

**Town of Trumbull  
CONNECTICUT**

**Planning and Zoning  
Department**  
Telephone (203) 452-5047  
Fax (203) 452-5061

**Town Hall**  
5866 Main Street  
Trumbull, Connecticut  
06611



**LOT LINE REVISION APPLICATION**

**Applicant(s):** \_\_\_\_\_ **Phone:** \_\_\_\_\_

(OWNER OF RECORD - If lawful agent, state capacity) **Email:** \_\_\_\_\_

**Address #1:** \_\_\_\_\_ **Lot Size:** \_\_\_\_\_

**Co-applicant:** \_\_\_\_\_ **Phone:** \_\_\_\_\_

(OWNER OF RECORD - If lawful agent, state capacity) **Email:** \_\_\_\_\_

**Address #2:** \_\_\_\_\_ **Lot Size:** \_\_\_\_\_

**Title of Subdivision Map:** \_\_\_\_\_

**Dated:** \_\_\_\_\_ **Prepared By:** \_\_\_\_\_

**Signature of Applicant:** \_\_\_\_\_

**Signature of Co-applicant:** \_\_\_\_\_

**APPLICANT IS REQUIRED TO PROVIDE THE FOLLOWING INFORMATION AT THE TIME OF FILING APPLICATION:**

1. Two Sets of Paper Copies of Record Plat (subdivision map) indicating existing and proposed revised lot sizes, lot dimensions, road frontages and bulk standards for all affected lots in accordance with Chapter 6 of the Subdivision Regulations. This information should be summarized in a block on the Record Plat.
2. Map or clear description of location of proposed lot markers.
3. Application Processing and Recording Fee: \$180.00

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Following review of application and prior to filing of revised Record Plat, applicant will be required to prepare a Mylar with block for signature of the owner and Planning and Zoning Commission Chairperson.

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*Department use only:*

**APPLICATION RECEIVED:** \_\_\_\_\_ **DATE:** \_\_\_\_\_

**FEE PAID:** \_\_\_\_\_ **APPLICATION COMPLETE:** Yes \_\_\_\_\_ No \_\_\_\_\_

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**Departmental Lot Line Revision Approval**

( ) Planning \_\_\_\_\_ Date: \_\_\_\_\_  
( ) Zoning \_\_\_\_\_ Date: \_\_\_\_\_  
( ) Engineering \_\_\_\_\_ Date: \_\_\_\_\_  
( ) PZC Chairman \_\_\_\_\_ Date: \_\_\_\_\_