

PLEASE FORWARD A
COPY OF THIS FILING
TRANSACTION TO:

City of Westport
Public Works Department
PO Box 505
Westport, WA 98595

CITY OF WESTPORT
PO Box 505
Westport, WA 98595
360-268-0835
APPLICATION FOR
BOUNDARY LINE ADJUSTMENT
City Review and Filing Fee \$200.00

BLA #: _____

APPLICANT _____
Mailing Address _____
City, State and Zip _____
Telephone _____

Assessor's Tax Parcel Number(s) of property included in this application: _____

Zoning district _____ Shoreline Designation (if applicable) _____

Description of Proposal: _____

Existing on-site structures (give lot numbers) _____
(SHOW LOCATION AND LABEL EACH STRUCTURE ON MAP)

Please Attach:

- A. Legal descriptions (current and proposed)
- B. Plat map with existing and proposed lot lines

I attest that I am the legal owner of all properties involved.

SIGNATURE: _____ DATE: _____

OFFICE USE ONLY

- The total number of lots, sites, tracts, or divisions is not increased.
- Minimum lot size and width requirements for the applicable zoning district are met.
 - Approved
 - Denied

Examined and reviewed this _____ day of _____, 20

Planning Department

OFFICIAL USE ONLY

Date Received _____ By _____ Fee Paid _____