

Huntsville Town

Parcel Consolidation Application

Applicant Name: _____

Applicant Mailing Address: _____

Email: _____ Phone: _____

Brief Description of Proposed Parcel Consolidation: _____

Parcel Owner's Permission for Parcel Consolidation Application

The undersigned authorize this application for parcel consolidation:

Parcel Number(s): _____

Parcel(s) Owner Name: _____

Parcel(s) Owner Mailing Address: _____

Email: _____ Phone: _____

Parcel Owner Signature: _____ Date: _____

Title (Authorized Agent): _____

The undersigned authorize this application for parcel consolidation:

Parcel Number(s): _____

Parcel(s) Owner Name: _____

Parcel(s) Owner Mailing Address: _____

Email: _____ Phone: _____

Parcel Owner Signature: _____ Date: _____

Title (Authorized Agent): _____

(For Additional Parcel Owners Use Attached Sheet)

For Town Use:

Application Date: _____ Fees Paid: _____

Beckki Endicott, Town Clerk

Huntsville Town Planning Commission

- | | |
|--|---|
| <input type="checkbox"/> Recommended for Approval | <input type="checkbox"/> Recommended for Conditional Approval |
| <input type="checkbox"/> Recommended for Rejection | <input type="checkbox"/> Deferred |

Chair Signature: _____ Date: _____

Notes/Conditions: _____

Huntsville Town Council

- | | |
|-----------------------------------|---|
| <input type="checkbox"/> Approved | <input type="checkbox"/> Conditional Approval |
| <input type="checkbox"/> Rejected | <input type="checkbox"/> Deferred |

Mayor Signature: _____ Date: _____

Notes/Conditions: _____

ATTEST:

_____ Date: _____

Beckki Endicott, Town Recorder

Parcel Consolidation Application Requirements:

- The parcel consolidation does not involve a recorded subdivision plat.
- The proposed parcel consolidation does not result in the creation of a parcel of size or shape that does not conform to all Town zoning regulations, site development standards, and uses as approved in Appendix One, Table 15-1 (Acceptable Uses by Zone). If the proposed change is to a legally existing nonconforming lot, the change may not perpetuate nonconformity.
- The proposed parcel consolidation does not result in changing a complying structure into a non-complying structure as a result of setbacks, proximity to other structures, use, landscaping, or any other site land use requirement.
- The petition to consolidate parcels must include signatures from representatives of each parcel affected by the parcel consolidation.
- If the subject parcels are zoned differently, the Huntsville Town Council may require the applicant to proceed with a rezone petition under title 15.16 prior to approval of a parcel consolidation petition.

Submission Requirements & Process:

- Completed & Signed Application Form
- Payment of Application Fee to Huntsville Town
- Legal description of the whole piece of property to be consolidated
- Copies of deeds reflecting the proposed property boundaries (not yet recorded)
- One 11x17 (or larger) drawing to scale of the proposed consolidated parcel showing all structures, fence lines, easements, driveways, and streets. Drawing must include a measurement scale.
- Parcel Consolidation Applications (including all required documents) must be reviewed by the Huntsville Planning Commission and approved by the Huntsville Town Council.
- Once approved by the Huntsville Town Council, the parcel consolidation shall be accomplished by recording the appropriate deeds with the County Recorder's Office.

ADDITIONAL PARCEL OWNERS

Parcel Owner's Permission for Boundary Parcel Consolidation Application

The undersigned authorize this application for parcel consolidation:

Parcel Number(s): _____

Parcel(s) Owner Name: _____

Parcel(s) Owner Mailing Address: _____

Email: _____ Phone: _____

Parcel Owner Signature: _____ Date: _____

Title (Authorized Agent): _____

The undersigned authorize this application for parcel consolidation:

Parcel Number(s): _____

Parcel(s) Owner Name: _____

Parcel(s) Owner Mailing Address: _____

Email: _____ Phone: _____

Parcel Owner Signature: _____ Date: _____

Title (Authorized Agent): _____

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Parcel Number(s): _____

Parcel(s) Owner Name: _____

Parcel(s) Owner Mailing Address: _____

Email: _____ Phone: _____

Parcel Owner Signature: _____ Date: _____

Title (Authorized Agent): _____

The undersigned authorize this application for parcel consolidation:

Parcel Number(s): _____

Parcel(s) Owner Name: _____

Parcel(s) Owner Mailing Address: _____

Email: _____ Phone: _____

Parcel Owner Signature: _____ Date: _____

Title (Authorized Agent): _____