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LOT CONSOLIDATION/ SUBDIVISION APPLICATION

A. PROJECT INFORMATION

1. **APPLICATION IS:** ☐ Consolidation ☐ Subdivision

2. **EXISTING SITE INFORMATION**

Existing Site Address(es): _____

Existing Parcel ID(s)/Lot-and-Block Number(s): _____

3. **PROPOSED SITE INFORMATION** (If you need more space, use an additional sheet of paper)

Proposed Lot Area

Parcel	Proposed Total SF

4. **PROPOSAL CREATES NEW RIGHT-OF-WAY:** ☐ Yes ☐ No

B. CONTACT INFORMATION

Owner Name: _____

Owner Address: _____

Owner Contact (phone and email): _____

Is the owner also the applicant? ☐ Yes ☐ No

If No, complete applicant information below:

Applicant Name: _____

Applicant Address: _____

Applicant Contact (phone and email): _____

My signature (below) certifies that all information provided as part of this application is correct and that I am authorized by the legal property owner to make this application. By signing below I also acknowledge that I am responsible for all professional service costs associated with the project (including but not limited to Engineering and Solicitor Services).

Applicant or Owner Signature: _____ Date: _____