



## BOUNDARY LINE ADJUSTMENT INFORMATION

### WHAT IS A BOUNDARY LINE ADJUSTMENT?

A Boundary Line Adjustment is the process for adjusting or altering property lines between two or more contiguous legal lots of record in order to modify lot lines, rectify defects in legal descriptions, improve the encroachment of existing structures over lot lines, straighten irregular shaped lots, or to increase non-conforming lots sizes. A boundary line adjustment cannot create new or additional lots or increase the nonconformity of an existing nonconforming structure or lot, and must meet minimum lot area, depth, setbacks and other requirements as set forth in Benton County Code Title 11.

### THE PROCESS

The Planning Administrator will review the information provided on the application and determine whether the record survey for boundary line adjustment complies with the requirements and limitations set forth in the Benton County Code 9.10. If all requirements of BCC 9.10 have been satisfied the Administrator may approve in writing the Boundary Line Adjustment request.

Upon approval of the Boundary Line Adjustment and prior to the recording of any documents; the quit claim deeds and excise tax forms must be submitted to the Planning Department for approval. **The legal description will not be reviewed by the Planning Staff for accuracy.** After review by the Planning Department, the applicant may take the deeds to the Treasurer's office to be processed and then on to the Auditor's office to be recorded. A copy of the recorded documents, including the record survey for boundary line adjustment, with the recording certificate affixed must be supplied to the Planning Department by the applicant.

### CRITERIA FOR APPROVAL

The proposed Boundary Line Adjustment may only be approved if it complies with the requirements and limitations set forth below:

- (a) The record survey for boundary line adjustment and all legal descriptions of the existing and proposed lots have been prepared by a land surveyor registered in the State of Washington;
- (b) The boundary line adjustment may not result in the creation of any additional lots, sites, parcels, or tracts of land;
- (c) The boundary line adjustment may not result in the creation of nonconforming lots, sites, parcels or tracts of land with respect to lot area, lot depth, setbacks or lot coverage requirements set forth in Title 11 of the Benton County Code;
- (d) The degree of nonconformance of existing nonconforming lots, sites, parcels or tracts may not be increased with respect to lot area, lot depth, setbacks or lot coverage;
- (e) The boundary line(s) to be adjusted must be a common boundary line between two adjacent lots, sites, parcels or tracts;
- (f) The plan must not be inconsistent with any restrictions or conditions of approval for a recorded plat or short plat;
- (g) The boundary line adjustment must not result in the violation of the applicable building code, fire code, Benton Franklin Health Department regulation or any other locally administered applicable regulation; and
- (h) The boundary line adjustment must not result in a lot, site, parcel or tract that does not have legal access to a public road.

### APPEALS

Any decision regarding the approval/denial of a boundary line adjustment may be appealed to the Benton County Hearings Examiner subject to the requirements in Benton County Code 9.10.070.

### EXPIRATION

Preliminary approval of a boundary line adjustment shall expire one (1) year from the date of approval if the conditions of approval have not been satisfied.



## BOUNDARY LINE ADJUSTMENT CHECKLIST

Applicant    Staff

- |                          |                          |   |
|--------------------------|--------------------------|---|
| <input type="checkbox"/> | <input type="checkbox"/> | <b>Completed Boundary Line Adjustment Application</b> – must include signatures of all parties with ownership interest. Incomplete applications will not be accepted.   |
| <input type="checkbox"/> | <input type="checkbox"/> | <b>Record Survey for Boundary Line Adjustment</b> – Prepared by a licensed Washington State Land Surveyor. Record survey requirements can be found in Benton County Code 9.10.030 <b>Two (2) reduced copies</b> measuring no larger than 11" x 17", and <b>an electronic copy (PDF)</b> of the record survey are required with the application submission.  |
| <input type="checkbox"/> | <input type="checkbox"/> | <b>Verified documentation that legal access has been provided to all lots.</b>  |
| <input type="checkbox"/> | <input type="checkbox"/> | <b>\$100 Boundary Line Adjustment Fee</b> – The fee must be paid at the time of application submittal, cash or checks accepted. Checks made payable to the <b>Benton County Treasurer</b> . All application fees are non-refundable.  |
| <input type="checkbox"/> | <input type="checkbox"/> | <b>Benton-Franklin Heath District Letter</b> <i>(if required)</i> – Written verification from the Benton-Franklin Health District (BFHD) indicating the proposed boundary line adjustment will not: create or result in a lot that does not meet current minimum lot size standards for lots containing or proposing on-site sewage systems; encumber, damage or destroy either the existing on-site sewage disposal system or any replacement/repair system area for any lots contained within the BLA; or cause any part of the on-site sewage system or its replacement area, to be contained on any parcel, other than the parcel on which the sewage originates. |

- **Please Note:** Irrigation improvements may be required if the parcel is served by an Irrigation District. Please contact your Irrigation District's office directly to ensure that the proposed boundary line adjustment complies with their regulations.

Applications may be submitted between the hours of 8am-12pm and 1pm-5pm Monday through Friday to the Planning Department at 1002 Dudley Ave./PO Box 910, Prosser, WA 99350 or to the Benton County Building Department (*see address below*). A Planner typically is available at the Building Department only on Thursdays from 9am – 12pm.

Please contact the following departments/agencies to ensure your proposal will comply with their regulations:

- **Benton-Franklin Health District**  
7102 W. Okanogan Place, Kennewick, WA 99336  
Phone: 460-4205
- **Benton County Road Department**  
620 Market Street, Prosser, WA 99350  
Prosser: 786-5611 • Tri-Cities: 735-3084
- **Benton County Building Department**  
5600 W. Canal Drive, Kennewick, WA 99336  
Prosser: 786-5622 • Tri-Cities: 735-3500



## BOUNDARY LINE ADJUSTMENT APPLICATION

File No. \_\_\_\_\_

### APPLICANT INFORMATION

Please check the box indicating primary contact person for this application

**Applicant/Agent:**

Mailing Address: \_\_\_\_\_ City: \_\_\_\_\_

State: \_\_\_\_\_ ZIP: \_\_\_\_\_ Phone: \_\_\_\_\_ Work: \_\_\_\_\_

Email Address: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**Property Owner(s)** (if different): \_\_\_\_\_

Mailing Address: \_\_\_\_\_ City: \_\_\_\_\_

State: \_\_\_\_\_ ZIP: \_\_\_\_\_ Phone: \_\_\_\_\_ Work: \_\_\_\_\_

Email Address: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

*\*If there are additional owners please copy this section, sign, and attach to the application*

**Land Surveyor:** \_\_\_\_\_

Mailing Address: \_\_\_\_\_ City: \_\_\_\_\_

State: \_\_\_\_\_ ZIP: \_\_\_\_\_ Phone: \_\_\_\_\_ Work: \_\_\_\_\_

Email Address: \_\_\_\_\_

***If the property is owned by a corporation, trust, partnership or LLC please complete the entity signature block below showing that the person signing has the authority to sign on behalf of the company.***

### ENTITY SIGNATURE BLOCK

*If the applicant or legal owner of the property is a corporation, partnership, trust or LLC use the following signature block.*

**Applicant/Legal Owner:** \_\_\_\_\_

Officer name: \_\_\_\_\_

Title: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

THE ABOVE SIGNED OFFICER OF \_\_\_\_\_ (name of entity)

WARRANTS AND REPRESENTS THAT ALL NECESSARY LEGAL AND CORPORATE ACTIONS HAVE BEEN DULY UNDERTAKEN TO

PERMIT \_\_\_\_\_ (name of applicant) TO SUBMIT THIS APPLICATION AND THAT THE

ABOVE SIGNED OFFICER HAS BEEN DULY AUTHORIZED AND INSTRUCTED TO EXECUTE THIS APPLICATION.

PARCEL INFORMATION

1. Subject property address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ ZIP: \_\_\_\_\_

2. Parcel number 1: \_\_\_ - \_\_\_ - \_\_\_ - \_\_\_ - \_\_\_ Acres: \_\_\_\_\_

Parcel number 2: \_\_\_ - \_\_\_ - \_\_\_ - \_\_\_ - \_\_\_ Acres: \_\_\_\_\_

Parcel number 3: \_\_\_ - \_\_\_ - \_\_\_ - \_\_\_ - \_\_\_ Acres: \_\_\_\_\_

3. Present use of property: \_\_\_\_\_

\_\_\_\_\_

4. Please give a detailed explanation for adjustment request: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

5. Access:  County Road  State Road/Highway  Private Road

6. Utilities: Power:  Benton PUD  Benton REA

Sewer:  Septic Tank  City Sewer: (Provider) \_\_\_\_\_

Water:  Individual Wells  One well serving 2-4 lots  One well serving 5+ lots

Private System (Provider & Address) \_\_\_\_\_

City System (Provider) \_\_\_\_\_

Gas:  No  Yes: (Provider) \_\_\_\_\_

Cable:  No  Yes: (Provider) \_\_\_\_\_

Phone:  No  Yes: (Provider) \_\_\_\_\_

Irrigation:  No  Private  District: (Provider) \_\_\_\_\_

7. Additional comments or information: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**(FOR STAFF USE ONLY)**

Application Complete: Y N

Critical Areas: N Y: \_\_\_\_\_ Zoning: \_\_\_\_\_

Reviewed by: \_\_\_\_\_ Date: \_\_\_\_\_