APPLICATION FOR BOUNDARY LINE ADJUSTMENT or VACATION

General Information:

Name:_____

Address or nearest intersection:_____

_____

Magisterial District: _____Tax Map #_____

Zoning:_____ Number of Lots Affected:_____Gross Area(acres):_____

Utilities:

Water System (Check one) □ County System □ Private System □ Individual Well

Sewage System (Check one) □ County System □ Private System □ Septic Tank

Health Department approval is not required for boundary line adjustments, however it is recommended that the applicant contact Health Department prior to submission to the Planning Department to ensure that each lot can accommodate the minimum requirements for water and sewage once the boundary line adjustment has been made.

Contacts: *(Check contact(s) to receive correspondence relating to application)*

□ Property Owner _____

Address _____ Phone #:_____

_____ Fax #: _____

e-mail: _____

□ Property Owner _____

Address _____ Phone #:_____

_____ Fax #: _____

e-mail: _____

□ Surveyor/ Engineer/ Attorney/ Other _____

Address _____ Phone #:_____

_____ Fax #: _____

e-mail: _____

If more space is needed, please attach separate sheet of owners & addresses

- Accompanying this application shall be the required application fee of $50 and at least three prints of the proposed plat for review.
- Eight signed and notarized copies are required prior to final approval.
- Lots less than ten acres shall be shown in their entirety.
- **Pursuant to §5.5-6 of The Chesapeake Bay Preservation Ordinance, all lots shall have sufficient area outside the RPA to accommodate the intended use. Therefore, RPA shall be shown on all plats; if RPA is not present, a note shall be provided indicating that RPA is not applicable.**
- Boundary line adjustment and vacations shall not involve the relocation or alteration of streets, alleys, easements for public passage, or other public areas and no easements of utility right-of-way shall be relocated or altered without the express consent of all persons holding any interest therein.

As property owner, I hereby grant permission to the designated personnel of Gloucester County, and any other agency deemed appropriate by Gloucester County, to enter the above reference property for purpose of review of the proposed application, if necessary.

Owner's Signature ***Date*** ***Owner's Signature*** ***Date***