

Voluntary Lot Merger

This page is for
Brentwood Planning
Board Official Use Only
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Internal Use Only**

Date:

Name of Property Owner (s) _____

Location of Property:

Parcel 1 _____ tax map/lot _____

Parcel 2 _____ tax map/lot _____

_____ \$30.00 Processing and recording fee must accompany merger application.

Owner Signature

\$_____ Payment received by the Town of Brentwood by:

_____ Date _____

Name

(Applicant must file two duplicate originals; please type or print legibly in black ink)

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**TOWN OF BRENTWOOD, N.H.
VOLUNTARY LOT MERGER FORM**

**Applicant must file two duplicate originals; please type or print legibly in black ink.
Do not write in margins.*

As provided for in RSA 674:39-a, the undersigned applicant requests that the Town of Brentwood, 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 into a single parcel:

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

(Attach additional sheet if necessary)

It is a condition of this application that all real estate taxes on all parcels shall be current.

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 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.

Brentwood Planning Board
1 Dalton Road, Brentwood, NH 03833
Phone: 603-642-6400 ext. 116 Fax: 603-642-6310

Rev. 6/2021

Any attempt to separately convey any parcel or part of a parcel submitted hereunder shall require subdivision approval from the Brentwood Planning Board.

Dated this _____ day of _____, 20_____.

Owner's signature: _____

Owner's signature: _____

Print Name(s): _____

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(For municipal use only)

By signature below, the application has been reviewed by the Brentwood 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 approved by the Brentwood Tax Assessor, who assigned the following tax map and lot number to the resulting parcel:

Tax Map: _____ Lot: _____

Date: _____
_____ Tax Assessor

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