



**Town of Hillsdale Planning Board**

**Application**

**LOT LINE ADJUSTMENT**

For office use only
File no. _____
Date Received _____

**Name of Applicant :** \_\_\_\_\_

( ) Owner ( ) Agent *(All parties who are not the owner of record must submit written authorization to represent the owner)*

**Owner Information:** Name \_\_\_\_\_

Address: \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

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

**Agent Information:** Name \_\_\_\_\_

Address: \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

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

**Surveyor or Engineer Information:** Name \_\_\_\_\_

Address: \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

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

**Property Information:** Address \_\_\_\_\_

\_\_\_\_\_ Tax ID # \_\_\_\_\_

**Size of Lot:** \_\_\_\_\_

**Size of Parcel to be conveyed:** \_\_\_\_\_

**Property owner to whom the parcel will be conveyed:** \_\_\_\_\_

**Additional Information** \_\_\_\_\_

\_\_\_\_\_

The undersigned hereby requests a Lot Line Adjustment by the Hillsdale Planning Board for the above property

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

*Please review the guidelines for a lot line adjustment from the Hillsdale website. This will give you the information to prepare for a review. The Planning board requires a digital copy of the planned boundary adjustment, in addition to the \$100 application fee, and full sized copies of the plans (to be brought to the next Planning Board meeting). This application must be submitted a week before the meeting.*