

TOWN OF WASHINGTON
OFFICE OF THE PLANNING BOARD
7 Halfmoon Pond Road,
Washington, NH 03280

The attached form, entitled “**Notice of Lot Merger**”, is to be used for individuals seeking to merge adjacent properties in accordance with RSA 674:39-a. Mergers will not be approved if a dwelling exists on more than one of the lots to be merged, as per the LUO.

The fee due with this form is \$55.00, which covers the costs of registering the “Notice” with the Sullivan County Register of Deeds and up-dating the Town Tax Map and 911 Records and Map.

The applicant must submit copies of the deed(s) to the properties involved in the merger.

Checklist of required items:

_____ **Completed Form**

_____ **Fee**

_____ **Copy of Deeds**

The applicant is cautioned that in order for approval you must meet the following requirements:

1. The owner(s) of record must be identical for all parcels involved in the merger.
2. Consent of the mortgagee(s) is required, if there is a mortgage on any part of the property.
3. The information must be typewritten or printed in blue or black ink.
4. Item 5 on Page 2 is to be completed by the Town.
5. The completed form must be notarized.
6. Return the completed form with fee and deed(s) to:

Washington Planning Board
7 Halfmoon Pond Road
Washington, NH 03280

After approval by the Planning Board, the clerk will take care of having the form registered with the county and the original will be returned to you for your files.

TOWN OF WASHINGTON
PLANNING BOARD
NOTICE OF LOT MERGER

The undersigned, as owner of the parcels listed below, request that the following parcels be merged and hereafter be treated as a single tract or parcel of land for all purposes, in accordance with RSA 674:39-a. [Type or Print all information except signatures]

1. Name of Record Owner(s) (must be identical for all parcels)
2. Mailing address of owners:
3. Location of Parcels: Town: Washington County: Sullivan
4. Parcels to be consolidated:
 - Parcel 1:
 - a. Tax Map and Lot: _____
 - b. Location: _____
(Street address or physical location)
 - c. Title Reference: _____
(Book and Page or Probate number, and grantor)
 - Parcel 2:
 - a. Tax Map and Lot: _____
 - b. Location: _____
(Street address or physical location)
 - c. Title Reference: _____
(Book and Page or Probate number, and grantor)
 - Parcel 3:
 - a. Tax Map and Lot: _____
 - b. Location: _____
(Street address or physical location)
 - c. Title Reference: _____
(Book and Page or Probate number, and grantor)
5. Tax Map and Lot of New Parcel:

The parcel created by this merger shall be referred to in the Town Tax Records as Map _____, Lot _____. (To be completed by the Town of Washington)
6. Certification of Owner: By executing this notice, the undersigned certifies that:
 - a. The merger of these parcels will not create a violation of any ordinance or regulation;
 - b. The lots are in common ownership;
 - c. All owners have signed this application; and
 - d. All persons or entities holding mortgages on any of the parcels have signed this application.

Upon the recording of a copy of this Notice of Lot Merger in the Sullivan County Registry of Deeds, the parcels or tracts shall be deemed to be consolidated, and any attempted conveyance or encumbrance of any of the parcels separately shall be void unless prior approval for subdivision is obtained from the

Town of Washington Planning Board.

Dated this _____ day of _____, _____.

Signature of Applicant

Signature of Applicant

Printed or typed name of applicant
STATE of NEW HAMPSHIRE
COUNTY OF _____

Print ed or typed name of Applicant

The foregoing instrument was acknowledged before me this _____ day of _____, _____.

Justice of the Peace/Notary Public
My Commission Expires: _____

Consent by Mortgagees

The undersigned hold mortgages or other interests in one or more of the parcels and consent to the merger of the parcels:

Mortgage 1:

- a. Name and address of mortgagee: _____
- b. Tax Map and Lot of parcel subject to mortgage: _____
- c. Title Reference of Mortgage: Book _____, Page _____

Dated: _____, _____
By: _____

Mortgage 2:

- a. Name and address of mortgagee: _____
- b. Tax Map and Lot of parcel subject to mortgage: _____
- c. Title Reference of Mortgage: Book _____, Page _____

Dated: _____, _____
By: _____

Dated: _____, _____

Endorsed by:
Town of Washington, Planning Board

Chairman / Clerk

To: REGISTRY OF DEEDS - Please return the recorded copy of this agreement to: Washington Planning Board, 7 Halfmoon Pond Road, Washington, NH 03280.