

TOWN OF SOUTH HAMPTON, NH

3 Hilldale Avenue-South Hampton, NH 03827

(603)394-7696

Voluntary Lot Merger Form – Page 1

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

As provided for in NH RSA §674:39-a, the undersigned applicant requests that the Town of South Hampton, 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 #</u> | <u>LOT#</u> | <u>STREET ADDRESS</u> | <u>Deed Reference</u> | |
|--------------|-------------|-----------------------|-----------------------|-------------|
| | | | <u>BOOK</u> | <u>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 applicant certifies as to the facts of either (i) or (ii) above.

Dated: _____

(applicant signature)

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Voluntary Lot Merger Form – Page 2

By signing below, the applicant agrees that (i) this request is subject to approval of the South Hampton 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. Any attempt to separately convey any parcel or part of a parcel submitted hereunder shall require subdivision approval from the South Hampton Planning Board. Any new subdivision must meet the requirements of the Subdivision Regulations that were in effect at the date of the Voluntary Lot Merger.

Dated: _____ Owner's signature: _____

Dated: _____ Owners signature: _____

(For municipal use only)

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

Dated: _____ Signature: _____

Planning Board Chairperson

By signature below, this request has been approved by the South Hampton Tax Assessor, who assigned the following tax map and lot number to the resulting parcel:

| <u>MAP#</u> | <u>LOT#</u> | <u>STREET ADDRESS</u> |
|-------------|-------------|-----------------------|
| _____ | _____ | _____ |

Dated: _____ Signature: _____

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).