



**CITY OF RIDGECREST – PLANNING DEPARTMENT**  
**100 West California Avenue**  
**Ridgecrest, CA 93555-4054 (760) 499-5071 or 5063**  
**FAX (760) 499-1580**

DATE \_\_\_\_\_ Project Description \_\_\_\_\_

**APPLICATION FOR PARCEL MERGER/LOT LINE ADJUSTMENT**

Parcel Merger (Simple one)	\$210.00 _____
Lot Line Adjustment (Simple one)	\$210.00 _____
Categorical Exemption (if necessary)	\$ 60.00 _____

APPLICANT'S NAME \_\_\_\_\_

APPLICANT'S ADDRESS \_\_\_\_\_

APPLICANT EMAIL \_\_\_\_\_ Phone No. \_\_\_\_\_

PROPERTY OWNER'S NAME **(Must have signature or authorization letter from property owner.)**

PROPERTY OWNER'S ADDRESS \_\_\_\_\_

PROPERTY DESCRIPTION (Address, Assessor's Parcel Number, Parcel Map Number and Lot, Tract Number and Lot, or other acceptable property description):

I (we), the undersigned hereby certify that I am (we are) **the owners** of the above described property or that I am the authorized agent of the owner **(with authorization letter attached)**. Executed under penalty of perjury this

\_\_\_\_\_ day of \_\_\_\_\_ 20\_\_\_\_\_.

Applicant \_\_\_\_\_  
 Print Name and Sign

Owner \_\_\_\_\_  
 Print Name and Sign **(Or attach Letter)**

Date \_\_\_\_\_

Date \_\_\_\_\_

Telephone \_\_\_\_\_

Telephone \_\_\_\_\_

Email \_\_\_\_\_

Email \_\_\_\_\_

Existing Use of Property \_\_\_\_\_

Proposed Use of Property \_\_\_\_\_

**Planning Department Use**

Date Application Received: \_\_\_\_\_ By: \_\_\_\_\_

Application Complete: \_\_\_\_\_ Items Missing \_\_\_\_\_

Electronic Copy Received \_\_\_\_\_ Zoning \_\_\_\_\_ General Plan Designation \_\_\_\_\_

Staff Assigned: \_\_\_\_\_ Case # \_\_\_\_\_

Sent to Record: _____	
Recording Info: Date: _____	# _____
Copy sent to Applicant _____ :	

**MINIMUM APPLICATION PACKAGE REQUIREMENTS FOR LOT MERGER OR LOT LINE ADJUSTMENTS**

- \_\_\_ 1. APPLICATION
- \_\_\_ 2. APPLICATION FEE (\$210)
- \_\_\_ 3. ASSESSOR'S PARCEL MAP with subject parcels marked.
- \_\_\_ 4. SITE DRAWING showing existing Parcels and any existing buildings with before and after lot lines.
- \_\_\_ 5. ONE 8 ½ X 11 REDUCED MAP (if necessary)
- \_\_\_ 6. PROOF OF OWNERSHIP (Title Report, Preliminary Title Report, Grant Deed, or Property Profile less than 30 days old)
- \_\_\_ 7. TITLE REPORT to **verify easements.**
- \_\_\_ 8. LETTER OF REQUEST WITH DESCRIPTION OF PROJECT
- \_\_\_ 9. CURRENT TAX STATEMENT (Proof taxes are paid)
- \_\_\_ 10. CHECK PAYABLE TO **KERN COUNTY** for recording fees. Verify fees with planning prior to mailing. Fees effective Jan. 1, 2018: \$13.00 for first page and \$3.00 for each additional.
- \_\_\_ 11. LEGAL DESCRIPTIONS: Label the **Before** Lot Line Adjustment or Merger = "**Exhibit A**"  
Label the **After** Lot Line Adjustment or Merger = "**Exhibit B**"

**Lot Line Adjustment—Legals must be prepared and signed by a Licensed Surveyor/Engineer.**