APPLICATION FOR A BOUNDARY ADJUSTMENT

City of Waitsburg
P.O. Box 35, Waitsburg, WA 99361
Phone: (509) 337-6371

Fax: (509) 337-8089

Date:
Applicant:
Mailing Address:
Phone:
Assessor's tax parcel number of property:
Address or general location of property:
Zoning:
The following must be submitted with this completed application to be accepted:
$\ \square$ An application fee in the amount of \$300.00, plus any consultant fees. Checks should be made payable to the City of Waitsburg.
$\ \square$ A surveyed site plan of the proposed lot line adjustments, and any other information that will illustrate your proposal.
Signature(s) of applicant(s):

FOR OFFICIAL USE ONLY:
Application is:
□ Approved
□ Approved with conditions:
□ Denied
Signature of Chairman of Planning Commission
Date