



# RIVERSIDE COUNTY PLANNING DEPARTMENT

Steve Weiss, AICP  
Planning Director

## APPLICATION FOR LOT LINE ADJUSTMENT

INCOMPLETE APPLICATIONS WILL NOT BE ACCEPTED.

### APPLICATION INFORMATION

Applicant's Name: \_\_\_\_\_ E-Mail: \_\_\_\_\_

Contact Person: \_\_\_\_\_ E-Mail: \_\_\_\_\_

Mailing Address: \_\_\_\_\_  
Street

\_\_\_\_\_  
City State ZIP

Daytime Phone No: (\_\_\_\_) \_\_\_\_\_ Fax No: (\_\_\_\_) \_\_\_\_\_

Land Surveyor/Civil Engineer's Name: \_\_\_\_\_ E-Mail: \_\_\_\_\_

Mailing Address: \_\_\_\_\_  
Street

\_\_\_\_\_  
City State ZIP

Daytime Phone No: (\_\_\_\_) \_\_\_\_\_ Fax No: (\_\_\_\_) \_\_\_\_\_

Property "A" Owner: \_\_\_\_\_ E-Mail: \_\_\_\_\_

Mailing Address: \_\_\_\_\_  
Street

\_\_\_\_\_  
City State ZIP

Daytime Phone No: (\_\_\_\_) \_\_\_\_\_ Fax No: (\_\_\_\_) \_\_\_\_\_

Assessor's Parcel Number(s) of Property "A": \_\_\_\_\_

Street Address of Property "A," if applicable: \_\_\_\_\_

Property B" Owner: \_\_\_\_\_ E-Mail: \_\_\_\_\_

Riverside Office · 4080 Lemon Street, 12th Floor  
P.O. Box 1409, Riverside, California 92502-1409  
(951) 955-3200 · Fax (951) 955-1811

Desert Office · 77-588 El Duna Court, Suite H  
Palm Desert, California 92211  
(760) 863-8277 · Fax (760) 863-7555

"Planning Our Future... Preserving Our Past"



**APPLICATION FOR LOT LINE ADJUSTMENT**

acknowledge that in the performance of their functions, planning agency personnel may enter upon any land and make examinations and surveys, provided that the entries, examinations, and surveys do not interfere with the use of the land by those persons lawfully entitled to the possession thereof.

(If an authorized agent signs, the agent must submit a letter signed by the owner(s) indicating authority to sign on the owner(s)'s behalf, and if this application is submitted electronically, the "wet-signed" signatures must be submitted to the Planning Department after submittal but before the subdivision is ready for public hearing.)

<u>PRINTED NAME OF OWNER(S) OF PROPERTY "_____"</u>	<u>SIGNATURE OF PROPERTY OWNER(S)</u>
<u>PRINTED NAME OF OWNER(S) OF PROPERTY "_____"</u>	<u>SIGNATURE OF PROPERTY OWNER(S)</u>
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<u>PRINTED NAME OF OWNER(S) OF PROPERTY "_____":</u>	<u>SIGNATURE OF PROPERTY OWNER(S)</u>
<u>PRINTED NAME OF OWNER(S) OF PROPERTY "_____":</u>	<u>SIGNATURE OF PROPERTY OWNER(S)</u>

Check this box if additional persons or entities have an ownership interest in the subject property(ies) in addition to that indicated above; and attach a separate sheet that references the Lot Line Adjustment number and list those names, mailing addresses, phone and fax numbers, and email addresses; and provide signatures of those persons or entities having an interest in the real property(ies) involved in this application.

*AUTHORIZATION FOR CONCURRENT FEE TRANSFER*

The applicant authorizes the Planning Department and TLMA to expedite the refund and billing process by transferring monies among concurrent applications to cover processing costs as necessary. Fees collected in excess of the actual cost of providing specific services will be refunded. If additional funds are needed to complete the processing of this application, the applicant will be billed, and processing of the application will cease until the outstanding balance is paid and sufficient funds are available to continue the processing of the application. The applicant understands the deposit fee process as described above, and that there will be **NO** refund of fees which have been expended as part of the application review or other related activities or services, even if the application is withdrawn or the application is ultimately denied.

**PROPERTY INFORMATION:**

Approximate Gross Acreage: \_\_\_\_\_

General location (cross streets): North of \_\_\_\_\_, South of \_\_\_\_\_

**APPLICATION FOR LOT LINE ADJUSTMENT**

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\_\_\_\_\_, East of \_\_\_\_\_, West of \_\_\_\_\_.

Adjustment Requested: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

Reason for Request: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

**This completed application form, together with all of the listed requirements provided on the Lot Line Adjustment Application Filing Instructions Handout, are required in order to file an application with the County of Riverside Planning Department.**

Y:\Current Planning\LMS Replacement\Condensed P.D. Application Forms\295-1021 LLA Condensed Application.docx  
Created: 07/01/2015 Revised: 05/18/2016

RECORDING REQUESTED BY  
RIVERSIDE COUNTY

THIS AREA FOR RECORDER'S USE ONLY

When recorded, return to:

Riverside County Planning Department  
12<sup>th</sup> Floor County Administrative Center  
4080 Lemon Street, Riverside, CA 92502-1409  
Mail Stop # 1070

No Fee, 6103 Government Code  
Benefit of Riverside County Planning Department

**NOTICE OF LOT LINE ADJUSTMENT NO.**

RECORD OWNERS	EXISTING PARCELS (Assessor Parcel Numbers)

LEGAL DESCRIPTION OF ADJUSTED PARCELS  
See attached Legal Description - Exhibit "A"

**SIGNATURE(S) OF RECORDED OWNER(S) (Must be Notarized)**

Print Name/Title:	Signature:
Print Name/Title:	Signature:
Print Name/Title:	Signature:
Print Name/Title:	Signature:

**RIVERSIDE COUNTY PLANNING DEPARTMENT APPROVAL**

This Lot Line Adjustment is approved.

Signature: \_\_\_\_\_ Printed Name: \_\_\_\_\_ Date: \_\_\_\_\_

**RIVERSIDE COUNTY SURVEYOR'S APPROVAL**

This document reviewed by Riverside County Surveyor.

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

**NOTARY ACKNOWLEDGEMENT**

STATE OF CALIFORNIA )  
COUNTY OF \_\_\_\_\_ )

A notary public or other officer completing this certificate verifies only the identity of the individual who signed the document to which this certificate is attached, and not the truthfulness, accuracy, or validity of that document.

On \_\_\_\_\_ before me, \_\_\_\_\_,  
(Date) (Name and Title of Officer)

personally appeared \_\_\_\_\_,  
(Name(s) of Signer(s))

who proved to me on the basis of satisfactory evidence to be the person(s) whose name(s) is/are subscribed to the within instrument and acknowledged to me that he/she/they executed the same in his/her/their authorized capacity(ies), and that by his/her/their signature(s) on the instrument the person(s), or the entity upon behalf of which the person(s) acted, executed the instrument.

I certify under PENALTY OF PERJURY under the laws of the State of California that the foregoing paragraph is true and correct.

WITNESS my hand and official seal

{SEAL}

\_\_\_\_\_  
Notary Public

**EXHIBIT "A" - LEGAL DESCRIPTION  
LOT LINE ADJUSTMENT NO. \_\_\_\_\_**

Scale: \_\_\_\_\_

Assessor's Parcel Number(s): \_\_\_\_\_

Date Exhibit Prepared: \_\_\_\_\_

**EXHIBIT "B" - MAP  
LOT LINE ADJUSTMENT NO. \_\_\_\_\_**

Scale: \_\_\_\_\_

Assessor's Parcel Number(s): \_\_\_\_\_

Date Exhibit Prepared: \_\_\_\_\_

**EXHIBIT "C" – SITE PLAN**  
**LOT LINE ADJUSTMENT NO. \_\_\_\_\_**

Scale: \_\_\_\_\_

Assessor's Parcel Number(s): \_\_\_\_\_

Date Exhibit Prepared: \_\_\_\_\_