

# LOT MERGER

I.C. PLANNING & DEVELOPMENT SERVICES DEPT  
801 Main Street, El Centro, CA 92243 (760) 482-4236

**- APPLICANT MUST COMPLETE ALL NUMBERED (black) SPACES - Please type or print -**

1. PROPERTY OWNER'S NAME	EMAIL ADDRESS	
2. MAILING ADDRESS	ZIP CODE	PHONE NUMBER
3. ENGINEER'S NAME	CAL. LICENSE NO.	EMAIL ADDRESS
4. MAILING ADDRESS	ZIP CODE	PHONE NUMBER
5. PROPERTY "A" (site) ADDRESS	LOCATION	
6. PROPERTY "A" ASSESSOR'S PARCEL NO.(s)	SIZE OF PROPERTY (in acres or square foot)	
7. EXISTING USE		CURRENT ZONE
8. PROPERTY "A" LEGAL DESCRIPTION (attach separate sheet if necessary)		
9. PROPERTY "B" (site) ADDRESS	LOCATION	
10. PROPERTY "B" ASSESSOR'S PARCEL NO.(s)	SIZE OF PROPERTY (in acres or square foot)	
11. EXISTING USE		CURRENT ZONE
12. PROPERTY "B" LEGAL DESCRIPTION (attach separate sheet if necessary)		
13. EXPLAIN PURPOSE/REASON FOR LOT MERGER		
14. PROPOSED MERGED PARCEL SIZE		
PROPOSED USE		

**PLEASE PROVIDE CLEAR & CONCISE INFORMATION (ATTACH SEPARATE SHEET IF NEEDED)**

15. DESCRIBE PROPOSED SEWER SYSTEM(s)	_____
16. DESCRIBE PROPOSED WATER SYSTEM	_____
17. DESCRIBE PROPOSED ACCESS TO MERGED PARCEL	_____
18. IS THIS PARCEL PLANNED TO BE ANNEXED? <input type="checkbox"/> Yes <input type="checkbox"/> No	IF YES, TO WHAT CITY or DISTRICT?

I / WE THE LEGAL OWNER (S) OF THE ABOVE PROPERTY CERTIFY THAT THE INFORMATION SHOWN OR STATED HEREIN IS TRUE AND CORRECT.

Print Name (owner)	Date
Signature (owner)	
Print Name (Agent)	Date
Signature (Agent)	

An owners notarized affidavit is required if application is signed by Agent.

**REQUIRED SUPPORT DOCUMENTS**

A. SITE PLAN	_____
B. PROPOSED LEGAL DESCRIPTION	_____
C. PRELIMINARY TITLE REPORT (6 months or newer)	_____
D. FEE	_____
E. OTHER	_____

APPLICATION RECEIVED BY: _____	DATE _____	REVIEW / APPROVAL BY OTHER DEPT'S required.
APPLICATION DEEMED COMPLETE BY: _____	DATE _____	<input type="checkbox"/> P. W.
APPLICATION REJECTED BY: _____	DATE _____	<input type="checkbox"/> E. H. S.
TENTATIVE HEARING BY: _____	DATE _____	<input type="checkbox"/> A. P. C. D.
FINAL ACTION: <input type="checkbox"/> APPROVED <input type="checkbox"/> DENIED	DATE _____	<input type="checkbox"/> O. E. S.
		<input type="checkbox"/> _____
		<input type="checkbox"/> _____

MERG#

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# INSTRUCTIONS

## (MINIMUM REQUIREMENTS)

1. MUST SHOW SHAPE AND ALL DIMENSIONS OF PARCELS.
2. MUST SHOW ALL EXISTING STRUCTURES AND LOCATION, BOTH ABOVE AND BELOW GROUND.
3. MUST SHOW ALL UTILITIES INCLUDING: SEPTIC TANK, LEACH FIELDS, SERVICE DROP LINES, WATER LINES, GAS LINES, ETC.
4. MUST SHOW DIMENSION(S) BETWEEN STRUCTURE(S) TO PROPERTY LINE AND BETWEEN SEPTIC SYSTEM AND STRUCTURE.
5. MUST SHOW ADJACENT ACCESS ROADS AND DRIVEWAY.
6. MUST HAVE A NORTH ORIENTATION SYMBOL.
7. MUST HAVE APPLICANT'S NAME.
8. MUST SHOW ASSESSOR'S PARCEL NUMBER, LEGAL DESCRIPTION AND PROPERTY SIZE.
9. MUST SHOW PROPOSED LOT MERGER. THIS MUST BE SHOWN AS DASHED AND LABELED PROPOSED LOT MERGER WITH DIMENSIONS FROM EXISTING LOT LINE.
10. MAP MUST BE DRAWN TO SCALE ON A MINIMUM OF 8" X 14" SIZE PAPER.
11. MUST SHOW ALL EASEMENTS, RIGHT-OF-WAYS, ETC.

**CAUTION:** INCOMPLETE OR INACCURATE MAPS OR APPLICATION WILL RESULT IN THE APPLICATION BEING REJECTED.