



Boundary Line Adjustment

City of Puyallup
Development Services
333 S. Meridian
Puyallup, WA 98371
Phone: 253-864-4165
www.cityofpuyallup.org

Submittal Checklist

Flash drive or CD of entire submittal package

8 Copies of completed application form (application is signed and dated)

8 Copies of completed survey by a registered land surveyor **FOLDED TO APPROX 8 1/2" X 11"**

3 Copies of Title Report / Plat Certificate no older than 2 weeks at the time of submittal

Environmental Checklist (if required): Flood Habitat Assessment, Fish and Wildlife Assessment, Mitigation Plans, Wetlands

Application Fees:

1-2 Lots: \$130
3+ Lots: \$240

Additional Fees if applicable:

Critical Area Review: \$160
+ Consultant Fee

Traffic Impact Analysis Review: \$160

Please see pages 4-5 for detailed submittal requirements

Revised 9/2019

A boundary line adjustment (BLA) is a minor alteration to the location of a property line on an existing lot. A BLA cannot be used to divide a property or create a new lot. When preparing this application, please print or type the reply to each question. If you have any questions, please contact the Development Services Center at (253) 864-4165 and select #3 for Planning.

Please note that incomplete application packets may cause a delay in reviewing your application.

For general information about BLAs please read the City's BLA brochure which is available at the Permits Center or online at

www.cityofpuyallup.org/DocumentCenter/View/9837/Boundary-Line-Adjustment

APPLICATION INFORMATION

Site Information

Parcel Number 0420264021, 0420264053, 0420264054, 0420351066, 0420351026, 0420351029, 0420351030

Street Address 1001 SHAW ROAD, PUYALLUP, WA 98372

Applicant Information

Name CHRISTOPHER DODOS

Street Address 2215 N 30TH ST, SUITE 200

City TACOMA State WA Zip 98403

Phone (253)284-0232 E-mail CDODOS@AHBL.COM

Owner Information Parcel I (ALL PARCELS)

Name

Street Address

City State Zip

Phone E-mail

Contact Owner Yes or No

Owner Information Parcel II

Name

Street Address

City State Zip

Phone E-mail

Contact Owner Yes or No

Owner Information Parcel III

Name

Street Address

City State Zip

Phone E-mail

Contact Owner Yes or No

SURVEYOR INFORMATION

Name DAVID FOLLANSBEE		
Agency Name AHBL, INC.		
Street Address 2215 N 30TH ST, SUITE 200		
City TACOMA	State WA	Zip 98403
Phone (253)383-2422	E-mail DFOLLANSBEE@AHBL.COM	
State of Washington Professional Land Surveyor Registration No. 45161		
Name of Registered DAVID FOLLANSBEE		Expiration Date APRIL 10, 2025
Contact Surveyor	Yes <input checked="" type="checkbox"/>	or No <input type="checkbox"/>

SITE INFORMATION

Parcel 1		
Parcel Number	PLEASE SEE INCLUDED PRELIMINARY BLA MAP FOR PARCEL INFORMATION	
Parcel Address		
Zoning Designation		
Future Land Use Designation		
Lot Dimensions		
	Proposed	Min Required by Zone
Lot Width (ft.)		
Lot Length (ft.)		
Lot Size (Sq. Ft.)		

Parcel 2		
Parcel Number	PLEASE SEE INCLUDED PRELIMINARY BLA MAP FOR PARCEL INFORMATION	
Parcel Address		
Zoning Designation		
Future Land Use Designation		
Lot Dimensions		
	Proposed	Min Required by Zone
Lot Width (ft.)		
Lot Length (ft.)		
Lot Size (Sq. Ft.)		

Parcel 3		
Parcel Number	PLEASE SEE INCLUDED PRELIMINARY BLA MAP FOR PARCEL INFORMATION	
Parcel Address		
Zoning Designation		
Future Land Use Designation		
Lot Dimensions		
	Proposed	Min Required by Zone
Lot Width (ft.)		
Lot Length (ft.)		
Lot Size (Sq. Ft.)		

CRITICAL AREA IDENTIFICATION

The purpose of this section is to determine if a critical area report is required due to the development site being on or near any critical areas. All critical areas identified and their associated buffers, must be shown on the title and map.

Based on the applicant's knowledge and research of the project site, please select any of the critical areas listed below that are located on or within 300 feet of the property boundaries.		
<input type="checkbox"/> Wetlands	<input type="checkbox"/> Wellhead Protection Area	<input type="checkbox"/> Aquifer Recharge Area
<input type="checkbox"/> Lakes/Ponds	<input type="checkbox"/> Habitat Corridor	<input type="checkbox"/> Flood Zone
<input type="checkbox"/> Streams/Creeks	<input type="checkbox"/> Habitat Conservation Area	Flood Classification:
Waterbody name:	<input type="checkbox"/> Seismic Hazard Area	<input type="checkbox"/> Volcanic Hazard Area
<input type="checkbox"/> Puyallup River Shoreline	<input type="checkbox"/> Clarks Creek Shoreline	<input type="checkbox"/> Landslide/Erosion Hazard Area
<input type="checkbox"/> Shoreline Classification:	Shoreline Classification:	Slope Classification:
<input type="checkbox"/> Conservancy	<input type="checkbox"/> Conservancy	<input type="checkbox"/> Slopes 0% - 15%
<input type="checkbox"/> Rural	<input type="checkbox"/> Rural	<input type="checkbox"/> Slopes 16% – 39%
<input type="checkbox"/> Urban	<input type="checkbox"/> Urban	<input type="checkbox"/> Slopes 40% or Greater

Please describe the critical areas checked above and their location in relation to the proposed development. Please show their location on any plans to be submitted.

Do you know of any present or past critical area studies that have been conducted for critical areas on-site or adjacent to the site? Please describe below; including their date, scope, conclusions, and parcels they included.

Do you know if any critical areas have been placed inside a tract or a protection easement that is recorded on the title or plat for this site or any adjacent site? Please describe below, including name of tract or easement, location, and Puyallup permit number or recording number.

ADDITIONAL REQUIREMENTS FOR SUBMITTAL OF A BOUNDARY LINE ADJUSTMENT APPLICATION

- I) Complete Survey of the Plat:** A complete survey is required to be compiled on an 18-inch by 24-inch sheet containing the following information:
- a) A title page that includes all the content shown on the Boundary Line Adjustment Title Page Template (attached last page). Configuration of the content boxes can be re-arranged as needed. This template is also available in electronic form upon request. Title page must include:
 - i) The names and address of the owners of all properties;
 - ii) Registered land surveyor certification that the drawing is a true and correct representation of the land surveyed, and that all monumentation locations, size and materials are correctly shown;
 - iii) Original county assessor parcel numbers for all affected tracts;
 - iv) Vicinity map, containing the outline of the affected parcels, the nearest public streets to the north, south, east and west, and the quarter/quarter section in which the site is located;
 - v) Notarized acknowledgments and signatures of the property owner(s);
 - b) The legal description of all affected parcels;
 - c) North arrow
 - d) Date of the drawing
 - e) Scale
 - i) 2 acres or less: 1" = 50'
 - ii) >2 acres: 1" = 100'
 - f) Boundary lines of the parcels to be revised, and corresponding bearings and dimensions;
 - i) Existing and proposed lot lines. The existing lot lines shall be shown using a heavy dashed line, and the proposed lot lines shown using a heavy solid line;
 - ii) All lines shall be labeled or alternatively, a legend shall be provided
 - g) Square footage of all existing and proposed lots and tracts;
 - h) Location, material and size of all monuments. Monuments shall meet the specifications of the public works director or designee;
 - i) Lot Numbering. All lots shall be numbered consecutively from one to the total number of lots. All tracts shall be assigned a consecutive letter designation beginning with the letter A;
 - j) Accurate location and dimensions of all existing structures, septic systems and utility services, and the distance between structures, improvements and utilities to the adjoining proposed lot lines;

- k) Topography showing existing and proposed contours at five-foot (5) contour intervals except for any portion of the site containing slopes of 15 percent or greater which shall be shown at two-foot (2) contour intervals. The contour intervals shall extend at least 100 feet beyond the boundaries of the site;

2) Major Issues Discussed During Pre-Application Meeting:

Pre-Application #: P _____ - _____

UTILITY INFORMATION

At this stage, the applicant should contact the following utilities to insure availability.


Telephone	Sewer	Water	Electricity & Gas	Cable
Qwest	City of Puyallup	City of Puyallup	Puget Sound Energy	Comcast
800-526-3557	(253)-864-4165	(253)-864-4165	888-321-7779	877-824-2288
AT&T Residential		-or-	425-452-1234	
800-222-0330		Fruitland Mutual Water		
AT&T Business		(253) 848-5519		
800-222-0400				

CERTIFICATION

I hereby state that I am the applicant listed above and certify that all information contained above and in exhibits attached hereto is true and correct to the best of my knowledge and belief and is submitted for consideration by the City of Puyallup, pursuant to the provision of the Puyallup Municipal Code. It is understood that the processing of this application may require additional supporting evidence, data or statements.

RIGHT OF ENTRY: By signing this application the applicant grants unto the City and its agents the right to enter upon the premises for purpose of conducting all necessary inspection to determine compliance with applicable laws, codes and regulations. This right of entry shall continue until a certificate of occupancy is issued for the property.

Signature of Applicant: _____  _____ Date 09/26/2024

Signature of Owner: _____  _____ Date: 9-27-24
 (or authorized agent)

<p>DEVELOPMENT SERVICES DEPARTMENT</p> <p>DEVELOPMENT SERVICES DIRECTOR _____</p> <p>ASSESSOR/TREASURER</p> <p>I HEREBY CERTIFY THAT ALL STATE AND COUNTY TAXES HEREFORE LEVIED AGAINST THE LOT LINE ADJUSTED PROPERTY DESCRIBED HEREON, ACCORDING TO THE BOOKS AND RECORDS OF MY OFFICE, HAVE BEEN FULLY PAID AND DISCHARGED.</p> <p>ASSESSOR/TREASURER _____ DATE _____</p> <p>BY _____</p>	<p>CITY OF PUYALLUP BOUNDARY LINE ADJUSTMENT NO. _____</p> <p>A PORTION OF _____ 1/4, SECTION _____ TOWNSHIP _____ N. RANGE _____ E.</p> <p>ORIGINAL TRACT ASSESSOR'S PARCEL NO. S:</p> <p>_____</p> <p>*FUTURE PERMITS:</p> <p>THE LAND CONTAINED IN THIS BOUNDARY LINE ADJUSTMENT IS NOT A GUARANTEE THAT FUTURE PERMITS WILL BE GRANTED FOR ANY STRUCTURE DEVELOPMENT WITHIN A LOT AFFECT BY A BOUNDARY LINE ADJUSTMENT</p>	<p>ACKNOWLEDGEMENT</p> <p>WE, THE UNDERSIGNED, ATTEST THAT WE ARE THE CONTRACT OWNERS AND HAVE A REAL INTEREST IN THE LAND REPRESENTED IN THIS BOUNDARY LINE ADJUSTMENT. WE HAVE NO REAL INTEREST IN ANY LAND CONTIGUOUS TO ANY PART OF THE LAND INCLUDED IN THIS BOUNDARY LINE ADJUSTMENT. THIS BOUNDARY LINE ADJUSTMENT IS MADE IN ACCORDANCE WITH OUR DESIRES.</p> <p>SIGNATURE OF PROPERTY OWNER(S) _____ STATE OF WASHINGTON) COUNTY OF PIERCE) SS</p> <p>SIGNED AND SEALED BEFORE ME THE UNDERSIGNED THIS _____ DAY OF _____, 20____ AS NOTARY PUBLIC AND TESTED FOR SHORT PLAT PROCESS. WITNESS MY HAND AND SEAL THE DAY AND YEAR FIRST WRITTEN ABOVE.</p> <p>NOTARY SEAL _____ NOTARY PUBLIC IN AND FOR THE STATE OF WASHINGTON RESIDING AT: _____</p>	<p>DEVELOPMENT SERVICES DEPARTMENT</p> <p>DEVELOPMENT SERVICES DIRECTOR _____</p> <p>ASSESSOR/TREASURER</p> <p>I HEREBY CERTIFY THAT ALL STATE AND COUNTY TAXES HEREFORE LEVIED AGAINST THE LOT LINE ADJUSTED PROPERTY DESCRIBED HEREON, ACCORDING TO THE BOOKS AND RECORDS OF MY OFFICE, HAVE BEEN FULLY PAID AND DISCHARGED.</p> <p>ASSESSOR/TREASURER _____ DATE _____</p> <p>BY _____</p>	<p>AUDITOR'S CERTIFICATE</p> <p>FILED FOR RECORD THIS _____ DAY OF _____, 20____</p> <p>AT THE REQUEST OF _____</p> <p>AUDITOR'S FEE NO. _____</p> <p>FEE: \$ _____ DATE _____</p> <p>DEPUTY _____ COUNTY AUDITOR _____</p>	<p>ORIGINAL TRACT OWNERS</p> <p>PARCEL NO. 1</p> <p>NAME: _____</p> <p>ADDRESS: _____</p> <p>CITY/STATE/ZIP: _____ PHONE: _____</p> <p>PARCEL NO. 2</p> <p>NAME: _____</p> <p>ADDRESS: _____</p> <p>CITY/STATE/ZIP: _____ PHONE: _____</p> <p>PARCEL NO. 3 (IF APPLICABLE)</p> <p>NAME: _____</p> <p>ADDRESS: _____</p> <p>CITY/STATE/ZIP: _____ PHONE: _____</p> <p>EXISTING ZONING: _____</p> <p>SOURCE OF WATER: _____</p> <p>SEWER SYSTEM: _____</p> <p>WIDTH AND TYPE OF ACCESS: _____</p> <p>SCALE: _____</p>	<p>SURVEYOR'S CERTIFICATE</p> <p>THIS MAP CORRECTLY REPRESENTS A SURVEY MADE BY ME OR UNDER MY DIRECTION IN CONFORMANCE WITH THE REQUIREMENTS OF THE SURVEY RECORDING ACT AT THE REQUEST OF:</p> <p>_____</p> <p>THIS _____ DAY OF _____, 20____</p> <p>LICENSE NO. _____ PROFESSIONAL LAND SURVEYOR</p>
<p>BOUNDARY LINE ADJUSTMENT FORMAT</p> <p>AVAILABLE IN ELECTRONIC FORMAT UPON REQUEST.</p>						