TOWN OF COLCHESTER PLANNING BOARD

BOUNDARY LINE ADJUSTMENT APPLICATION FORM

You must submit the application and supporting materials to the Planning Board Chair (Bonnie Seegmiller, bseegmill@hunter.cuny.edu or 607.363.2752) at least 10 days before the Planning Board meeting at which you want to appear to be placed on the agenda. Please note: A meeting may be cancelled if there are no agenda items or due to inclement weather. All landowner(s) not present at the Planning Board Meeting at which the application is presented must designate, through a notarized statement of authorization, an agent to represent them at the meeting.

Parcei A (Sender):		
Name(s)		
Address		
Email address		
Phone	Tax Map #	
Deed info: Liber #	Page #	
A1 Amount of land to be transferred from A to BAcres		Acres
A2 Amount of land remaining	A2 Amount of land remaining in Parcel AAcres	
Parcel B (Receiver):		
Name(s)		
Address		
Email address		
Phone	Tax Map #	
Deed info: Liber #	Page #	
Location (Road name, distance and	direction from nearest inters	section):
Description of Action:		

Are there any existing restrictions, easements or other factors which may affect this boundary line adjustment or that the Planning Board should be aware of?			
Are there any unpaid taxes or other bills due to the T	own of Colchester? () Yes () No		
We the undersigned hereby swear that land will be to and no new lots will be created by this action. Als conveyed separately from the tract to which it is adde approved by the Town of Colchester Planning Board.	o, that land to be transferred cannot be		
PARCEL A:			
Sender's signature	Date		
Sender's signature	Date		
PARCEL B:			
Receiver's signature	Date		
Receiver's signature	Date		
CLASSIFIED AS A BOUNDARY LINE ADJUSTMENT BY T BOARD:	HE TOWN OF COLCHESTER PLANNING		
Approved by			
Town of Colchester Planning Board	Date		
NOTE: This Boundary Line Adjustment MUST BE FILED Tax Office and the Delaware County Clerk (Delhi, I Planning Board endorsement/approval. Failure to file fees and procedures.	NY) within SIXTY TWO (62) DAYS of the		
Date submitted:			
Determination Date: (),	Approved ()Disapproved () Conditional		