

## CITY OF POMONA LOT LINE ADJUSTMENT PROCEDURE

The following documents are required before the plan check or processing fees can be received and the submittal and recordation procedures can be implemented.

- 1. A letter explaining the need for a Lot Line Adjustment. Include your name(s), address, telephone, email of applicant and the current owner(s).
- 2. Plan check and processing fee. (The cost is \$1,117.00 for a two-parcel lot line adjustment plus \$142.00 for each additional parcel plus \$3.91 processing fee). Additional recordation fee shall be assessed based on the number of pages that make the lot line adjustment packet.
- 3. One (1) e-copy each of the current Grant Deed(s) and Title Report(s) to show proof of ownership and easements. The Title Reports shall be no older than 90 days. The City reserves the right to request additional information if necessary, based on the City Surveyor's review and findings.
- 4. One (1) e-copy of a [8-1/2" x 11"] map labeled "Exhibit B"; land surveyor stamp and signature are required.
- 5. One (1) e-copy of the legal descriptions of the lots resulting from the proposed lot line adjustment, labeled "Exhibit A"; land surveyor stamp and signature are required.
- 6. If the project was reviewed by the Planning Commission, one (1) e-copy of the Planning Commission Resolution.
- 7. Completely fill out the attached Submittal Information Sheet, and obtain the atlas page number from the Engineering counter personnel.
- 8. One (1) copy of the current Tax Assessors map.

**NOTE: A Lot Line Adjustment submittal, any plan check or processing fees cannot be received or receipted until ALL of the above documents and information have been submitted.**

For inquiries regarding the Lot Line Adjustment submittal, call 909/620-2281.

# SUBMITTAL INFORMATION SHEET

PLEASE FILL IN THIS INFORMATION SO WE MAY QUICKLY REFERENCE YOUR PROJECT.

**LOCATION OF PROJECT:** \_\_\_\_\_

## APPLICANT

NAME: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP CODE: \_\_\_\_\_

CONTACT PERSON: \_\_\_\_\_

PHONE: ( \_\_\_\_\_ ) \_\_\_\_\_

EMAIL: \_\_\_\_\_

## OWNER

NAME: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP CODE: \_\_\_\_\_

CONTACT PERSON: \_\_\_\_\_

PHONE: ( \_\_\_\_\_ ) \_\_\_\_\_

EMAIL: \_\_\_\_\_

## ENGINEER/CONSULTANT

NAME: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP CODE: \_\_\_\_\_

CONTACT PERSON: \_\_\_\_\_

PHONE: ( \_\_\_\_\_ ) \_\_\_\_\_

EMAIL: \_\_\_\_\_

APN NO: \_\_\_\_\_

TRACT MAP, PARCEL MAP, LOT LINE ADJUSTMENT, LOT MERGER NO: \_\_\_\_\_

GRANT DEED NO: \_\_\_\_\_ DATE FILED: \_\_\_\_\_

PLANNING RESOLUTION NO: \_\_\_\_\_ DATE: \_\_\_\_\_

CITY ATLAS MAP NO: \_\_\_\_\_