**LOT COMBINATION APPLICATION**

Application Fee: $200.00 plus staff time over 4 hours

<table>
<thead>
<tr>
<th># Copies Required</th>
<th>Description of Required Documents:</th>
</tr>
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<tbody>
<tr>
<td>1</td>
<td>Lot Combination Fee</td>
</tr>
<tr>
<td>2</td>
<td>Lot Combination Application</td>
</tr>
<tr>
<td>2</td>
<td>Notice of Parcel Merger</td>
</tr>
<tr>
<td>2</td>
<td>Current legal descriptions of lots to be merged</td>
</tr>
<tr>
<td>2</td>
<td>New legal description of merged lots</td>
</tr>
<tr>
<td>3</td>
<td>Current Title Report (within 30 days of submittal)</td>
</tr>
<tr>
<td>2</td>
<td>Documentation necessary to verify legal lot status. Refer to LMC 18A.50.115.A.2. These documents may include recorded deeds, subdivision records, or recorded boundary line adjustments or possibly a chain of title report. *</td>
</tr>
<tr>
<td>2</td>
<td>Accurate, scaled site plan</td>
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</tbody>
</table>

The site plan shall be drawn on 8 ½ x 11 paper with one-inch margins on all sides of page and include the following information:

- All tax parcel numbers
- Lot designation of each lot (i.e., Parcel A, Parcel B, etc.)
- Roads
- Easements
- Existing structures/ existing building footprints (indicate whether to be demolished)
- Existing lot lines to be removed shown in thin dashed lines
- Lot dimensions and proposed lot areas

*Minimum 1 inch margins required for exhibits*

*If you have any questions, please ask to speak with a planner.*
LOT COMBINATION APPLICATION
Application Fee: $200.00 plus staff time over 4 hours

ADDRESS/LOCATION: ____________________________________________________________

PROPOSED USE: ________________________________________________________________ ZONE: ________________________________

PIERCE COUNTY PARCEL NUMBER (S): ____________ ____________ ACRES: ____________

¼ Section ____________ SECTION ____________ TOWNSHIP ____________ N RANGE ____________ E

PROPOSED PROJECT DESCRIPTION/INTENT: _______________________________________

APPLICANT: (mandatory)
Name: ________________________________ Daytime Phone: __________________________
Mailing Address: ________________________________ Fax Number: _______________________
City/State/Zip: ________________________________ Professional License No: __________
Signature: ________________________________ Contact Person: _______________________

AGENT/ CONSULTANT/ ATTORNEY: (mandatory if primary contact is different from applicant)
Name: ________________________________ Daytime Phone: __________________________
Mailing Address: ________________________________ Fax Number: _______________________
City/State/Zip: ________________________________ License No: _______________________ 

PROPERTY OWNER 1: (mandatory if different from applicant)
Name: ________________________________ Daytime Phone: __________________________
Mailing Address: ________________________________ Fax Number: _______________________
City/State/Zip: ________________________________ Signature: _________________________

PROPERTY OWNER 2: (if more than two property owners attach additional info/signature sheets)
Name: ________________________________ Daytime Phone: __________________________
Mailing Address: ________________________________ Fax Number: _______________________
City/State/Zip: ________________________________ Signature: _________________________

The property owners signed above certify that the above information is correct to the best of our knowledge and under penalty of perjury, each state that we constitute all of the legal owners of the property described above and designate the above parties to act as our agent with respect to this application.
THE APPLICANT MUST PROVIDE THE FOLLOWING INFORMATION WHEN SUBMITTING A LOT COMBINATION APPLICATION:

A. The completed original application form and one (1) additional copy, making sure that all of the required signatures have been obtained.

B. Two (2) copies of the notice of Parcel Merger Form – legibly handwritten or typed.

C. Two (2) copies of the existing legal descriptions.

D. Two (2) copies of the new legal description, describing all lots to be combined.

E. Three (3) copies of a current title report (issued within 30 days of short plat submittal).

F. Two (2) copies of documentation necessary to verify legal lot status. Refer to LMC 18A.50.115.A.2. These documents may include recorded deeds, subdivision records, or recorded boundary line adjustment documents or possibly a chain of title report.*

G. Two (2) copies of a legible, accurate, scaled site plan (to be drawn on 8 ½ x 11 paper). Provide one (1) inch margins on all sides of page and include the following information:
   - All tax parcel numbers
   - Roads
   - Easements
   - Existing structures/ existing building footprints (indicate whether to be demolished)
   - Existing parcel lines (thin dashed lines)
   - Lot dimensions and proposed lot areas
   - Lot designation of each lot (i.e., Parcel A, Parcel B, etc.)

All above items and any other material that may be required by the city must be submitted at the time of application in order for the application to be accepted as complete.

Handouts and application forms may be revised without notice.

OFFICE USE ONLY:

DATE APPLICATION RECEIVED:________________________ RECEIVED BY:____________________________________

DATE APPLICATION COMPLETE:________________________ COMPLETENESS REVIEW BY:____________________
NOTICE OF PARCEL MERGER

Section ______  Township ______  Range ______

Date: _____________  Original Assessor Parcel Number (s): ___________________

I (We), ________________________________________________________________,
hereby certify that I (we) are the owner(s) of the property described in Section 1 below,
said property being under one common ownership, and do hereby petition the City of
Lakewood to allow the separate parcels to be combined into a single legal lot of record
as described in Section 2.

____________________________________  ____________________________
Signature of Property Owner  Date

____________________________________  ____________________________
Signature of Property Owner  Date

Signed and sworn to before me this ________ day of ________________, 20____.

_______________________________, in and for the State of Washington

Notary Public
Residing at _____________________, County
Name as commissioned: ______________________________
My Commission expires: _______________________________
Section 1) Legal description of original parcels:

Said properties being situated entirely within the City of Lakewood, Washington.

Section 2) Legal description of property after parcel merger:

Said property being situated entirely within the City of Lakewood, Washington.

Section 3) Approval by local jurisdiction:

The petition of the property owner(s) to merge the separate properties described in Section 1 above into a single legal lot of record as described in Section 2, is hereby approved by the City of Lakewood. Upon recording this document, the separate real properties described in Section 1 shall become one legal lot of record as described in Section 2. This merger is binding upon recordation and the resulting parcel may only be divided through the formal subdivision process as required by the City of Lakewood.

___________________________________________
Community Development Director
City of Lakewood

FOR ASSESSOR/TREASURER DEPARTMENTAL USE ONLY –

Is property within ULID  Yes (  ) No (  )  If yes, ULID Number ____________