



BOUNDARY/LOT LINE ADJUSTMENT APPLICATION

Community Development Department
1570 West 400 North
Marriott-Slaterville, Utah 84404
801-627-1919

Utah's Open Space City

APPLICANT INFORMATION	
NAME:	COMPANY/BUISINESS:
ADDRESS:	
EMAIL:	PHONE:
PROPERTY OWNER INFORMATION	
NAME:	
ADDRESS:	
EMAIL:	PHONE:
PROJECT INFORMATION	
PROJECT NAME:	
PROJECT ADDRESS:	
PARCEL #:	
ACREAGE:	CURRENT ZONING:
IS SITE IN THE FLOOD PLAIN?	IS SITE IN A FLOOD HAZARD AREA?
IF YES TO THE ABOVE QUESTION, WHAT IS THE BASE FLOOD ELEVATION?	
APPLICATION TYPE AND FEE	
Variance/Appeal Authority: <input type="checkbox"/> Residential \$250 <input type="checkbox"/> Commercial \$300	Conditional Use Permit: <input type="checkbox"/> Residential \$250 <input type="checkbox"/> Commercial \$750
Subdivision: # of lots _____ <input type="checkbox"/> Preliminary Application \$500 + \$25 per lot <input type="checkbox"/> Final Application 5% cost of improvements <input type="checkbox"/> Amendment \$500	Site Plan: <input type="checkbox"/> Residential Site Plan Review \$250 <input type="checkbox"/> Commercial Site Plan Review \$750 <input type="checkbox"/> Amendment \$250
General Plan: <input type="checkbox"/> General Plan Amendment \$400 <input type="checkbox"/> Feasibility/Traffic/Other Studies \$ study cost	Zoning Map: <input type="checkbox"/> Map Amendment \$500 <input type="checkbox"/> Annexation \$ plus cost of postage and notices
<input type="checkbox"/> Lot Line/Boundary Adjustment \$250 <input type="checkbox"/> Consolidation of Parcels \$250 <input type="checkbox"/> Agricultural Land Division \$250	

City Use Only			
Date Received: _____	Received By: _____	Fee(s) Paid: \$ _____	Payment Method: _____

- ☐ Application
- ☐ Fee
- ☐ Electronic map file
- ☐ Hard copy of map
- ☐ Electronic file of property descriptions
- ☐ Hard copy of property descriptions

The documenting survey has been made and filed in accordance with the requirements of Utah Code § 10-9a-103 and said adjustment complies with Marriott-Slaterville Code § 12.01.080.

 Applicant

 Date

Owner

signature

Applicant

signature

City Use Only	
Appeal Authority Review date: _____ Decision of Appeal Authority: _____	