



101 S. MAIN ST, GALENA, MARYLAND 21635  
 410.648.5151  
 info@townofgalena.com  
 www.townofgalena.com

# LOT LINE ADJUSTMENT

R1  R2  C1  C2  I

<b>PERMIT NUMBER:</b> <b>20 -</b>	<b>FEE: \$200</b> <small>Does not include cost of survey</small>	<b>TODAY'S DATE:</b>	<b>ACCEPTED BY:</b>
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P. O. /AGENT NAME:		TAX MAP: <b>300</b> PARCEL:		LOT/UNIT:	
ADDRESS:					
CITY/TOWN:		ZIP:			
PHONE:				SUBD:	
EMAIL:		RENTAL PROPERTY? <input type="radio"/> Y <input type="radio"/> N			
SITE ADDRESS:		GALENA, MD 21635		ESTIMATED VALUE OF WORK \$:	

SURVEYOR OR ENGINEER (PRINTED):	
ADDRESS:	
CITY/TOWN:	EMAIL:
TOTAL # OF LOTS:	<i>List information for each lot before adjustments. If needed, add an additional sheet.(s)</i>

#1	ZONED:	TAX MAP: <b>300</b>	LOT:	SUBD:
	ADDRESS:			
	LOT AREA IN SQ FT:	SET BACK: FRONT	SIDE:	REAR:
#2	ZONED:	TAX MAP:	LOT:	SUBD:
	ADDRESS:			
	LOT AREA IN SQ FT:	SET BACK: FRONT	SIDE:	REAR:

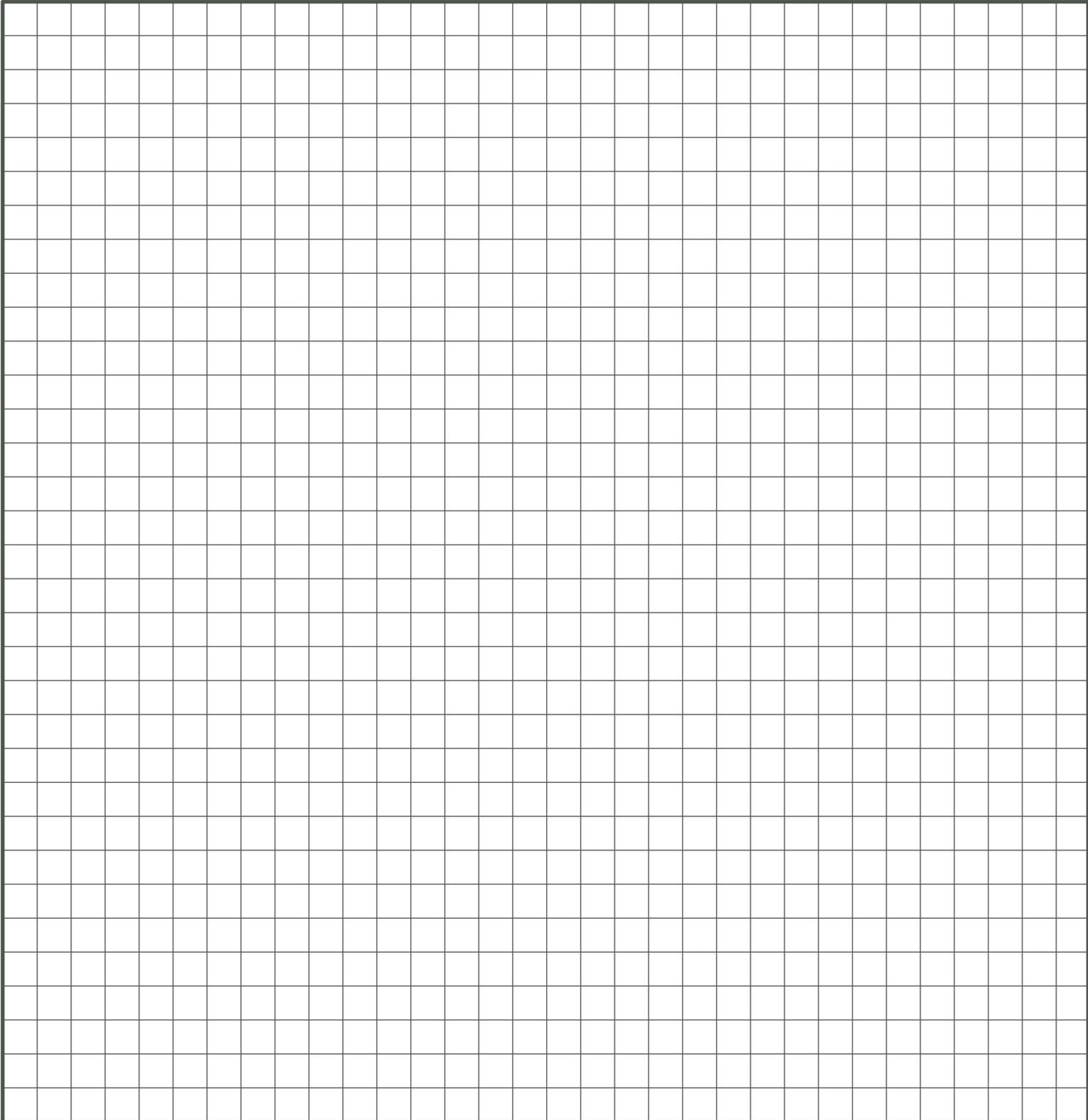
PURPOSE:

REVIEW: 1. Submit 1 digital copy and 1 full size paper copy 2. Applicant will be notified of the date and time of the Planning and Zoning Meeting.	APPROVAL LINES: <input type="checkbox"/> Zoning Coordinator, Town of Galena <input type="checkbox"/> Chairman-Town of Galena Planning Commission <input type="checkbox"/> Kent County Tax Assessment office
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APPLICANT/AGENT'S SIGNATURE _____	DATE: _____
<i>Applicant hereby agrees to comply with all regulations applicable hereto and further agrees that any misstatements or misrepresentation of facts or any other change within the approval of the agencies concerned shall constitute sufficient grounds for denial for the permit.</i>	

DATE:	DATE:
ZONING COORDINATOR:	PLANNING COMMISSION CHAIR:
COMMENTS:	COMMENTS:

# LOT LINE ADJUSTMENT



Scale: 1/4" =	<b>SITE PLAN</b>	<i>Do not use pencil</i>	<i>Legal Description Required</i>
Site Address:			
P.O. Name:			
<b><i>This site plan is an accurate and complete representation of the footprint(s) of all existing and proposed structure(s) and their location(s) on the subject property.</i></b>			
Applicant's Signature			
Date:			