

TOWN OF STAMFORD
BOUNDARY LINE ADJUSTMENT
ACCEPTANCE FORM

Parcel A - (Sender):

Name _____
_ Address _____
_ Phone _____
_ Tax _____
map# _____ Block _____ Parcel _____
Liber _____ Page _____

Parcel B - (Receiver):

Name _____
_ Address _____
_ Phone _____
_ Tax _____
map# _____ Block _____ Parcel _____
Liber _____ Page _____

Location:

(Road name, distance & direction from nearest intersection)

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Description of Action:

Amount of property to be transferred - Parcel
"C" _____

We the undersigned hereby swear that Parcel "C" will be taken from Parcel "A" and added to Parcel "B", and no new lots will be created by this action. Also, Parcel "C" cannot be conveyed separately from the tract to which it is added unless resubmitted as a subdivision and approved by the Town of Stamford Planning Board. We the undersigned also agree to send a copy of the new deed confirming the transfer and the combining of Parcel "C" and Parcel "B".

Parcel A (owner's signature)

Date

Subscribed and sworn to before me this _____ day of _____,
20__

Notary Public, State of New York
(Signature)

(over)

Parcel B (owner's signature)

Date

Subscribed and sworn to before me this _____ day of _____,
20__

Notary Public, State of New York
(signature)

Classified as a Boundary Line Adjustment by the Town of Stamford
Planning Board.

Chairperson (signature)

* This form and accompanying map must be filed in the Delaware
County Clerk's office, and a copy of the new deed sent back to
the Planning Board within sixty-two (62) days of approval by the
Town of Stamford Planning Board.