

Mono County
Community Development Department

P.O. Box 347
Mammoth Lakes, CA 93546
(760) 924-1800, fax 924-1801
commdev@mono.ca.gov

Planning Division

P.O. Box 8
Bridgeport, CA 93517
(760) 932-5420, fax 932-5431
www.monocounty.ca.gov

LOT LINE ADJUSTMENT
APPLICATION

APPLICATION # _____	FEE \$ _____
DATE RECEIVED _____	RECEIVED BY _____
RECEIPT # _____	CHECK # _____ (NO CASH)

APPLICANT/AGENT DOUG GILBERT
ADDRESS 1035 LIVE OAK AVE. CITY/STATE/ZIP SANTA CRUZ, CA - 95062
TELEPHONE [REDACTED] E-MAIL [REDACTED]
OWNER, if other than applicant THOM GILBERT
ADDRESS 11835 Carmel Mountain RD. STE 1304-108 CITY/STATE/ZIP SAN DIEGO, CA - 92128
TELEPHONE [REDACTED] E-MAIL [REDACTED]
PROJECT DESCRIPTION: Assessor's Parcel # 02-300-11 1/2
02-300-12

APPLICATION PACKET SHALL INCLUDE:

- A. Plot Plan: Exhibit "A", a reproducible Plot Plan map, preferably on 8.5" x 11" (maximum size 8.5" x 14) drawn to a legible scale that illustrates and clarifies the requested lot line modifications. The Plot Plan must contain sufficient detail to verify conformance with existing zoning and building regulations. The Plot Plan must illustrate the following items where applicable: (a) existing zoning; (b) existing and proposed lot areas; (c) existing surface and subsurface structures and improvements; (d) existing septic system and well locations; (e) streams and waterways; (f) existing/proposed easements and access routes; and (g) any unusual topographic features or other information (such as compliance with minimum setback requirements) that may be pertinent to review and approval of the application.
- B. Completed Project Information form.
- C. Appropriate application fee: See Development Fee Schedule.

I/We certify that I/we are the owners of the subject property or that I/we have been authorized by the owners to process this application.

Signature _____

Signature [REDACTED]

Date 2/2/2021

RECORDING REQUESTED BY

AND WHEN RECORDED MAIL TO

Mono County Planning Division
P.O. Box 8
Bridgeport, CA 93517

SPACE ABOVE THIS LINE FOR RECORDER'S USE ONLY

**OWNER'S REQUEST FOR
LOT LINE ADJUSTMENT**

PARCELS SUBJECT TO LOT LINE ADJUSTMENT: Assessor's Parcel Numbers

02-300-11 02-300-12

SIGNATURE OF RECORD TITLE OWNERS: This document will be recorded. All record title owners must sign below, and their signatures must appear as reflected on the recorded deeds. *All signatures must be notarized.*

I/we hereby attest by my/our signature(s) hereon that I/we am/are all the record title owner/owners of the above-referenced real property. I/we also affirm that said property consists of two or more continuous lots under our common/separate ownership. I/we understand that recordation of this Request for Lot Line Adjustment shall cause the subject parcels to be adjusted per the attached exhibit maps.

I/we hereby attest by our signature(s) hereon that I/we have initiated this Lot Line Adjustment and are requesting that the County record this notice with the Lot Line Adjustment approval.

[Redacted] - THOM GILBERT
Name

[Signature] 2-5-2021
Notarized signature Date

Name

Notarized signature Date

Name

Notarized signature Date

Name

Notarized signature Date

A notary public or other officer competing this certificate verifies only the identity of the individual who signed the document to which this certificate is attached, and not the truthfulness, accuracy, or validity of that document.



Subscribed and sworn to (or affirmed) before me
On this 5 day of Feb, 2020 2021
By Thom Gilbert
Name(s) of Signer(s)

Proved to me on the basis of satisfactory evidence to be
The person(s) who appeared before me.
Signature [Signature]
Signature of Notary Public

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PROJECT INFORMATION

(To be completed by applicant or representative)

NOTE: Please answer all questions as accurately and completely as possible to avoid potential delays in processing. Attach additional sheets if necessary.

I. TYPE OF PROJECT (check any permit(s) requested):

- Director Review Use Permit Lot Line Adjustment Land Division (4 or fewer)
 Subdivision Specific Plan Zone Variance Zoning Amendment
 General Plan Amendment Other _____

APPLICANT THOM GILBERT

PROJECT TITLE LOT LINE ADJUSTMENT TO 212 MEADOW DR. COLEVILLE, CA

LOT SIZE (sq. ft./acre) 2.726 AC ASSESSOR'S PARCEL # 02-300-11 & 02-300-12
2.736-AC

PROJECT LOCATION 212 MEADOW DR. COLEVILLE, CA - 96107

Has your project been described in detail in the project application? Yes No

Please Specify:

Number of Units N/A Building Height/# of floors N/A
Number of Buildings N/A Density (units/acre) N/A

Total lot coverage/impervious surface (sq. ft. & %) 0
a. Buildings (first-floor lot coverage /sq. ft. & %) 0
b. Paved parking & access (sq. ft. & %) 0

Landscaping/screening and fencing:
a. Landscaping (sq. ft. & %) 0
b. Undisturbed (sq. ft. & %) 0

Total parking spaces provided:
a. Uncovered 0
b. Covered 0
c. Guest/Handicapped 0

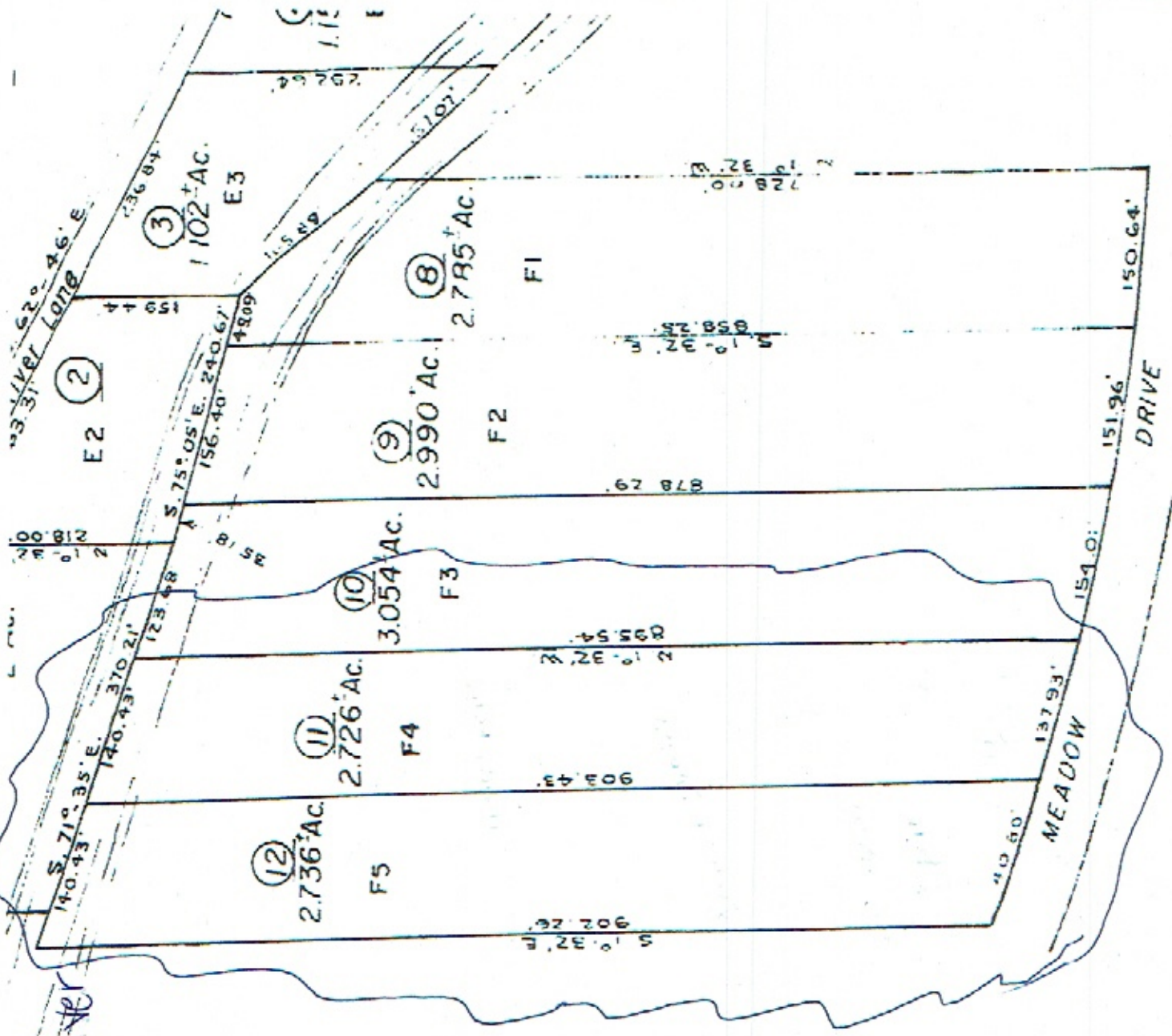
II. SITE PLAN

Are all existing and proposed improvements shown on the Plot Plan (see attached Plot Plan Requirements)? Yes No

III. ENVIRONMENTAL SETTING

Use one copy of the Tentative Map or Plot Plan as needed to show any necessary information. Attach photographs of the site, if available.

West Walker River



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Lower

Existing ———
Proposed - - - -
To be removed *-*-*

60' wide access

Meadow Drive

proposed
43,600 sq.ft. lot

APN
02-300-11

APN
02-300-12

895.54

903.43

902.26

60.73'

218.00'

218.00'

200.00'

200.00'

Walker River

