APPLICATION FOR LOT LINE ADJUSTMENT
VILLAGE OF TWIN LAKES BUILDING INSPECTION

108 E MAIN ST
TWIN LAKES, WI 53181
ph: 262-877-3700
fax: 262-877-4019

STAMP DATE RCVD

PROPERTY OWNER (S)	APPLICANT (OWNER'S AGENT)
Name (s)	Name
Mailing Address	Mailing Address
Phone Fax	Phone Fax
E-mail	E-mail

PROPERTY INFORMATION

Parcel #'s

Property Address/Location

Impervious surface coverage for each lot based upon proposed lot line adjustment:

PLEASE STATE REASON(S) FOR LOT LINE ADJUSTMENT REQUEST

Date **Owner/Agent Signature (Agents must provide written proof of authorization)**

☐ **Approved** ☐ **Conditionally Approved** ☐ **Denied**

Building Inspector Signature **Date**

Comments/Conditions: