



City of Keene, NH

Voluntary Merger Application

If you have questions about how to complete this form, please call: (603) 352-5440 or email: communitydevelopment@keenenh.gov

SECTION 1: INSTRUCTIONS

1. Complete **Sections 2-4** of this form by entering the property owner, applicant, and parcel information.
2. Complete the attached “**Notice of Voluntary Merger**” form. Enter in the property information under **Section 1. Section 2A** should be completed by residential property owners and **Section 2B** should be completed by commercial property owners. This form will need to be notarized, which can be done at City Hall upon the submittal of an application.
3. Submit a map, drawn to scale, displaying the layout and boundaries of the lots proposed to be merged. The City of Keene’s online GIS Database (<https://www.axisgis.com/keenenh/>) can be used to create this map.
4. Return the original of both forms to the Community Development Department.
5. Calculate the application fee using the formula below and submit payment to the Community Development Department. Checks should be made payable to the *City of Keene*. Credit card payments are accepted in-person or by calling 603-352-5440.
 - \$100 base fee
 - \$20 per lot x _____ number of lots to be merged
 - \$16 Registry of Deeds recording fee

= _____ (TOTAL FEE)

SECTION 2: PROPERTY INFORMATION *(Please type in the information below)*

	STREET ADDRESS	RECORDING INFORMATION (CURRENT DEED VOLUME, PAGE #, & DATE)	TAX MAP PARCEL NUMBER (TMP) (Format: XXX-XXX-XXX-XXX-XXX)
PARCEL #1			
PARCEL #2			
PARCEL #3			
PARCEL #4			

SECTION 3: PROPERTY OWNER CONTACT INFORMATION *(Please type in the information below.)*

PROPERTY OWNER #1	PROPERTY OWNER #2
<u>NAME/COMPANY:</u>	<u>NAME/COMPANY:</u>
<u>MAILING ADDRESS:</u>	<u>MAILING ADDRESS:</u>
<u>PHONE:</u>	<u>PHONE:</u>
<u>EMAIL:</u>	<u>EMAIL:</u>
<u>SIGNATURE:</u>	<u>SIGNATURE:</u>
<u>PRINTED NAME:</u>	<u>PRINTED NAME:</u>

SECTION 4: APPLICANT/AUTHORIZED AGENT CONTACT INFORMATION *(Please type in the info below.)*

(This section only needs to be completed if the applicant/authorized agent is different from property owner.)

NAME/COMPANY:

MAILING ADDRESS:

PHONE:

EMAIL:

SIGNATURE:

PRINTED NAME:

FOR OFFICE USE ONLY:

PROJECT INFORMATION

PROJECT NUMBER:

DATE SUBMITTED

ACCEPTED BY: (Staff member name)

ZONING ADMINISTRATOR VERIFICATION

ZONING DISTRICT:

SIGNATURE:

DATE:

PRINTED NAME:

ASSESSING DEPT. VERIFICATION OF COMMON OWNERSHIP & DEED #

TMP# OF MERGED LOT:

ALT ID #:

SIGNATURE:

DATE:

PRINTED NAME:



City of Keene, NH

Notice of Voluntary Merger

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SECTION 1: PROPERTY INFORMATION (PLEASE TYPE IN THE INFORMATION BELOW.)

	STREET ADDRESS	RECORDING INFORMATION (CURRENT DEED VOLUME, PAGE #, & DATE)	TAX MAP PARCEL NUMBER (TMP) (Format: XXX-XXX-XXX-XXX-XXX)
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PARCEL #2			
PARCEL #3			
PARCEL #4			

SECTION 2: OWNERS' SIGNATURES

Pursuant to RSA 674:39-a, we the undersigned being common owners of the lots described below do voluntarily merge the described lots into a single lot. No merged parcel shall hereafter be separately transferred without subdivision approval.

SECTION 2A: RESIDENTIAL PROPERTY OWNERS (PLEASE TYPE IN THE OWNERS' NAMES BELOW.)

On this the _____ day of _____, 20____, before me, the undersigned, personally appeared _____, known to me (or satisfactorily proven) to be the person described in the above notice of merger, and acknowledged that she/he executed the same in the capacity therein stated and for the purposes therein contained.

Owner 1 Signature

Notary Public/Justice of the Peace Signature

Owner 1 Printed Name

Notary Public/Justice of the Peace Printed Name

Commission Expires _____

On this the _____ day of _____, 20____, before me, the undersigned, personally appeared _____, known to me (or satisfactorily proven) to be the person described in the above notice of merger, and acknowledged that she/he executed the same in the capacity therein stated and for the purposes therein contained.

Owner 2 Signature

Notary Public/Justice of the Peace Signature

Owner 2 Printed Name

Notary Public/Justice of the Peace Printed Name

Commission Expires _____

COMMERCIAL PROPERTY OWNERS—SEE NEXT PAGE. —>

SECTION 2B: COMMERCIAL PROPERTY OWNERS (PLEASE TYPE IN THE OWNER INFORMATION BELOW.)

COMPANY NAME:

OWNER SIGNATURE:

DATE:

OWNER PRINTED NAME:

OWNER TITLE:

CORPORATE ACKNOWLEDGEMENT

On this the _____ day of _____, 20____, before me, the undersigned officer, personally appeared _____, who acknowledged herself/himself to be the _____ of the _____ a New Hampshire corporation, that she/he, as such _____, being authorized so to do executed the foregoing instrument for the purposes therein contained by signing the instrument for the purposes therein contained, by signing the name of the corporation by herself/himself as

_____.

Notary Public/Justice of the Peace Signature

Commission Expires _____

Notary Public/Justice of the Peace Printed Name

FOR OFFICE USE ONLY:

Approved by the City of Keene Planning Board Designee:

Zoning Administrator Signature

Date

Zoning Administrator Printed Name