

**LOT LINE ADJUSTMENT (LLA)**

LDC section 4.03.04 and other provisions of the LDC, Chapter 5 of the Administrative Code

**Applicant Contact Information**

Name of Owner: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ ZIP: \_\_\_\_\_

Phone: \_\_\_\_\_ E-Mail Address: \_\_\_\_\_

Name of Agent: \_\_\_\_\_ Firm: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ ZIP: \_\_\_\_\_

Phone: \_\_\_\_\_ E-Mail Address: \_\_\_\_\_

Name of Applicant (if different than owner or agent): \_\_\_\_\_

**Project Information**

Provide a detailed legal description of the property covered by the application, if space is inadequate attach on a separate page: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

Project Name: \_\_\_\_\_

Address of subject site and general location: \_\_\_\_\_

\_\_\_\_\_

Property ID Number Lot A: \_\_\_\_\_ Lot B: \_\_\_\_\_ Lot C: \_\_\_\_\_

Zoning Designation: Lot A: \_\_\_\_\_ Lot B: \_\_\_\_\_ Lot C: \_\_\_\_\_

Section/Township/Range: \_\_\_\_ / \_\_\_\_ / \_\_\_\_

Metes and Bounds Description: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

Subdivision: \_\_\_\_\_ Unit: \_\_\_\_\_ Lot: \_\_\_\_\_ Block: \_\_\_\_\_

# Collier County

## Submittal Requirement Checklist

The following Submittal Requirement checklist is to be utilized at time of application submittal. See Chapter 5 of the Administrative Code for submittal requirements. Incomplete submittals will not be accepted.

REQUIREMENTS FOR REVIEW:	REQUIRED
<b>Application</b>	<input checked="" type="checkbox"/>
<a href="#">Addressing Checklist</a>	<input checked="" type="checkbox"/>
<a href="#">Affidavit of Authorization/Evidence of Authority</a>	<input checked="" type="checkbox"/>
<a href="#">Property Ownership Disclosure Form</a>	<input checked="" type="checkbox"/>
<b>Cover Letter/Narrative</b> describing the reason for the lot line adjustment and proposed reconfiguration	<input checked="" type="checkbox"/>
<b>Property Card</b>	<input checked="" type="checkbox"/>
<b>Survey</b> showing location of proposed access, including location of the proposed access easements, if any	<input checked="" type="checkbox"/>
<b>Warranty Deeds/Proof of Ownership</b>	<input checked="" type="checkbox"/>
Original signed Lot Line Affidavit Note: A PDF of the Lot Line Affidavit will be acceptable for the initial submittal. Do not submit original affidavit at time of submittal. When approved, the applicant will be notified to send in the Original signed Lot Line Affidavit to the Development Review Division	<input checked="" type="checkbox"/>
<b>Affidavit of all Owners</b> Affidavit signed by all property owners that they consent to the lot line adjustment and resulting lot formation, and the following included attachment: <ul style="list-style-type: none"> <li>• Drawings that clearly show the original and the proposed configurations of the lots involved, including acreages;</li> <li>• Lot width before and after, calculated according to the LDC definition of "lot measurement, width";</li> <li>• Lot width provided to depth equal to that of minimum required front yard;</li> <li>• A table and drawing showing setbacks required by the zoning district as they apply to the reconfigured lots; and</li> <li>• Copy of signed and sealed survey by a professional surveyor and mapper showing all structures on each lot or noted as "vacant." The existing and proposed setbacks shall be included on the survey.</li> </ul>	<input checked="" type="checkbox"/>
<b>Lot Line Adjustment Affidavit</b>	<input checked="" type="checkbox"/>
Electronic copies of all documents and plans in PDF Format and CAD Format email to <a href="mailto:cad-submittals@collier.gov">cad-submittals@collier.gov</a>	<input checked="" type="checkbox"/>

## Fees

- **Lot Line Adjustment: \$250.00**

**LOT LINE ADJUSTMENT AFFIDAVIT**

NOW COMES \_\_\_\_\_, who being duly sworn, depose and say:

1. \_\_\_\_\_ are the fee simple title holders to that property legally described as \_\_\_\_\_ (hereafter Lot "A").
2. \_\_\_\_\_ are the fee simple title holders to that property legally described as \_\_\_\_\_ (hereafter Lot "B").
3. (If applicable) \_\_\_\_\_ are the fee simple title holders to that property legally described as \_\_\_\_\_ (hereafter Lot "C").
4. The parties desire to (please check one):
  - a) adjust a lot line and create two revised Lots, as depicted in the sketch and legal descriptions prepared by \_\_\_\_\_, Florida Professional Land Surveyor # \_\_\_\_\_, attached hereto and made a part of here as Exhibit "A"; or
  - b) adjust the center of and extinguish Lot "B", so that a portion of Lot "B" becomes annexed to and a part of Lot "A", and a portion of Lot "B" becomes annexed to and a part of Lot "C", as depicted in the sketches and legal descriptions prepared by \_\_\_\_\_, Florida Professional Surveyor # \_\_\_\_\_, attached hereto and made a part hereof as Exhibit "A".
5. \_\_\_\_\_, as the owner(s) of said Lot "A", hereby consents to the lot line adjustment and resulting lot formation in accordance with LDC section 4.03.04.
6. \_\_\_\_\_, as the owner(s) of said Lot "B", hereby consents to the lot line adjustment and resulting lot formation in accordance with LDC section 4.03.04.
7. \_\_\_\_\_, as the owner(s) of said Lot "C", hereby consents to the lot line adjustment and resulting lot formation in accordance with LDC section 4.03.04.
8. The lot line adjustment meets the standards of, and conforms to, the requirements of LDC section 4.03.04, including the dimensional requirements of the zoning district and subdivision where the lots are located.
9. The property described hereon is Zoned \_\_\_\_\_ and meets the intent of the LDC, as amended.
10. Furthermore, the lot line adjustment will not affect the development rights or permitted density or intensity of use of the affected lots by providing the opportunity for the creating of new lots for resale or development within the meaning of LDC section 4.03.04.
11. This Affidavit has been reviewed and approved by \_\_\_\_\_ of the Growth Management Department of Collier County, Florida on the \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_.

**SIGNATURES OF OWNERS:**

SIGNATURE:	SIGNATURE:	SIGNATURE:
PRINT NAME:	PRINT NAME:	PRINT NAME:

ACKNOWLEDGEMENT

STATE OF FLORIDA  
COUNTY OF \_\_\_\_\_

The foregoing instrument was acknowledged before me by means of  physical presence or  online notarization this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_, by \_\_\_\_\_, who  is personally known to me or  has produced \_\_\_\_\_ as identification.

\_\_\_\_\_  
(Signature of Notary Public)

(affix notarial seal)

\_\_\_\_\_  
(Print Name of Notary Public)

STATE OF FLORIDA  
COUNTY OF \_\_\_\_\_

The foregoing instrument was acknowledged before me by means of  physical presence or  online notarization this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_, by \_\_\_\_\_, who  is personally known to me or  has produced \_\_\_\_\_ as identification.

\_\_\_\_\_  
(Signature of Notary Public)

\_\_\_\_\_  
(Print Name of Notary Public)

(affix notarial seal)

STATE OF FLORIDA  
COUNTY OF \_\_\_\_\_

The foregoing instrument was acknowledged before me by means of  physical presence or  online notarization this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_, by \_\_\_\_\_, who  is personally known to me or  has produced \_\_\_\_\_ as identification.

\_\_\_\_\_  
(Signature of Notary Public)

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(Print Name of Notary Public)

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\_\_\_\_\_  
(Signature of Notary Public)

\_\_\_\_\_  
(Print Name of Notary Public)

(affix notarial seal)