

Application Number: _____
Amount of Fee Paid: _____
Date Filed: _____

Town of Allenstown, NH
16 School Street
Allenstown, NH 03275
485-4276, Fax 485-8669

**Planning Board
Voluntary Lot Merger Form**

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

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 and merged into a single parcel:

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

(Attach additional sheets 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 of all parcels shall be current. By signing below, legal counsel for the owner(s) certifies as to the facts of either (i) or (ii) above.

Dated: _____

Legal Counsel to Applicant

By signing below, the applicant agrees that (i) this request is subject to review by the Planning Board to assure such merger does not create a violation of the current zoning ordinance or subdivision regulations (or, in the case of an existing non-conforming lot, increased nonconformity) , (ii) that upon approval, a copy of this agreement shall be recorded in the Merrimack 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 of part of a parcel submitted hereunder shall require subdivision approval from the Allenstown Planning Board once parcels have been merged.

Dated this _____ day of _____, 20____ .

Owner's Signature

Owner's Signature

Type Name(s):

(For Municipal Use Only)

By the signature below, this request has been reviewed by the Allenstown Planning Board and the lot merger shall not result in a violation of the current zoning ordinance or subdivision regulations (or, in the case of an existing non-conforming lot, increased nonconformity).

Date: _____

Planning Board Chairperson

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

Date: _____

Tax Assessor

One original copy of this document is to be retained in the Tax Assessor's files. One Original shall be forwarded to the Merrimack County Registry of Deeds for recording upon approval. A recorded copy to be returned to the Owner(s) and one copy to be placed in Planning Board records.

***ALL APPLICATIONS ARE TO BE SUBMITTED ELECTRONICALLY TO:
ADMIN@ALLENSTOWNNH.GOV**