



TOWN OF PELHAM, NEW HAMPSHIRE VOLUNTARY LOT MERGER FORM

As provided for in RSA 674:39-a, the undersigned applicant requests that the Town of Pelham, New Hampshire, hereby merge the following parcels of land for the purpose of being assessed and treated for regulatory purposes as a single tract or parcel of land:

All information MUST be typed.

Name of record owner(s) (must be identical for all lots consolidated): _____

Mailing address of owner(s): _____

The following existing parcels are to be consolidated into a single parcel:

<u>Map #</u>	<u>Lot #</u>	<u>Street Address</u>	<u>Deed Book</u>	<u>Reference Page</u>
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

(Attach additional sheet if necessary)

It is a condition of this application that each of the above parcels shall (i) not be subject to separate liens or mortgages, or (ii) any such liens apply equally to all parcels merged. In addition, all real estate taxes on all parcels shall be current. By signing below, the owner(s) certifies as to the facts of either (i) or (ii) above.

Dated: _____

Property Owner of Record

By signing below, the applicant agrees that (i) this request is subject to approval of the Planning Board to assure such merger does not create a violation of the current zoning ordinance or subdivision regulations, (ii) that upon approval, a copy of this agreement shall be recorded in the Hillsborough County Registry of Deeds, and (iii) subsequent to the approval of this agreement, the owner(s) shall not separately convey or encumber any of the previously existing parcels. Any attempt to separately convey any parcel or part of a parcel submitted hereunder shall require subdivision approval from the Pelham Planning Board.

Dated this _____ day of _____, 20____.

Owner's Signature

Owner's Signature

Type Name(s):

(For municipal use only)

By signature below, this request has been reviewed by the Pelham Planning Board and the lot merger shall not result in a violation of the current zoning ordinance or subdivision regulations.

Date: _____

Tim Doherty
Planning Board Chairperson

By signature below, this request has been approved by the Pelham Tax Assessor, who assigned the following tax map and lot number to the resulting parcel: Tax Map # _____ Lot #: _____.

Date: _____

Susan Snide
Assistant Tax Assessor

One original to be retained in the Tax Assessor's files. One original shall be forwarded to the Hillsborough County Registry of Deeds for recording upon approval. A recorded copy to be returned to the Owner(s).