



# TOWN OF COLCHESTER APPLICATION FOR BOUNDARY LINE ADJUSTMENT

Application Number: **BLA**-\_\_\_\_\_-\_\_\_\_\_

Please submit in PDF format to [pzinfo@colchestervt.gov](mailto:pzinfo@colchestervt.gov)

The undersigned hereby applies for permission to adjust the boundary lines of their property as described below and in the attached plat.

## Property #1

Property #1 Address: \_\_\_\_\_

Property #1 Existing Lot Size:\_\_\_\_\_ Property #1 Proposed Lot Size:\_\_\_\_\_

Property #1 Owner: \_\_\_\_\_

Property #1 Phone and Email: \_\_\_\_\_

## Property #2

Property #2 Address: \_\_\_\_\_

Property #2 Existing Lot Size:\_\_\_\_\_ Property #2 Proposed Lot Size:\_\_\_\_\_

Property #2 Owner: \_\_\_\_\_

Property #2 Phone and Email: \_\_\_\_\_

## Property #3 (if applicable)

Property #3 Address: \_\_\_\_\_

Property #3 Existing Lot Size:\_\_\_\_\_ Property #3 Proposed Lot Size:\_\_\_\_\_

Property #3 Owner: \_\_\_\_\_

Property #3 Phone and Email: \_\_\_\_\_

## **Boundary Line Adjustment Application Materials:**

- ☐ Plat prepared by a Vermont licensed surveyor meeting the requirements of Appendix H
- ☐ Completed Boundary Line Adjustment Questionnaire (attached)
- ☐ Fee: \$368

I / We certify that all information, including attachments, in this application are complete, true and accurate.

\_\_\_\_\_  
Signature of Property Owner #1 or Authorized Agent

\_\_\_\_\_  
Signature of Property Owner #2 or Authorized Agent

\_\_\_\_\_  
Signature of Property Owner #3 or Authorized Agent

This is a local permit only. Other permits may be NECESSARY. To determine if other permits are required, contact the State Dist. Environmental office at (802) 477-2241 and the VT Dept. of Public Safety Division of Fire Safety at (802) 879-2300.

## **Supplement: Boundary Line Adjustment Questionnaire**

Please answer the following questions in order for the Planning & Zoning Department to assess how your proposal conforms to the Colchester Development Regulations (§9.02):

- |   |     |    |
|---|-----|----|
| 1. Documentation is included that indicates that the proposal is consistent with the State of Vermont Environmental Protection Rules Chapter 1.   | Yes | No |
| 2. The lots are of the same zoning.   | Yes | No |
| 3. No new lots are created through the adjustment.  | Yes | No |
| 4. The sale or exchange of parcels of land is between adjacent property owners.   | Yes | No |
| 5. The relocation of the lot-line does not result in the creation of a non-conforming lot, structure or use.  | Yes | No |
| 6. The proposed change does not violate any conditions imposed from prior municipal approvals.  | Yes | No |
| 7. The title block includes the following text: "This is a boundary line adjustment, not a subdivision. The Town does not confirm or attest to the accuracy of this document or related title issues. Further subdivision requires approval by the Development Review Board." | Yes | No |
| 8. The application is authorized by the owners of all lots at issue. For the purpose of this provision, "authorized" shall mean the actual signature of the affected property owners.   | Yes | No |

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Signature of Property Owner #1 or Authorized Agent

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Signature of Property Owner #2 or Authorized Agent

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Signature of Property Owner #3 or Authorized Agent

**THE FOLLOWING SECTION IS FOR PLANNING & ZONING OFFICE USE ONLY**

Application Number: \_\_\_\_\_

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

Account Numbers: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Zoning Districts: \_\_\_\_\_

Related Site Plan or Other Approval: \_\_\_\_\_

Application: Deemed Complete ☐ Deemed Incomplete ☐

Date of Determination: \_\_\_\_\_

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**ADMINISTRATIVE OFFICER ACTION**  
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☐ Application APPROVED

\_\_\_\_\_  
Date of Approval

\_\_\_\_\_  
☐ Administrative Officer

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

☐ Application DENIED

\_\_\_\_\_  
Date of Denial

\_\_\_\_\_  
☐ Administrative Officer

REASON for DENIAL:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**FEES**

Boundary Line Adjustment Fee: \$368

Fee Paid: \_\_\_\_\_