- All Delinquent County Taxes and Taxes that have been billed to the customer (that are due and payable) for the current year, must be paid (Both Installments) and receipts submitted to City staff.



Engineering Services Division

is required for additional owners

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NOTICES:

City staff will conduct a thorough inspection of the submittal package within two days of submittal. If application and submitted documents do not meet City standards for review, the application will be placed on hold status. The customer will be notified to correct the deficiencies. After the deficiencies are corrected, the hold status will be lifted.

After the submittal of a Lot Merger or Lot Line Adjustment application to the City, the property owner is encouraged to immediately begin the process of obtaining any necessary approvals from lenders, if applicable.

OWNER'S CERTIFICATION (Notary required for all signatures) (All owners of record must sign this application) The undersigned hereby acknowledges being the record owner(s) of the property contained within this project and hereby consents to the processing and recording of the Certificate of Compliance for Lot Merger or Lot Line Adjustment; further acknowledges understanding the "Lot Merger / Lot Line Adjustment Process and Requirements" and that Per City Code Sections 17.824.040 and 17.820.030(3), Lot Mergers and Lot Line Adjustments are deemed withdrawn (expired) if not recorded within 1 year of the initial submittal date to the City and that City Code does not provide for any time extensions.

| PRINT OWNER'S NAME (as shown in Vesting Deed): | | | |
|--|--|--|--|
| SIGNATURE: | | | |
| PRINT NAME: | | | |
| | | | |
| PRINT OWNER'S NAME (as shown in Vesting Deed): | | | |
| SIGNATURE: | | | |
| PRINT NAME: | | | |
| | | | |
| PRINT OWNER'S NAME (as shown in Vesting Deed): | | | |
| SIGNATURE: | | | |
| PRINT NAME: | | | |
| Use additional page if more space | | | |

attach acknowledgment

Mapping Section forms are available online at:

http://portal.cityofsacramento.org/Public-Works/Engineering-Services/Property-Line-Changes/Map-Review

Question or Comments, contact Thomas Adams at 916-808-7929 - tadams@cityofsacramento.org

