

TOWN OF ATKINSON

VOLUNTARY LOT MERGER FORM

(Applicant must file TWO duplicate originals)

As provided for in RSA 674:39-a, the undersigned Applicant requests that the Town of Atkinson, 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 Owner(s) (Must be identical for all lots consolidated)

Mailing Address of Owner(s) _____

The existing parcels to be consolidated into a single parcel: (Attach additional sheet if necessary.)

Map #	Lot #	Street address	Deed Book and Page
_____	_____	_____	_____
_____	_____	_____	_____

By signing below, the applicant agrees that (i) this request is SUBJECT TO PLANNING BOARD APPROVAL to assure such merger does not create a violation of the current zoning or subdivision regulations, and (ii) that upon approval, a copy of this agreement shall be recorded in the Rockingham 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 Atkinson Planning Board.

Owner(s) Signature(s) Date: _____

Printed Name(s) _____

(for municipal use only)

By signature below, the application has been reviewed by the Atkinson Planning Board, and the lot merger shall not result in a violation of the current Zoning Ordinance or Subdivision Regulations.

Date: _____ Planning Board Chairperson: _____

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

Date: _____ Tax Assessor: _____

One original to be retained in Tax Assessor's files. One Original to be recorded at the Rockingham County Registry of Deeds (at owner's expense).