



**CITY OF OCEANSIDE
ENGINEERING DIVISION
APPLICATION FOR
LOT MERGER**



TO THE CITY ENGINEER

The Applicant (s) _____, being
the Owner(s) of property(ies) situated at: _____

between _____ Street and _____ Street
Described as: (Legal description) _____

_____ APN #(s) _____

herby request(s), a Lot Merger in accordance with a description and plat, copies of which are included
along with copy of all required supporting documents per submittal check list requirements, and fees in
the amount of \$ _____ herein attached and made part of this application.

APPLICANT'S DECLARATION

(We) (I), the undersigned, herby declare under penalty of perjury that (we are) (I am) all parties having
record title interest in the land covered by this application and described and shown on attachments
submitted herewith, and do hereby consent to the preparation and recordation of a final certification for
the Lot Merger shown.

Dated: _____

Dated: _____

Name of Owner: _____

Name of Owner _____

Title: _____

Title: _____

Signature _____

Signature _____

Address _____

Address _____

Telephone Number _____

Telephone Number _____

NOTE: All owners involved in the Lot Merger must sign this application and declaration. Lack of
signatures can result in rejection of this application. A separate sheet may be attached for additional
information and signatures. All information must be typed in.

Received by: _____

Receipt No: _____

Date: _____

Lot Merger File No. PLA _____

ALL PURPOSE NOTARY ACKNOWLEDGMENT REQUIRED FOR OWNER'S SIGNATURE

LOT MERGER
SUBMITTAL REQUIREMENT

Lot merger application fee (**See Fee Schedule**)

Submittal Requirements Check List: For detailed information and guidelines please refer to City of Oceanside Engineers Manual, General information hand out or the City website at www.ci.oceanside.ca.us/engineering

<input type="checkbox"/> Signed Application	<input type="checkbox"/> Preliminary Title Report for each existing lot (not older than 30 days) (1 copy)
<input type="checkbox"/> Certificate of Compliance including Exhibits "A" & "B" (3 copies)	<input type="checkbox"/> Assessors Parcel Map Page(s), (3 copy)
Exhibit A is the Legal Description (part of COC)	<input type="checkbox"/> Supporting Reference Documents (1 copy)
Exhibit B is the Lot Merger Plat Map (part of COC)	<input type="checkbox"/> Traverse Calculation, for merged lot(s). (1 copy)
<input type="checkbox"/> Notice of Lot Merger	<input type="checkbox"/> Signature Authorization, (Operating Agreement if owner not individuals)
<input type="checkbox"/> Exhibit C – Site Map (3 copies)	<input type="checkbox"/> Copy of working Record of Survey(When applicable)
<input type="checkbox"/> Grant Deed for merged parcel (1 copy)	<input type="checkbox"/> Vesting Deeds for each lot, if applicable
<input type="checkbox"/> Chain of Title/Lot Creation History(COC)	<input type="checkbox"/> Fees

Project Address: _____ **Min. Lot Size:** _____

Lot Density (Ex. & Prop) _____

Lot Coverage (Ex. & Prop): _____ **Zoning:** _____

Property located in Coastal Zone: Yes ☐ No ☐

Minimum Set Backs: _____

Please explain in detail the reason and history for Lot Merger (use back of page if needed) _____

OWNER/APPLICANT (Print)

Mailing Address: _____

Phone: (____) _____

Fax: (____) _____

Cell: (____) _____

ENGINEER: _____

Mailing Address: _____

Phone: (____) _____

Fax: (____) _____

E-Mail _____

CONTACT PERSON (if different)

Mailing Address: _____

Phone: (____) _____

Fax: (____) _____

E-Mail _____

SURVEYOR: _____

Mailing Address: _____

Phone: (____) _____

Fax: (____) _____

E-Mail _____