LAND USE SERVICES DEPARTMENT
Planning Division

San Bernardino Office
385 N. Arrowhead Ave., First Floor
San Bernardino, CA 92415

Phone: (909) 387-8311
Fax: (909) 387-3223

Hesperia Office
15900 Smoke Tree St.
Hesperia, CA 92345

Phone: (760) 995-8140
Fax: (760) 995-8167

www.sbcounty.gov/uploads/LUS/Planning/Applications/LotLineAdjustment.pdf

LOT LINE ADJUSTMENT
INFORMATION SHEET AND APPLICATION

Fees: **$3,594.00*** (L633/L697) (L633/L697 ***this includes a $25 Job Closure fee, which is not applicable when application submitted electronically through the ePlans system.)

The County Development Code requires a Lot Line Adjustment approval when a property owner wants to adjust the lot line between at least two, but no more than four, adjacent parcels. In a Lot Line Adjustment, land is taken from one parcel and added to an adjacent parcel. No additional parcels may be created and the number of parcels may not be reduced.

Typical reasons for a lot line adjustment include:

1. Elimination of existing encroachments.
2. Meeting the minimum area requirements of the Development Code.
3. Meeting building code setback requirements.
4. Accommodating topographic features.

The Director of Land Use Services approves Lot line adjustments. Any interested party may appeal the decision of the Director prior to the effective date of the decision. Before approving a Lot Line Adjustment, the Director must be able to make the following findings:

1. The proposed lot line adjustment is consistent with the San Bernardino Consolidated General Plan, Development Code, and any Specific Plans.
2. The proposed lot line adjustment will not adversely affect public health and safety.

Please use this information sheet as a checklist to assemble the materials required for the submittal of your Lot Line Adjustment application and bring it with you when you submit your application. An appointment is not required to submit your application; however, appointments are available upon request. If you wish to schedule an appointment, please call one of the numbers listed above.

CHECKLIST OF SUBMITTAL MATERIALS

Please use this checklist as you assemble the materials for the submittal of your application. County staff will use the checklist to determine whether your application is acceptable for submission. **If your submittal package does not contain all of the information listed below, your application will not be taken in and receipted for processing.** If you have any questions about the items requested or if you wish to obtain information on processing schedules, please call the Application Intake Center at (909) 387-8311 or (760) 995-8140.

Section A – Fees

1. _____ Check or money order made payable to San Bernardino County in the amount of **$3,594.00***

Planning Review Fee (L633)	$**3,569.00**
Records Media Conversion for Job Closure (L697)	25.00
TOTAL	**$3,594.00***

(L632/L697 ***this includes a $25 Job Closure fee, which is not applicable when application submitted electronically through the ePlans system.)

Section B - County Documents

2. _____ **Four copies** of a completed Land Use Application Questionnaire.
3. _____ **One copy** of a completed Hazardous Waste Site Certification form contained in this packet.

Section C – Other Documents

4. _____ **One original and four copies** of the property plot plan.
5. _____ **One copy** of the plot plan reduced to 11" X 17" if original is larger.
6. _____ **One copy** of the recorded Grant Deed or Quit Claim Deed with the previous Grant Deed for each lot or parcel. *If either the Grantor or Grantee is a Corporation, Partnership, or Fictitious Firm, one certified copy each of the Articles of Incorporation including the latest statement of officers, the Partnership Papers (limited or general), or the recorded Fictitious Business Name Statement naming the owner(s) of the firm.*
7. _____ **One copy** of the appropriate Assessor's map. This may be obtained from the Assessor's Office.
8. _____ **One copy** of the United States Geological Survey (USGS) Map of the project area clearly showing project boundaries and labeled with the quadrangle map name and applicant's name. A legible photocopy is acceptable. The USGS map may be purchased at a local blueprint company.
9. _____ **Two copies** of a Preliminary Title Report no more than 60 days old for each lot or parcel.
10. _____ **One copy** of a survey map if a Licensed Land Surveyor or Civil Engineer has surveyed the property.
11. _____ **One copy** of any letters or documents received from the County of any other agency regarding this project.

Section D – Plot Plan –Please refer to the Information Sheet package titled "Property Plot Map" for format and information required. **If the plan is not legible or does not contain the necessary information, your application will not be accepted for processing.**

PROPERTY PLOT PLAN
INFORMATION SHEET AND BLANK PLOT PLAN

Certain applications processed by the County such as Lot Merger, Lot Line Adjustment, and Parcel Map for Parcels 20 Acres or More require a Property Plot Plan to be submitted with the application. This package of information provides a checklist of information for the Property Plot Plan, several examples, and the blank plot plan that must be used.

PROPERTY PLOT PLAN CHECKLIST

The property plot plan consists of two sections. The upper portion is to include your drawing, in black ink, at an accurate scale appropriate to show all the details of your proposed lots. The scale you use should be a standard engineering scale (1 inch equals 10 feet, 20 feet, 30 feet, 40 feet, 50 feet or 60 feet) or one of these increased by a multiple of ten (e.g., 1 inch equals 20 feet, 200 feet or 2,000 feet) so that the parcel fits neatly within the space provided. (See attached sample property plot plans as a guide.) The lower information portion of the application asks necessary questions regarding the application, answer the questions.

PLAN PORTION

1. Plan should be drawn so that "north" is to the top of the Property Plot Plan Form. Write the scale of the plot plan under the north arrow provided.

2. Delineate the location and dimension the lengths and widths of the following:
   - (a) Existing property lines for each lot or parcel. Existing lot lines that will not remain should be shown as a dashed line. Place a dashed line around each combination of lots to be merged.
   - (b) Existing rights-of-way for all abutting streets. ALSO indicate names.
   - (c) Existing street and drainage improvements (paved, dirt, etc.).
   - (d) All existing easements for drainage, public utilities, access or encroachments.
   - (e) All underground structures including septic tanks, leach lines, seepage pits. If none, indicate method of sewage disposal.
   - (f) All storm drains and wells.
   - (g) All existing structures. In addition to dimension of structures, indicate the distances between structures and between each structure and the nearest existing or proposed property line. Also indicate the use of each structure and any that are to be removed. If none, indicate "vacant" on the plan.
   - (h) Indicate location of any topographic conditions (hills, canyons, water courses, known seismic fault areas, etc.). If none, indicate on plan that no topographic conditions exist.

3. Compute and record the net lot area in square feet or acres for each new proposed lot and include a new Legal Description.

4. If commercial and/or industrial structures are existing and to be retained and utilized, show all parking facilities and driveways.

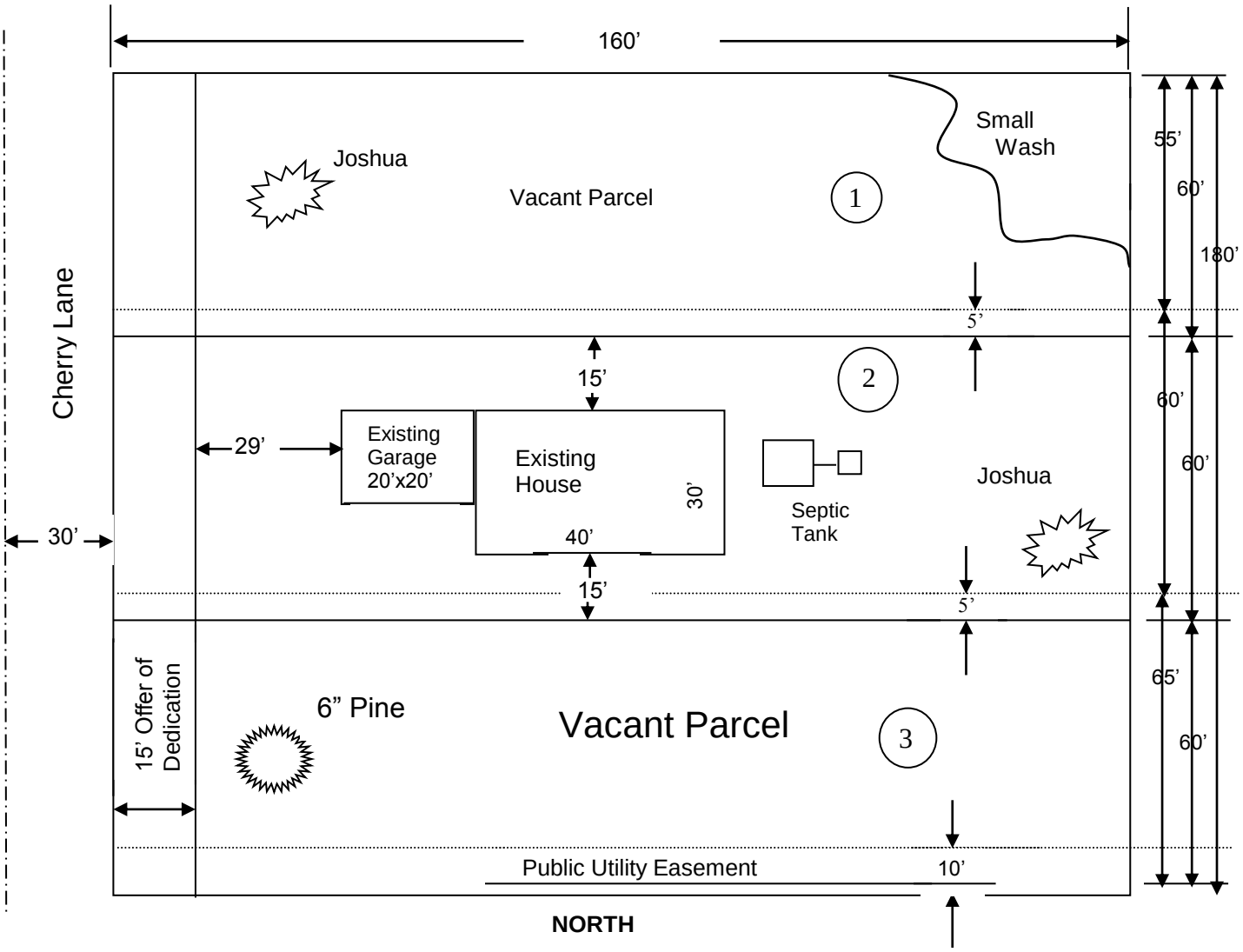
INFORMATION PORTION

5. Applicant's name and phone number.

6. The number of lots to be created.

7. The Assessor's book, page and parcel number(s) of the existing parcel(s).

EXAMPLE—LOT LINE ADJUSTMENT



Parcel	Existing Sq. Ft.	Gr. Prop. Sq. Ft.	Net Prop. Sq. Ft.
1	8,800 sq. ft.	9,600 sq. ft.	8,700 sq. ft.
2	8,800 sq. ft.	9,600 sq. ft.	8,700 sq. ft.
3	10,400 sq. ft	9,600 sq. ft.	8,700 sq. ft.

NORTH

Information Portion: SCALE 1” = 30’

Applicant Name: John Q. Applicant Ph: 619-240-1234 Proposed # of New Lots: 3

Assessor Parcel Number(s): 0123-456-78

Township: 02N Range: 05W Section: 19 NW NE SW SE (Circle One)

Planning Staff Only:

File/Index: _____ Land Use District: _____ Overlay: _____ Rd. Bk.: _____

Approval Date: _____

Approved By: _____ X _____

PROPERTY PLOT PLAN

TO BE USED ONLY FOR LOT MERGER. LOT LINE ADJUSTMENT AND MAP ACT EXCEPTION APPLICATIONS (ITEMS MUST BE COMPLETED BY THE APPLICANT/REPRESENTATIVE)

NORTH

Information Portion: SCALE 1" =

Applicant Name: _____ Phone: _____ Proposed # of New Lots: _____

Assessor Parcel Number(s): _____

Township: _____ Range: _____ Section: _____ NW NE SW SE (Circle One)

Planning Staff Only:

File/Index: _____ Land Use District: _____ Overlay: _____ Rd. Bk.: _____

Approval Date: _____

Approved By: _____ X_____

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LAND USE APPLICATION QUESTIONNAIRE

Complete all sections of this application. Please refer to the checklist contained in the information packet for complete information on submittal requirements. The information furnished in this application will be used in evaluating your project pursuant to the California Environmental Quality Act (CEQA). If you believe an item does not apply to your project, mark it "N/A". Do not leave any blank spaces. If you have any questions about items requested on this form, please call the Application Intake Center at (909) 387-8311. **Please use no more than four lines to answer any question. If more space is needed, use Attachment A on page 5 of this application questionnaire.**

APPLICATION TYPE: _____ **T.T.P.M.#**: _____

[Take "type" from the top of the cover sheet, i.e. "Conditional Use Permit," "Tentative Tract," etc. (if a tentative map is involved include the map number)]

All Assessor's Parcel Numbers (APNs): _____

Section 1 - Applicant Data

Applicant Name: _____

Firm Name: _____

Address: _____

City: _____ Zip: _____

Phone: _____ FAX No.: _____ E-Mail: _____

Section 2 – Property Owner Data (If same as above check ☐)

Property owner(s) of record: _____

Firm Name: _____

Address: _____

City: _____ Zip: _____

Phone: _____ FAX No.: _____ E-Mail: _____

Section 3 – Representative Data (If same as above check ☐)

Representative's Name: _____

Firm Name: _____

Address: _____

City: _____ Zip: _____

Phone: _____ FAX No.: _____ E-Mail: _____

Section 4 – Architecture/Engineering Representative Data (If same as above check ☐)

Representative's Name: _____

Firm Name: _____

Address: _____

City: _____ Zip: _____

Phone: _____ FAX No.: _____ E-Mail: _____

To be completed by County Staff: Filing Date: _____ Project No.: _____ JCS Project No.: _____

Section 5 – Project Description and Location/Legal Data

Briefly describe the project and use:

_____

Land Use District: _____

Overlay Districts: _____

Legal Description: Township: _____ Range: _____ Section: _____

USGS Quad Name: _____

Location: Community: _____ Nearest cross street: _____

Street name: _____ Side of street: _____

Site Size (Gross acres or square footage): _____ Number of lots: _____

Site Address: _____

Proposed Development Area: _____

Size of Proposed Buildings: _____

Previously approved land use applications for this site: _____

Are you filing other land use applications for this site at this time? Yes ☐ No ☐

If yes, please list other application types _____

UTILITIES:

Water: _____
(Name of Provider)

Is the site presently served? Yes ☐ No ☐

If an extension is necessary, how long will it be? _____

Are any existing or proposed wells within 200 feet from any existing or proposed liquid waste disposal system?

Yes ☐ No ☐ If yes, attach an explanation

If this is a Tentative Map application, how many service connections have already been made to the existing water system? _____

Sewage Disposal: Septic? Yes ☐ No ☐

Sewer : _____
(Name of Provider)

Is the site presently served? Yes ☐ No ☐

If an extension is necessary, how long will it be? _____

If septic system/leach lines are proposed or existing, attach information showing proposed or existing location and how the size of the sewage disposal area was determined

Gas: _____
(Name of Provider)

Is the site presently served? Yes ☐ No ☐

If an extension is necessary, how long will it be? _____

Electricity: _____
(Name of Provider)

Is the site presently served? Yes ☐ No ☐

If an extension is necessary, how long will it be? _____

Phone: _____
(Name of Provider)

Is the site presently served? Yes ☐ No ☐

If an extension is necessary, how long will it be? _____

Cable TV: _____
(Name of Provider)

Is the site presently served? Yes ☐ No ☐

If an extension is necessary, how long will it be? _____

Section 6 - Environmental Setting

Be sure to answer all of the questions. This information is necessary to evaluate the project under the California Environmental Quality Act (CEQA). You must provide additional information for any answers marked "yes" or "uncertain" in a letter of explanation attached to this application.

1. When do you anticipate starting construction? _____

2. Will grading be required? Yes ☐ No ☐

   If so, how many cubic yards will be cut? _____ How many cubic yards will be filled? _____

3. Is the project phased? Yes ☐ No ☐

   If yes, describe the phasing: _____

4. If residential, indicate the number of units or lots. _____

5. If commercial, provide information describing the type of commercial activity proposed, along with square footage of sales area, trash enclosures, loading facilities and hours of operation.

6. If industrial, attach information indicating type of industrial activity proposed, square footage of building, estimated employment per shift, trash enclosures, loading facilities and hours of operation.

7. If institutional, attach information indicating major function, estimated employment per shift, estimated occupancy, trash enclosures, loading facilities and hours of operation.

8. Will the use require truck activity? Yes ☐ No ☐

If yes, give truck type(s) and number of axles : _____

What is the gross weight of each vehicle: _____

Number of truck trips per day _____

		YES	NO	UNCERTAIN
9.	Will the project change scenic views or vistas from existing residential areas, public lands or roads?	☐	☐	☐
10.	Will there be a change in dust, ash, smoke, fumes or odors in the vicinity of the project?	☐	☐	☐
11.	Has the site been surveyed for historical, paleontological or archaeological resources?	☐	☐	☐
12.	Is the site on filled land or on slope of 10 percent or more?	☐	☐	☐
13.	Will there be the use or disposal of potentially hazardous materials, such as toxic substances, flammables, or explosives?	☐	☐	☐
14.	Will there be a change in lake, stream, or ground water quality or quantity, or alteration of existing drainage patterns?	☐	☐	☐
15.	Will there be any substantial change in existing noise or vibration levels in the vicinity?	☐	☐	☐
16.	Will there be a substantial change in demand for public services (police, fire, water, sewage, etc.)?	☐	☐	☐
17.	Has a traffic study been prepared for this site or has the site been included in another traffic study?	☐	☐	☐
18.	Will the project generate significant amounts of solid waste or liter?	☐	☐	☐
19.	Will the project change any existing features of hills or make substantial alteration of ground contours?	☐	☐	☐
20.	Will there be a substantially increase in fossil fuel consumption (electricity, oil, natural gas, etc.)?	☐	☐	☐
21.	Is there a relationship to a larger project or series of projects?	☐	☐	☐

22. List any previous environmental documents or technical studies prepared for this site:

_____

23. Describe the project site, as it exists before project implementation, including information on topography, soil stability, plants and animals, and any cultural, historical, or scenic aspects. On an attachment describe any existing structures on the site, and the use of the structures.

24. On an attachment, describe the surrounding properties, including information on plants and animals and any cultural, historical, or scenic aspects. Indicate the type of land use (residential, commercials, etc,), intensity of land use (single family dwelling(s), apartment houses, shops, department stores, etc.), and scale of development (height, frontage, set-back, rear yard, etc.). Attach photographs of the vicinity.

Attachment A

(Please use this form to amplify any answer. Be sure to identify which question is being amplified.)

APPLICATION CERTIFICATE

ALL OWNERS OF RECORD MUST SIGN THIS CERTIFICATE: (Attach it to the application)

List Assessor's Parcel Number(s) of the project property:

_____

List Assessor's Parcel Number(s) of all property contiguous to the project property, which is owned or beneficially controlled by the individual(s) signing this Certificate:
: If there are no contiguous properties under the same ownership, STATE "NONE"—***do not leave blank***.

_____

The undersigned owner(s) or officer(s) in the organization owning the lands for which this application is made, states that he/she or the organization is aware that the application is being filed with the San Bernardino County Planning Division, and certifies under penalty of perjury that the County applications forms have not been altered and that the information contained in this application is true and correct. I (We) acknowledge that additional materials may be necessary to provide to the Planning Division once the preliminary review of the specifics of the project has been initiated.

I (We) further agree that if any information contained in this application proves to be false or incorrect, the County of San Bernardino and any special purpose or taxing district affected thereby are and shall be released from any liability incurred if a certificate of compliance is or has been issued on basis of this application. I understand that under such circumstances any such certificate shall be null and void and shall be returned to the County for cancellation.

If this is an actual cost application, the applicant agrees to pay all accumulated charges for this project. For any type of application, the applicant also agrees to defend, indemnify and hold harmless the County, its agents, officers and employees from any claim, action or proceeding attacking or seeking to set aside, void or annul the approval of all or part of the matters applied for, or any other claim, action or proceeding relating to or arising out of such approval. This requirement includes the obligation to reimburse the County, its agents, officers and employees for any court costs or attorney fees which the County, its agents, officers or employees are required by a court to pay as a result of such claim, action or proceeding. The County agrees to notify the applicant of any such claim, action or proceeding promptly after the County becomes aware of it. The County agrees to cooperate in the defense provided by the applicant. The County may, at its own expense, participate in the defense of the claim, action or proceeding, but such participation will not relieve the applicant of applicant's defense and indemnification obligations.

Any persons signing with Power of Attorney for others must print the names of those individuals in the signature block and attach a notarized copy of the Power of attorney.

(Print) (APPLICANT OR LEGAL AGENT)	Signature	Date
REGISTRATION NO. (IF R.C.E. OR LICENSED LAND SURVEYOR)		
(Print) (OWNER(S) OF RECORD)*	Signature	Date
(Print) (OWNER(S) OF RECORD)*	Signature	Date
(Print) (OWNER(S) OF RECORD)*	Signature	Date

*If property is owned by corporation, partnership or other group signee should indicate corporate position or title and submit substantiating documentation (e.g. incorporation certificate).

HAZARDOUS WASTE SITE CERTIFICATION

This certificate must be submitted with all Development Case Applications except for legislative acts such as General Plan Land Use District changes.

INSTRUCTIONS

The applicant for this development project shall consult the most current list of identified hazardous waste sites at http://www.calepa.ca.gov/SiteCleanup/CorteseList/default.htm to determine whether the development project is located on a site included on the list.

CERTIFICATION

The undersigned owner, applicant or legal representative of the lands for which this development project application is made, hereby certifies under penalty of perjury, and in accordance with Section 65962.5(e) of the Government Code of the State of California that he (she) has consulted the most current and appropriate list of "CAL/EPA, Facility Inventory Data Base, Hazardous Waste and Substances Sites List," and further certifies that the site of the proposed development project:

☐ Is not located on a site which is included on the Cortese List dated:_____

OR

☐ Is located on a site included on the Cortese List dated:_____.

List all of the Assessor Parcel Numbers (APNs) of the project property:

_____

_____
Printed Name of Person Certifying this Review

_____ _____
Signature of Person Certifying this Review Date
Signature of Person Certifying this Review Date