

NOTICE OF LOT MERGER

The undersigned, as owner of the parcels listed below, requests 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:

1. Name of Record Owner(s) (must be identical for all parcels):

2. Mailing address of owners:

3. Location of Parcels:

Town: Candia

County: Rockingham

4. Existing 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

d. Tax Map and Lot: \_\_\_\_\_

e. Location: \_\_\_\_\_  
(Street address or physical location)

f. Title Reference: \_\_\_\_\_  
(Book and Page or Probate number, and grantor)

(Attach additional sheet if necessary)

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 \_\_\_\_\_.

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 Rockingham 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 Candia Planning Board.

Dated this \_\_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

STATE OF NEW HAMPSHIRE

COUNTY OF \_\_\_\_\_

The foregoing instrument was acknowledged before me this \_\_\_\_\_ day of \_\_\_\_\_,

\_\_\_\_\_ by \_\_\_\_\_.

\_\_\_\_\_

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 \_\_\_\_\_

\_\_\_\_\_

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 \_\_\_\_\_

\_\_\_\_\_

By: \_\_\_\_\_

(attach additional sheet if necessary)

Dated: \_\_\_\_\_, \_\_\_\_\_.

Endorsed By:  
Town of Candia Planning Board

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FEE SCHEDULE *(if Town is Recording Documents for you):*

8.5 x 11 Lot Merger \$12 first page, \$4 each additional page	\$
L-Chip Fee \$25	\$
Delivery to Registry (fees may apply) See Land Use Office	\$
Total Fees	\$

TO REGISTRY OF DEEDS:

Please return the recorded copy of this agreement to the Town of Candia Planning Office, 74 High Street, Candia NH 03034.