

APPLICATION #: _____
(Assigned by the Town Clerk)

Received:

TOWN OF STRAFFORD, VERMONT
Application for Lot Line Adjustment / and or
Annexation of a Parcel of Land

TO THE APPLICANT: the above are defined in Sections 3.3 and 3.4 of the Strafford Zoning Ordinance. No public hearing is required.

Name of Landowner (Print)

Telephone # or Cell #

Mailing Address

Physical Address

Email

Current Parcel Size in Acres or Dimensions of Parcel

Size of Parcel after Adjustment or Annexed

Parcel ID # _____ Deed Book: _____ Page: _____ Zone: _____

Adjoining property information (Lot Line Adjustment):

Name of Adjoining Landowner (Applicant 2)

Telephone # or Cell #

Mailing Address

Physical Address

Email

Current Parcel Size in Acres or Dimensions of Parcel

Size of Parcel after Adjustment or Annexed

Parcel ID # _____ Deed Book: _____ Page: _____ Zone: _____

Description of lot line adjustments or annexation: _____

Submit a copy of a sketch, to include all buildings, driveways, roads, and all surface waters (streams, rivers, ponds, wetlands) and other distinguishing features.

Each applicant has 180 days from approval to record with the Town a Mylar and new a deed describing the change in boundary lines.

I represent that all of the information provided with this application is true, correct and complete to the best of my knowledge and belief.

Applicant's Signature

Date

Applicant's Signature

Date

This annexation/lot line permit is ____ is not ____ approved by the ZA.

With the following conditions: _____

Denied/Reason: _____

Signature: _____

Zoning Administrator

Date: _____

Application Fee for Lot Line Adjustment / and or
Annexation of a Parcel of Land
\$150.00 plus recording fee