

Town of Shrewsbury
Boundary Line Adjustment Application
Permit is subject to a 15 day appeal period

A Boundary Line Adjustment is a method of adjusting boundaries of adjacent lots without creating an additional lot and which does not cause any parcel of land involved to become nonconforming.

Name of Owner/Applicant #1: _____

Telephone # _____ Parcel ID# _____

Email Address: _____

Mailing Address: _____

Name of Owner/Applicant #2: _____

Telephone # _____ Parcel ID# _____

Email Address: _____

Mailing Address: _____

Describe the Proposed Boundary Line Change: _____

Provide a diagram/sketch that shows all dimensions of both the existing and revised lot boundaries and the location including setbacks to property lines, of all existing structures on both lots.

____ (1) a lot being reduced in size is being reduced by no more than two percent.

Description: _____

____ (2) a lot is increased in size.

Description: _____

____ (3) the boundary line being adjusted is located, after adjustment, at least 500 feet from the footprint of the building or structure on an improved lot.

Description: _____

____ The resulting lots satisfy all requirements of the districts in which they lie.

It is understood and agreed, that I will abide by the Shrewsbury Unified Zoning and Subdivision Regulations as last adopted by the Town of Shrewsbury or as hereinafter from time to time amended. This permit is voided in the event of misrepresentation or failure to undertake construction within the time period prescribed in Article III Sec. 332 and Sec. 333.

I hereby certify that the above information is correct and that this parcel of land is in compliance with the Town of Shrewsbury Unified Zoning and Subdivision Regulations.

Signature of Owner/ Applicant: _____

Date _____

Signature of Co-Applicant: _____

Date _____

**The Applicant is Responsible for any State Permits Required
Please contact Rick Oberkirch, State Permit Specialist at 282-6488 with questions.**

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Administrative Use Only

Approved: _____ Denied: _____ Reason for Denial: _____

Signed: _____

Date: _____