

Property Line Adjustment Application

CITY OF THE DALLES
Community Development Department
313 Court Street
The Dalles, OR 97058
(541) 296-5481, ext. 125
Fax (541) 298-5490

Date Filed _____
File# _____
Date Deemed Complete _____
Hearing Date _____
Approval Date _____
Permit Log # _____
Other Cross Reference# _____

APPLICANT/LEGAL OWNER PARCEL 1

APPLICANT/LEGAL OWNER PARCEL 2

Name _____

Name _____

Address _____

Address _____

Telephone # _____

Telephone # _____

Email Address: _____

Email Address _____

PROPERTY INFORMATION

Address _____

Map and Tax Lot _____

Zone District/Overlay _____ In City Limits: Yes _____ No _____

Square Footage: Current Parcel #1 _____; Current Parcel #2 _____; Current Parcel #3 _____

GENERAL INFORMATION

Describe current use of the property _____

REQUEST:

Proposed square footage: Parcel #1 _____; Parcel #2 _____; Parcel #3 _____

NOTE: Attach 4 copies of the preliminary plan, drawn to scale, with dimensions of the proposed parcels, existing buildings, setbacks, and significant land features. Indicate current and proposed parcel numbers on plan.

Signature of Applicant(s)/Owner(s)

Signature of Property Owner(s) or Agent

PLANNING APPROVAL: _____