Starksboro VERMONT

P.O. Box 91 Starksboro, VT 05487
Zoning Phone: 802-453-2768
www.starksborovt.org/zoning

App. # _____

BOUNDARY LINE ADJUSTMENT / LOT MERGER APPLICATION

Contact the Zoning Administrator prior to filing this form to confirm your submittal requirements and fees.

Application Type : Boundary Line Adjustment (BLA) _____ Lot Merger (LM) _____

See required submittals and other information on Page 2.

First Parcel Site Information:

Physical Address of Property:_____ Parcel ID (last 5 digits of SPAN): _____

Property Owner(s) Information (see definition next page):

Property Owner(s) Name: _____

Property Owner(s) Name: _____

Owner Mailing Address: _____

_____

Phone : _____ Email :_____

Applicant Information (see definition next page):

Applicant Name: _____

Applicant Mailing Address: _____

_____

Phone : _____ Email :_____

_____
Property Owner Signature Date

_____
Property Owner Signature Date

_____
Applicant Signature Date

Second Parcel Site Information:

Physical Address of Property:_____ Parcel ID (last 5 digits of SPAN): _____

Property Owner(s) Information (see definition next page):

Property Owner(s) Name: _____

Property Owner(s) Name: _____

Owner Mailing Address: _____

_____

Phone : _____ Email :_____

Applicant Information (see definition next page):

Applicant Name: _____

Applicant Mailing Address: _____

_____

Phone : _____ Email :_____

_____
Property Owner Signature Date

_____
Property Owner Signature Date

_____
Applicant Signature Date

OFFICE USE BELOW ONLY

Date App. and Submittals received complete:_____Fee: $_____Paid via:_Check #: _____ Online_____

Decision: DENIED/ APPROVED / REFERRED TO DRB ZA _____ ZA signature:_____Date _____

TOWN CLERK'S OFFICE Received for Record:_____A.D. _____at ____o'clock AM / PM

And Recorded in Book_____ page _____ Attest:_____Town Clerk/Assistant Town Clerk

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BLA/ LM Submittals list to be provided by the applicant:

- **Sketch Plan:** Provide a sketch plan depicting the existing and proposed lot lines and identification, and any existing buildings, wells, septic systems, replacement septic areas, roads, driveways, easements, and/or right-of-ways within 100 feet of the proposed lot lines. See example below.
- **State Permitting Opinion:** Provide an opinion from a professional consultant or a State Permit Specialist as to whether the boundary adjustment or lot merger requires any State permit applications, waivers, or exemptions be filed.
- **Final Plat:** Once the sketch plan has been approved, the applicant shall have a surveyor licensed in Vermont survey the portions of the involved lots as necessary to legally establish the new boundaries based on the approved sketch plan. The applicant shall provide the ZA with a stamped survey for signature and filing in accordance with the provisions of Subsection 426.I within 180 days from the ZA's approval of the sketch plan. If the applicant fails to submit the stamped survey within the 180-day period, the ZA's approval will be voided.
- **Final Plat Signature Block:** The language below (edit for application type) must be included on the Final Plat in a signature block.

(BOUNDARY LINE ADJUSTMENT) (LOT MERGER) STATEMENT
The purpose of this plat is to depict a (Boundary Line Adjustment)(Lot Merger), as proposed by the landowners and or their agents. This DOES NOT create a separate lot and is not considered a subdivision of land. Reference is made to the Town of Starksboro approval pursuant to BLA / LM Application #_____ dated _____ and is further subject to all requirements and conditions of said approval. The exchange of proper legal instruments is required to be filed to validate this lot reconfiguration. In the event these instruments are not filed as shown herein this plat and subsequent approval shall become null and void and the Lot(s) shall revert to their original configuration.

Signed this _____ day of _____, _____.

Zoning Administrator: _____ ZA Signature:_____

Definitions:

Property Owner (also referred to as "owner" or "landowner" or "Owner of Record" or "developer"): Name of Person(s) or Entities noted as the Owner of the Parcel on the current Grand List or most recent Warranty Deed Filing. If multiple names are provided, all must be noted and must sign all applications. If an Entity is noted (i.e. Star Farms, LLC), then the contact information for the person authorized to represent the entity must be provided.

Applicant: The person(s) or entity or firm authorized by the Owner to submit the application, act on the Owner's behalf in all matters relating to the application, and be responsible for communications between the Town and the Owner. If the person(s) or entity or firm submitting the application and acting on the Owner's behalf does not wish to be is not listed as the Applicant, then a separate letter of authorization signed by the Owner must accompany the application allowing this party to act on the Owner's behalf.

Sketch Plan Diagram Example:

