

Checklist

- Original signed & notarized application
- Copy of the application
- Fee [\$332 application fee]
- 2 copies of recorded deed
- 2 copies of most recent assessor's map
- 2 copies of legal description
- Survey closure calculations [one set]
- 2 copies of previously recorded maps for property being adjusted
- 2 copies [24" x 36"] & 1 copy [11" x 17"] of Boundary Line Adjustment Map
 - Signed by owner and notarized
 - Signed and stamped by Surveyor
 - Name of proposed project
 - Vicinity map
 - Total acreage
 - Total number of lots/lot & block numbers
 - Lot sizes/dimensions/curve data information
 - Street names/street widths
 - Legend/north arrow/scale [each sheet]
 - Adjacent Assessor's Parcel Numbers/record information/recorded dedications
 - Easements [public/private/dedication]
- An original mylar will be requested by the Community Development Department when the map has been approved and is ready to be routed for signatures

*City Service Commitment will not apply to incomplete submissions

Boundary Line Adjustment



Application Form

Application Fee
\$332



Community Development and Services

240 Water St.
P. O. Box 95050
Henderson, NV
89009-5050

Phone: 702-267-1500

Fax: 702-267-1501

cityofhenderson.com



Boundary Line Adjustment

Application
Form

Project Name _____

Project Location _____

Assessor's Parcel Number(s) _____

Section: _____ Township: _____ Range: _____

Existing Zone: _____ Gross Acres: _____

Indicate Number of Lots by use:

Single-Family _____ Commercial _____ Industrial _____ Townhouse _____ Total No. of Lots _____

Apartments _____ Condominiums _____ Common _____ Other (Explain) _____ Density _____

Intent of this Request _____

Related Applications _____

Owner	Name _____
	Address _____ City _____
	State _____ ZIP Code _____ Phone () _____ Email _____
Applicant	Name _____
	Address _____ City _____
	State _____ ZIP Code _____ Phone () _____ Email _____
Contact Person	Name _____
	Address _____ City _____
	State _____ ZIP Code _____ Phone () _____ Email _____
	Fax () _____ Alternate Phone () _____
<small>The person listed as contact will be contacted to answer questions regarding this application and provide additional information when necessary.</small>	

By signing this document I acknowledge that to the best of my knowledge, the above list includes the names of all owners, officers, general partners, managers of limited liability companies, and all other ownership interests in the applicant and the owner. Only original notary accepted.

Property Owner Signature

Print Name

NOTARY	State of _____, County of _____
	This instrument was acknowledged before me by _____
	on _____.
	_____ Notary Public

For Office Use Only									
CBLA#									
Accepted by									
Date									