TOWN OF CHESTER

Application for Boundary Line Adjustment

Applicant name: _____ Address_____

Applicant Phone _____ Email _____

Landowner's name (if different): _____

Landowner's address (if different): _____

Location of property(s): _____

Zoning District _____ Number of lots (current) _____ (proposed) _____

Parcel 1 ID #) _____ acreage before adjustment_____ acreage after _____

Parcel 2 ID #) _____ acreage before adjustment_____ acreage after _____

Parcel 3 ID #) _____ acreage before adjustment_____ acreage after _____

The applicant / owners understand this application will NOT be considered complete until the following information is provided to the Zoning Administrator:

- Fee of $ _____ (base fee of $200)
- Short narrative from owner describing the project, and authorizing applicant as their representative as needed.
- 7 copies of a plot plan drawn to scale (100 feet to the inch) by a licensed surveyor and contain the information required in Article 4.12(F) (Required Submissions) and 4.13 (Boundary Line Adjustments) of the unified development bylaws.
- A PDF of the plot plan.

The applicant / owners further understand that the additional information listed on the "Applicants Checklist", which is attached to this application, must be completed, and submitted to the Zoning Administrator at least seven (14) days prior to your public hearing.

Applicant Signature _____ Date _____

Received by Zoning Administrator _____ Date _____