TOWN OF WILMOT, NH PLANNING BOARD

VOLUNTARY MERGER APPLICATION

(Pursuant to RSA 674:39-a)

Name of Owner:_____

Address:_____

Phone Number:_____

Applicant or Agent (if different from above):_____

Location of Property (Street Address):_____

Tax Map & Lot #:_____

Tax Map & Lot #:_____

Tax Map & Lot #:_____

Indicate with a checkmark on which lot(s) buildings presently exist.

Please attach the following to this application:

1. An excerpt from the current tax maps which shows the lots proposed for merger.
2. Copies of recorded deeds showing your ownership of all lots proposed for merger. **(Note: Deeds must show the Registry's Book and Page numbers.)**
3. Copies of your most current property tax bill for all lots proposed for merger.
4. Fee: See attached Application Fee Form for Filing Fee.

   Also required Recording Fee:

   $26.00

   12.50 (State Charge)

   Total $38.50 (There is a charge of $12.50 per ADDITIONAL recording)

Date: _____

_____

Signature of Applicant

Fee Paid: ____ Date: _____ Rec'd by _____ Amt _____