



DEPARTMENT OF COMMUNITY & ECONOMIC DEVELOPMENT  
420 College Street SE, Lacey, WA 98503 (360) 491-5642

OFFICIAL USE ONLY

Date: \_\_\_\_\_

Case #: \_\_\_\_\_

Received By: \_\_\_\_\_

Planner: \_\_\_\_\_

Related Cases: \_\_\_\_\_

## BOUNDARY LINE ADJUSTMENT SUPPLEMENTAL

*(This form to be accompanied by the General Land Use Application)*

**NOTE: ALL DOCUMENTS FILED, EXCEPT MYLARS, MUST HAVE 1" MARGINS (TOP, BOTTOM & SIDES)**

**Applicant Name:** \_\_\_\_\_

Address: \_\_\_\_\_

City, State, Zip: \_\_\_\_\_

Telephone: \_\_\_\_\_

**Surveyor:** \_\_\_\_\_

Mailing Address: \_\_\_\_\_

City, State, Zip: \_\_\_\_\_

Telephone: \_\_\_\_\_

**Project Information:** Boundary Line Adjustment  Lot Consolidation

Address of parcels: \_\_\_\_\_

Tax parcel numbers of property included with this application: \_\_\_\_\_

Zoning district: \_\_\_\_\_ Minimum lot size per district requirements: \_\_\_\_\_

Proposed lot size: Lot 1 \_\_\_\_\_ Lot 2 \_\_\_\_\_ Lot 3 \_\_\_\_\_ Lot 4 \_\_\_\_\_

**The Following Shall Be Submitted For A Boundary Line Adjustment Or Lot Consolidation:**

- 10 copies of the Boundary Line Adjustment Supplemental form
- 10 copies of the General Land Use Application
- A plat certificate dated no more than 30 days prior to application submittal.
- 10 copies of the Boundary Line Adjustment/Lot Consolidation Map must be submitted with the application for review and shall be printed on 18" x 24" paper and must meet the following requirements:
  1. Be prepared by a licensed land surveyor in accordance with the Washington Administrative Code 332-130-050
  2. Be a scale drawing of the existing and proposed boundary lines
  3. Existing boundary lines shall be shown as dashed lines
  4. Proposed boundary lines shall be shown as solid lines
  5. The drawing shall include all lot measurements in feet, existing and proposed lot areas, the location of all improvements such as buildings, roads, easements, and other pertinent features
- Declaration of Boundary Line Adjustment – can be submitted separately or printed on the map
- All application fees
- A quit claim deed or real estate contract is required to ensure the conveyance of the property and **shall be recorded by the applicant after the boundary line adjustment application has been recorded. This document does not need to be submitted with the application materials;** however, the Thurston County Auditor's Office requires that this document be recorded following recording of the boundary line adjustment map. The BLA will not be finalized until the quit claim deed is recorded.

**Note: A mylar drawing will be required following review and approval of the Boundary Line Adjustment application; please do not submit the mylar drawing until it is requested by the City.**



STATE OF WASHINGTON }  
 }ss.  
COUNTY OF THURSTON }

On this day personally appeared before me \_\_\_\_\_ to me known to be the individual(s) described in and who executed the within and foregoing instrument, and acknowledged that \_\_\_\_\_ signed the same as \_\_\_\_\_ free and voluntary act and deed, for the uses and purposes therein mentioned.

GIVEN under my hand and official seal this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_

\_\_\_\_\_  
NOTARY PUBLIC in and for the State of  
Washington residing at: \_\_\_\_\_  
My appointment expires: \_\_\_\_\_

STATE OF WASHINGTON }  
 }ss.  
COUNTY OF THURSTON }

On this day personally appeared before me \_\_\_\_\_ to me known to be the individual(s) described in and who executed the within and foregoing instrument, and acknowledged that \_\_\_\_\_ signed the same as \_\_\_\_\_ free and voluntary act and deed, for the uses and purposes therein mentioned.

GIVEN under my hand and official seal this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_

\_\_\_\_\_  
NOTARY PUBLIC in and for the State of  
Washington residing at: \_\_\_\_\_  
My appointment expires: \_\_\_\_\_

STATE OF WASHINGTON }  
 }ss.  
COUNTY OF THURSTON }

On this day personally appeared before me \_\_\_\_\_ to me known to be the individual(s) described in and who executed the within and foregoing instrument, and acknowledged that \_\_\_\_\_ signed the same as \_\_\_\_\_ free and voluntary act and deed, for the uses and purposes therein mentioned.

GIVEN under my hand and official seal this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_

\_\_\_\_\_  
NOTARY PUBLIC in and for the State of  
Washington residing at: \_\_\_\_\_  
My appointment expires: \_\_\_\_\_

BOUNDARY LINE ADJUSTMENT # \_\_\_\_\_

## LEGAL DESCRIPTION OF PARCELS

Parcel A of Boundary Line Adjustment Number \_\_\_\_\_ described as follows:

---

---

---

---

---

Parcel B of Boundary Line Adjustment Number \_\_\_\_\_ described as follows:

---

---

---

---

---

Parcel C of Boundary Line Adjustment Number \_\_\_\_\_ described as follows:

---

---

---

---

---

Parcel D of Boundary Line Adjustment Number \_\_\_\_\_ described as follows:

---

---

---

---

---

I hereby certify that the above legal descriptions are accurate and in compliance with the Subdivision Code. Said descriptions (are) (are not) based upon a Recorded Survey.

Submitted this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_

\_\_\_\_\_  
Name of Title Company or Surveyor

\_\_\_\_\_  
Signature

# BOUNDARY LINE ADJUSTMENT MAP

DATE: \_\_\_\_\_ Boundary Line Adjustment #BLA- \_\_\_\_\_

SECTION:	TOWNSHIP:	RANGE:
----------	-----------	--------

## CERTIFICATION OF CONFORMANCE

This Boundary Line Adjustment is found in conformance with City of Lacey Subdivision Ordinance 15.04.

\_\_\_\_\_  
Planning Department

**FOR AUDITOR'S USE ONLY**

_____ _____ _____
-------------------------