

BOUNDARY LINE ADJUSTMENT

APPLICATION PACKET

ADMINISTRATIVE OFFICER APPROVAL REQUIRED

GENERAL APPLICATION INSTRUCTIONS

Effective Date: July 1, 2010

Last amended: May 14, 2018

PURPOSE: The approval of minor changes to the boundaries of parcels between owners of adjacent parcels of land, assuming one property owner is conveying property and the other property owner is receiving property, or that there is some form of mutual property swap. A boundary line adjustment cannot be used to create a new lot. A boundary line adjustment must comply with the requirements established by the Cerro Gordo County Auditor's office and the Zoning and Building Code regulations of the City of Mason City.

FEE: \$25.00 to be paid at the time of application.

APPLICATION PROCESS:

Please fill out the attached *Application Form* and *Application Checklist* along with **all required supporting documentation** to the Development Services Department for administrative review and decision.

APPROVAL PROCESS:

The Administrative Officer shall approve or deny the request based on the application and other relevant information.

If approved, the transaction must be completed by recording the conveying deed with the Cerro Gordo County Recorder's Office. The Administrative Officer will also notify the Cerro Gordo County Auditor that the boundary line adjustment has been approved.

If denied, the decision can be appealed to the Zoning Board of Adjustment.

If you need assistance completing this application or have questions about the application process, please contact the Development Services Department at 641-421-3626 or visit the office in person on the 3rd floor of City Hall, 10 First St. NW, Mason City.

BOUNDARY LINE ADJUSTMENT APPLICATION CHECKLIST

A complete Boundary Line Adjustment Application includes the following items. This checklist is provided for your use to organize your application; please attach a copy to your application. City Staff will also use it to review your application packet for completeness.

APPLICANT USE	APPLICATION ELEMENT	STAFF USE ONLY
_____	Completed Application Form	
_____	\$25 Application Fee	
_____	Final Boundary Line Adjustment Application Checklist (this form)	
_____	A copy of the deed showing ownership of the conveying parcel (the parcel from which land will be severed and conveyed to the abutting property owner).	
_____	A copy of the deed showing ownership of the receiving parcel (the parcel that the severed land will be attached to).	
_____	A copy of the draft deed that will convey the property that includes the complete legal description of the property being conveyed.	
_____	<p><u>ORIGINAL</u> Survey* prepared by an Iowa Licensed Land Surveyor showing:</p> <ul style="list-style-type: none"> • existing and proposed common property lines; • legal description of the property being conveyed; • location and dimensions of existing structures on the conveying and receiving properties (if there are any structures on either parcel, and; • required City signature block.** 	

* If there are no structures on both the conveying and receiving parcel, a survey may not be required. Contact the Planning and Zoning Manager to determine if this requirement can be waived.

** The required signature block to be placed on the survey shall measure no less than 1 ½ inches high by 3 inches wide and shall contain the following text:

This boundary line adjustment has been reviewed and approved by the City of Mason City.	
<div style="border-bottom: 1px solid black; height: 1.2em; margin-bottom: 2px;"></div> Administrative Officer for the City of Mason City, Iowa	<div style="border-bottom: 1px solid black; height: 1.2em; margin-bottom: 2px;"></div> Date

BOUNDARY LINE ADJUSTMENT APPLICATION

Please print or type

CONVEYING PROPERTY (PARENT PROPERTY):

Owner's Name(s) _____

Owner's Address _____

City _____ State _____ Zip _____

Phone _____ eMail _____

Address of Parcel being divided _____

Auditor's Parcel Number of parcel being divided _____

RECEIVING PROPERTY (CHILD PROPERTY):

Owner's Name(s) _____

Owner's Address _____

City _____ State _____ Zip _____

Phone _____ eMail _____

Address of Parcel being added to _____

Auditor's Parcel Number of parcel being added to _____

I/We, the undersigned owner(s) of the land identified above, request that the City of Mason City approve a boundary line adjustment pursuant to Title 11-3-2 of the Mason City Municipal Code, and declare this application is made with the free consent and in accordance with the desire of the owner(s). The undersigned further acknowledge(s) that the approval and recording of this document does not establish new title lines. Further, I/We have also been notified to execute a deed consistent with this boundary line adjustment which must then be recorded with the Cerro Gordo County Recorder.

Parent Parcel Owner's Signature _____ Date _____

Parent Parcel Owner's Signature _____ Date _____

Child Parcel Owner's Signature _____ Date _____

Child Parcel Owner's Signature _____ Date _____

Purpose of the boundary line adjustment:

Rcv'd on: _____ By: _____ DRC? _____ DRC date: _____

