

VILLAGE OF YORKVILLE
LOT LINE ADJUSTMENT APPLICATION

The undersigned hereby applies for a lot line adjustment in the Village of Yorkville, pursuant to Section 28-8(b)(4) of the Village of Yorkville Code of Ordinances. The undersigned submits the following in support of their application:

APPLICANT:

NAME _____

ADDRESS _____

E-MAIL _____

PHONE _____

SUBJECT SITE(S) INFORMATION:

PROPERTY OWNER (if different from applicant) _____

PARCEL NUMBER(S) _____

PARCEL ADDRESS(ES) _____

SURVEYOR INFORMATION:

SURVEYOR NAME _____

SURVEYOR PHONE/E-MAIL _____

Please provide the following with a completed application:

- One electronic copy of a narrative describing the following, sent to michael@villageofyorkville.com:
 - Description of the subject sites by lot, block and recorded subdivision or by metes and bounds
 - Type of structures on the subject sites
 - Existing and proposed use of the structures or sites
 - Zoning district(s) within which the subject sites lie
- One electronic copy of a plat of survey and/or site plan layout consisting of a survey prepared by a professional land surveyor or other map drawn to scale showing the locations, boundaries, dimensions, uses and sizes of the following, sent to michael@villageofyorkville.com:
 - Subject sites, proposed parcel boundaries and parcel dimensions following adjustment
 - Dimensions for applicable street, side, rear and shore yard setbacks following adjustment
 - Existing and proposed structures
 - The location and size of any septic field, well, utilities and roadways
- One electronic copy of the proposed deed or other document of conveyance to be recorded to accomplish the lot line adjustment, sent to michael@villageofyorkville.com.
- Signed and notarized Pre-Development Reimbursement Agreement for the reimbursement of any administrative, legal, or engineering expenses incurred by the Village.

APPLICANT SIGNATURE: _____ DATE: _____

TO BE COMPLETED BY VILLAGE STAFF

Date Application Received: _____ Application Received By: _____

Date Application Forwarded to Administrator and Zoning Administrator for Review: _____

Approved by Administrator? Y / N Date of Approval by Administrator: _____

Approved by Zoning Administrator? Y / N Date of Approval by Zoning Administrator: _____

Date of Determination on Waiver/Modification by Village Board, if Necessary: _____

Date of Decision on Appeal by Board of Appeals, if Necessary: _____