

LLA/LM No. _____

Processing Fee: **\$776.38**



Date Filed: _____

Received By: _____

**CITY OF EL CENTRO
COMMUNITY DEVELOPMENT DEPARTMENT
APPLICATION FOR LOT LINE ADJUSTMENT OR LOT MERGER**

Application is hereby made to the City of El Centro, County of Imperial, State of California, for a **Lot Line Adjustment** as set forth under Section 24-90, et. seq. or a **Lot Merger** set forth under Section 24-103, et. seq., of the Subdivision Ordinance, of Chapter 24 of the City Code of the City of El Centro, California, as amended.

APPLICATION FOR: *Check one*

Lot Line Adjustment

Lot Merger

APPLICANT INFORMATION:

Name (Last Name, First Name)	Email Address
Mailing Address (Address, City, State, Zip Code)	Telephone Number

PROPERTY INFORMATION:

Parcel A

Property Address (General Location If No Address is Available)	
Assessor's Parcel Number	Parcel Size
Property Owner(s) As Shown On Title Report	

Parcel B

Property Address (General Location If No Address is Available)	
Assessor's Parcel Number	Parcel Size
Property Owner(s) As Shown On Title Report	

If more than two parcels, provide parcel information on a separate sheet and attached to this application

SURVEYOR/ENGINEER INFORMATION:

Name (Last Name, First Name)	Email Address
Company Name	
Mailing Address (Address, City, State, Zip Code)	Telephone Number

PROJECT SITE INFORMATION

Purpose of Lot Line Adjustment	
Existing Use	Proposed Use

REQUIRED ATTACHMENTS:

<input type="checkbox"/> Signed application that is notarized	<input type="checkbox"/> Preliminary Title Report for each existing lot (not older than 30 days)
<input type="checkbox"/> Exhibit A is the Legal Description (part of COC)*	<input type="checkbox"/> Grant Deeds for existing owners for each lot
<input type="checkbox"/> Exhibit B is the LLA Plat Map (part of COC)*	<input type="checkbox"/> Traverse Calculation, for each lot.
<input type="checkbox"/> Chain of Title/Lot Creation History.	<input type="checkbox"/> CD/USB or e-mail pdf copies of all application materials.

*Parcels shall be consistently referenced in all documents (e.g. *Parcel A* and *Parcel B*, *Parcel 1* and *Parcel 2*)

APPLICANT'S DECLARATION:

(We) (I), the undersigned, hereby declare under penalty of perjury that (we are) (I am) all parties having record title interest in the land covered by this application and described and shown on attachments submitted herewith, and do hereby consent to the preparation and recordation of a final certification for the Lot Line Adjustment shown.

ALL SIGNATURES MUST BE NOTARIZED

Assessor's Parcel Number
Name of Owner
Signature
Mailing Address (Street Address/P.O. Box)
Mailing Address (City, State, Zip)
Telephone

Assessor's Parcel Number
Name of Owner
Signature
Mailing Address (Street Address/P.O. Box)
Mailing Address (City, State, Zip)
Telephone

NOTE: All owners involved in the Lot Line Adjustment must sign this application and have it notarized. Lack of signatures can result in rejection of this application. A separate sheet may be attached for additional information and signatures.