



## Application for Boundary Line Adjustment and Subdivision Plat Amendment

Fee: \$500.00

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

Name of proposed plat: \_\_\_\_\_ Boundary Line Adjustment & Subdivision  
Amendment

Owner of first Parcel:

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Telephone: \_\_\_\_\_

Email: \_\_\_\_\_

Owner of Second Parcel:

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Telephone: \_\_\_\_\_

Email: \_\_\_\_\_

Provide an existing map, drawn to scale at 1" = 10' (label as map #1); and a proposed map, after the adjustment, drawn to scale at 1" = 10' and label it Exhibit A.

Existing total area of the first parcel: \_\_\_\_\_ acres. Final total area after adjustment: \_\_\_\_\_ acres.

Provide description of the existing first parcel sharing a common boundary with the second parcel. Attach legal description and label it Exhibit B.

Existing total area of the second parcel: \_\_\_\_\_ acres. Final total area after adjustment: \_\_\_\_\_ acres.

Provide description of the existing second parcel sharing a common boundary with the first parcel. Attach legal description and label it Exhibit B.

Describe the agreement of the owners of both parcels if verbal, if written attach a copy:

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Surveyor:

Name: \_\_\_\_\_ License #: \_\_\_\_\_

Address: \_\_\_\_\_

Telephone: \_\_\_\_\_

Email: \_\_\_\_\_

Current zoning for the first parcel: \_\_\_\_\_

Current zoning for the Second parcel: \_\_\_\_\_

Any Zoning change will require a separate application for Zoning Change, different processing and additional fees. Any set-back or minimum lot size violations as a result of a boundary adjustment or a zone change will require a separate application for Variance, different processing and additional fees.

Reason for this application, whether encroachments or improvements, compliance with current zoning or other reason: (show encroachment, if any on sketch map)

If there is a Power of Attorney please attach a copy of the letter.

Subdivision: \_\_\_\_\_

Block Number: \_\_\_\_\_ Lot Number(s): \_\_\_\_\_

Ownership and Encumbrance Report: Owner of Record, all surface owners and lien holders, existing easements.

Tax Certificate from County Treasurer (attach)

Attach a list of all subdivision lot owners within 300 feet and their addresses (for small subdivision all owners must be included)

Does the Boundary Line adjustment assure legal access from a public road to both parcels?

Yes  No Show access to both parcels after adjustment on sketch map and describe:

\_\_\_\_\_

\_\_\_\_\_



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Describe any practical problems with any new access from a public road to both parcels (None, AWD only, 4 WD only, ATV only, motorcycle/bicycle only, or foot only):

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Show existing wells and water lines on sketch map. Does the boundary adjustment change ownership of any existing wells?  Yes  No

Show existing sewage systems on sketch map. Does the Boundary Line Adjustment change ownership of any portion of the existing sewage system?  Yes  No Describe:

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Describe solution to multiple ownership of the sewage system:

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Are there any existing liens against all or any portion of either parcel?  Yes  No

If yes, written permission from the lien-holder must be obtained. Whether yes or no include a current Ownership and Encumbrances report from a title company.

By Signing this Application, the owners warrant that this boundary line adjustment will not violate any covenants or property owners' association rules and regulations (in any form) that are applicable to either existing Parcel. If not true, please explain or N/A:

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Provide a signed letter from the "POA"

Upon preliminary approval of this application by the Board of County Commissioners have two Final Plats (minimum 16x20) (one mylar, one paper) prepared by a Colorado Licensed Professional Engineer for review by the Land Use Office and the Board of County Commissioners showing, at the least, the new lots and/or subdivision boundary configurations. The plat must include: Acknowledgments, Surveyors Certificate, Board of County Commissioners Acceptance and Mineral County Clerk and Recorder Certificates.

By Signing this Application, each of the applicants guarantees the truth and the accuracy of the statements in this application.





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Second Parcel Owner:

_____	_____	_____
Sign	Print	Date
_____	_____	_____
Sign	Print	Date

State of \_\_\_\_\_)  
County of \_\_\_\_\_)

On this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_, before me, a notary public in and of the state and county aforesaid, personally appeared \_\_\_\_\_ known to me to be the person(s) whose name is (are) subscribed to the foregoing Application and Acknowledged that he, she or they executed the same.

Witness my hand and official seal. My commission expires \_\_\_\_\_.

(Seal)

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