



**Return to: TOWN OF WARNER PLANNING BOARD**

*P.O. Box 265*

*Warner, New Hampshire 03278-0059*

*Telephone: (603) 456-2298, ext. 7*

*Fax: (603) 456-2297*

**VOLUNTARY MERGER FORM**

**\*\*\*PLEASE TYPE OR PRINT CLEARLY\*\*\***

**Please note that this application is subject to NH RSA 91-A which affords the public access to this information.**

Today's Date: \_\_\_\_\_

Property Owner(s) Name(s): \_\_\_\_\_

\_\_\_\_\_

Address: \_\_\_\_\_

Telephone Number: \_\_\_\_\_

Identify the parcels affected by this merger:

Map# \_\_\_\_\_ Lot# \_\_\_\_\_ Book# \_\_\_\_\_ Page# \_\_\_\_\_

Map# \_\_\_\_\_ Lot# \_\_\_\_\_ Book# \_\_\_\_\_ Page# \_\_\_\_\_

Map# \_\_\_\_\_ Lot# \_\_\_\_\_ Book# \_\_\_\_\_ Page# \_\_\_\_\_

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

I (we) understand that the Town of Warner Land Use Office will file this notice with the Merrimack County Registry of Deeds and a copy of the same will be forwarded to the assessing officials of Warner, NH.

Signature of Property Owner(s): \_\_\_\_\_

\_\_\_\_\_

The application fee is \$60.00. Please make checks payable to the Town of Warner

Plus a recording fee of \_\_\_\_\_ with a separate check made out to: Merrimack County Registry of Deeds.

---

For Office Use Only

Date Received: \_\_\_\_\_ Date Reviewed: \_\_\_\_\_ Amount Paid: \_\_\_\_\_

Signature of Planning Board Representative: \_\_\_\_\_