**CITY OF BAINBRIDGE ISLAND**

**BOUNDARY LINE ADJUSTMENT APPLICATION**

Form must be completed in ink, preferably blue. Pencil will not be accepted.

Note: The pages in this application are required to have a 1” border on all sides. Applicants can expect to pay $50 in recording fees for all pages with encroachments into the required border.

---

<table>
<thead>
<tr>
<th>DATE STAMP FOR CITY USE ONLY</th>
<th>TO BE FILLED OUT BY APPLICANT</th>
</tr>
</thead>
<tbody>
<tr>
<td>PROJECT NAME:</td>
<td></td>
</tr>
<tr>
<td>TAX ASSessor’S NUMBER:</td>
<td></td>
</tr>
<tr>
<td>PROJECT STREET ADDRESS OR ACCESS STREET:</td>
<td></td>
</tr>
<tr>
<td>FOR CITY USE ONLY</td>
<td></td>
</tr>
<tr>
<td>FILE NUMBER:</td>
<td></td>
</tr>
<tr>
<td>PROJECT NUMBER:</td>
<td></td>
</tr>
<tr>
<td>DATE RECEIVED:</td>
<td></td>
</tr>
<tr>
<td>APPLICATION FEE:</td>
<td></td>
</tr>
<tr>
<td>TREASURER’S RECEIPT NUMBER:</td>
<td></td>
</tr>
</tbody>
</table>

**SUBMITTAL REQUIREMENTS**

- **Application**: One original (which must contain an original signature) and three copies must be provided. Whenever possible, originals must be signed in blue. Please identify the original document.

- **Supporting Documents**: One original (which must contain an original signature), where applicable, and three copies (if an original is not applicable, four copies must be provided). For title reports, only a total of two copies must be submitted.

- **Full-size Drawings**: Four copies of the required drawings must be provided. Drawings must be folded and 18” x 24” in size. No construction drawings or other sized drawings will be accepted unless specifically requested.

- **Reduced Drawings**: Two copies of the drawings reduced to 11” x 17” must be provided.

- **Submitting Applications**: Applications must be submitted in person by either the owner or the owner’s designated agent. Should an agent submit the application, a notarized Owner/Applicant Agreement must accompany the application (owner/app agreement attached). Please call (206) 780-3762 to set up an appointment to submit the application.

- **Fees**: Please call the Department of Planning & Community Development for submittal fee information. Review by the Kitsap County Health Department may require additional fees and processing time.

- **Attached Submittal Checklist**: Please refer to attached Submittal Checklist for further information.

  NOTE: when submitting this application, please do not copy or include the Submittal Checklist sheets attached to the back of this application.

**APPLICATIONS WILL NOT BE ACCEPTED** unless these basic requirements are met and the submittal packet is deemed counter complete.

---

**DEPARTMENT OF PLANNING AND COMMUNITY DEVELOPMENT**

280 MADISON AVENUE NORTH • BAINBRIDGE ISLAND, WA • 98110-1812

PHONE: (206) 842-2552 • FAX: (206) 780-0955 • EMAIL: pcd@bainbridgewa.gov

December 2011
CITY OF BAINBRIDGE ISLAND
BOUNDARY LINE ADJUSTMENT APPLICATION
FORM MUST BE COMPLETED IN INK, PREFERABLY BLUE. PENCIL WILL NOT BE ACCEPTED.
Note: The pages in this application are required to have a 1” border on all sides. Applicants can expect to pay $50 in recording fees for all pages with encroachments into the required border.

A. GENERAL INFORMATION

1. Name of property owner: ____________________________________________________________
   Address: _______________________________________________________________________
   Phone: __________________ Fax: __________________
   E-mail: _______________________________________________________________________

Name of property owner: ____________________________________________________________
Address: _______________________________________________________________________
Phone: __________________ Fax: __________________
E-mail: _______________________________________________________________________

Name of property owner: ____________________________________________________________
Address: _______________________________________________________________________
Phone: __________________ Fax: __________________
E-mail: _______________________________________________________________________

If the owner(s) of record as shown by the county assessor’s office is (are) not the agent,
the owner’s (owners’) signed and notarized authorization(s) must accompany this application.

2. Authorized agent: __________________________________________________________________
   Address: _______________________________________________________________________
   Phone: __________________ Fax: __________________
   E-mail: _______________________________________________________________________

3. Person responsible for payment: ____________________________________________________
   Address: _______________________________________________________________________
   Phone: __________________ Fax: __________________
   E-mail: _______________________________________________________________________
CITY OF BAINBRIDGE ISLAND
BOUNDARY LINE ADJUSTMENT APPLICATION
FORM MUST BE COMPLETED IN INK, PREFERABLY BLUE. PENCIL WILL NOT BE ACCEPTED.
Note: The pages in this application are required to have a 1" border on all sides. Applicants can expect to pay $50 in recording fees for all pages with encroachments into the required border.

4. Project contact: ________________________________________________________________
   Address:  ________________________________________________________________
   Phone: ___________________________ Fax: ___________________________
   E-mail: ________________________________________________________________

5. Name of land surveyor: _________________________________________________________
   Address:  ________________________________________________________________
   Phone: ___________________________ Fax: ___________________________
   E-mail: ________________________________________________________________

6. Planning department personnel familiar with site: _________________________________

7. Description of proposal: _______________________________________________________
   ________________________________________________________________
   ________________________________________________________________
   ________________________________________________________________
   ________________________________________________________________

8. Driving directions to site: _____________________________________________________

9. Legal description(s) (or attach): ________________________________________________
   ________________________________________________________________
   ________________________________________________________________
   ________________________________________________________________
   ________________________________________________________________

DEPARTMENT OF PLANNING AND COMMUNITY DEVELOPMENT
280 MADISON AVENUE NORTH • BAINBRIDGE ISLAND, WA • 98110-1812
PHONE: (206) 842-2552 • FAX: (206) 780-0955 • EMAIL: pcd@bainbridgewa.gov
December 2011 PAGE 1 WILL BE GENERATED BY THE CITY AT TIME OF SUBMITTAL
10. Parcel information:

<table>
<thead>
<tr>
<th>Assessor’s Parcel Number</th>
<th>Parcel Owner</th>
<th>Is Property Developed?</th>
<th>Acreage Before Adjustment</th>
<th>Acreage After Adjustment</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td>Y / N</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>Y / N</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>Y / N</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>Y / N</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

11. Current comprehensive plan, zoning and shoreline designations and use of subject parcel(s):

<table>
<thead>
<tr>
<th>Lot Number</th>
<th>Comp Plan Designation</th>
<th>Zoning Designation</th>
<th>Shoreline Designation</th>
<th>Current Use</th>
</tr>
</thead>
<tbody>
<tr>
<td>Lot</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Lot</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Lot</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Lot</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

12. Does the site contain an environmentally sensitive area as defined in Critical Areas Ordinance (Bainbridge Island Municipal Code Chapter 16.20)?

☐ yes  ☐ no  ☐ unknown

If yes, check as appropriate:

☐ wetland*
☐ geologically hazardous area**
☐ wetland buffer*
☐ zone of influence**
☐ stream*
☐ slope buffer**
☐ stream buffer*
☐ fish and wildlife habitat area

* If your site includes a wetland or wetland buffer, a wetland report is required with your application.
** If your site includes a geologically hazardous area or is within the zone of influence as defined in Bainbridge Island Municipal Code 16.20, a geotechnical report may be required with your application.
CITY OF BAINBRIDGE ISLAND
BOUNDARY LINE ADJUSTMENT APPLICATION
FORM MUST BE COMPLETED IN INK, PREFERABLY BLUE. PENCIL WILL NOT BE ACCEPTED.
Note: The pages in this application are required to have a 1” border on all sides. Applicants can expect to pay $50 in recording fees for all pages with encroachments into the required border.

13. Was the land platted in the past? (If yes, a copy of recorded plat is required.) ☐ yes ☐ no ☐ unknown

14. Is there any other information which is pertinent to this project? ☐ yes ☐ no
If yes, please explain: ______________________________________________________
____________________________________________________
____________________________________________________
____________________________________________________
____________________________________________________

I hereby certify that I have read this application and know the same to be true and correct.

_________________________________________  _______________________________
*Signature of owner or authorized agent  Date

Please print name

_________________________________________  _______________________________
*Signature of owner or authorized agent  Date

Please print name

*If signatory is not the owner of record, the attached “Owner/Agent Agreement” must be signed and notarized

DEPARTMENT OF PLANNING AND COMMUNITY DEVELOPMENT
280 MADISON AVENUE NORTH • BAINBRIDGE ISLAND, WA • 98110-1812
PHONE: (206) 842-2552 • FAX: (206) 780-0955 • EMAIL: ped@bainbridgewa.gov

December 2011  PAGE 1 WILL BE GENERATED BY THE CITY AT TIME OF SUBMITTAL
CITY OF BAINBRIDGE ISLAND
BOUNDARY LINE ADJUSTMENT APPLICATION
FORM MUST BE COMPLETED IN INK, PREFERABLY BLUE. PENCIL WILL NOT BE ACCEPTED.

Note: The pages in this application are required to have a 1" border on all sides. Applicants can expect to pay $50 in recording fees for all pages with encroachments into the required border.

SUBMITTAL DOCUMENTS

Boundary line adjustments may be applied for by the owners of the property or the owners’ applicant (with owner/agent agreement) included in the proposed adjustment. A pre-application conference is not required for a boundary line adjustment. However, meeting with a City planner prior to application is advisable. Applications must be submitted in person at the City of Bainbridge Island, Department of Planning and Community Development. Please call (206) 780-3762 to set up an appointment. A complete application shall include all applicable items listed below:

- A completed application form provided by the city containing the original signatures of all property owners;
- A notarized Owner/Applicant agreement signed by all owners in the event the owners designate an agent to act in their stead;
- The legal description of each lot involved prior to the lot line adjustment;
- The legal description of each lot involved after the lot line adjustment;
- A scale drawing containing all the information required to be provided on the final boundary line adjustments plan pursuant to the sections below;
- Copies of draft deeds conveying title to the property being transferred pursuant to the boundary line adjustment if more than one property owner is involved; and
- Copies of any existing or proposed covenants or restrictions affecting the property or properties involved.
- Original deeds conveying title to the property being transferred pursuant to the boundary line adjustment if more than one property owner is involved; except that if the application only involves the aggregation of platted lots in common ownership, these deeds shall not be required;
- Copies of the title reports for the property or properties involved (only two copies of each is required).

INFORMATION ONLY – NOT TO BE SUBMITTED WITH APPLICATION
CITY OF BAINBRIDGE ISLAND
BOUNDARY LINE ADJUSTMENT APPLICATION

FORM MUST BE COMPLETED IN INK, PREFERABLY BLUE. PENCIL WILL NOT BE ACCEPTED.

Note: The pages in this application are required to have a 1” border on all sides. Applicants can expect to pay $50 in recording fees for all pages with encroachments into the required border.

If the department determines that the application and information submitted with the application comply with the requirements of this code and all other laws, the department shall request that the applicant provide a final boundary line adjustment plan. The final boundary line adjustment plan shall be prepared by a licensed surveyor on a mylar (stabilized drafting film) and shall include the following information:

☐ North arrow;
☐ Written and graphic scale;
☐ Existing property lines and proposed property lines for all lots involved;
☐ Legal description of all lots involved after the boundary line adjustment;
☐ All boundary lines on all lots involved, including a reference with proper bearings and distances;
☐ Identification of all lots involved as Lot 1, Lot 2, etc.;
☐ Area of each lot before and after the proposed change.
☐ Location and dimensions of all public or private rights-of-way and easements, whether existing or proposed, and designation of any adjacent streets;
☐ Location of access to all lots involved;
☐ Location of all existing structures on all lots involved, with distance from all boundary lines;
☐ Location of all utilities, including but not limited to, wells (and their radii), septic drain fields, reserve drain fields, infiltration facilities, and detention basins.
☐ The dimensions of the perimeter of the parcels with complete bearings, distances and curve data (including included angle, radius, and length).
☐ Signature blocks, with notarization language, for all property owners;
☐ Signature block for approval by community development administrator; and
☐ A surveyor’s certificate consistent with RCW 58.09.080 and all certificates and other information required by Chapter 58.09 RCW.

<table>
<thead>
<tr>
<th>Drawing Format</th>
</tr>
</thead>
<tbody>
<tr>
<td>Required size: 18&quot; x 24&quot;</td>
</tr>
<tr>
<td>Minimum scale: 1&quot; = 100’</td>
</tr>
<tr>
<td>Border: 1” minimum all sides</td>
</tr>
</tbody>
</table>

INFORMATION ONLY – NOT TO BE SUBMITTED WITH APPLICATION
Owner/Agent Agreement

The undersigned is (are) the owner(s) of record of the property identified by the Kitsap County Assessor’s account number __________________________, located at _____________________________________________.

Bainbridge Island, Washington. The undersigned hereby gives (give) consent and approval to __________________________ to act on his/her (their) behalf as his/her (their) agent to proceed with an application for (please check all items that apply):

- □ preapplication conference
- □ planning permits
- □ construction permits (i.e. building, water/sewer availability, right-of-way, etc)

on the property referenced herein. This agreement authorizes the agent to act on the owner’s behalf for the above checked applications through (date or specific phase) __________________________.

<table>
<thead>
<tr>
<th>Owner of Record</th>
<th>Date</th>
<th>Owner of Record</th>
<th>Date</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

STATE OF WASHINGTON  )
COUNTY OF KITSAP  ) SS.

On this _______ day of ____________, 20___, before me, the undersigned, a Notary Public in and for the State of Washington, duly commissioned and sworn, personally appeared: __________________________

________________________

WITNESS MY HAND AND OFFICIAL SEAL, hereto affixed the day and year in this certificate above written.

________________________

Notary Public in and for the State of Washington

Residing at __________________________

My appointment expires: __________________________