TOWN OF CENTER HARBOR

NOTICE OF VOLUNTARY MERGER PURSUANT OT RSA 674:39-A

PLEASE TYPE AND SIGN IN BLACK INK

Property Owner (s) Name: _____

_____

Address: _____

_____

Telephone: _____

Email: _____

Identify the parcel affected by this merger

Map # _____	**Lot # ____**	**Book # ____**	**Page # ____**
Map # _____	**Lot # ____**	**Book # ____**	**Page # ____**
Map # _____	**Lot # ____**	**Book # ____**	**Page # ____**
Map # _____	**Lot # ____**	**Book # ____**	**Page # ____**

I/we understand that no such merged parcels shall thereafter be separately transferred without subdivision approval.

Signature of Property Owner (s): X_____ X_____

_____ _____
Print Name Print Name

I/we understand that I/we must file a copy of this notice with the Registry of Deeds upon approval of the Planning Board and a copy of same will be forwarded to the assessing officials of Center Harbor.

Signature of Property Owner (s): X_____ X_____

_____ _____
Print Name Print Name

FOR OFFICE USE ONLY – NOT VALID WITHOUT PLANNING BOARD ENDORSEMENT

Date Received: _____ Date Reviewed: _____

Endorsed By: _____
FOR THE CENTER HARBOR PLANNING BOARD