

**Town of Kingston  
Planning Board  
PROCEDURE FOR SUBDIVISION  
~ ACKNOWLEDGEMENT ~**

*(Return this signed and dated form with your plan submittal and completed application.)*

1. Fill out application; refer to the fee schedules to determine those fees that are required for submittal and associated fees following Planning Board approval.
2. Contract with a State of New Hampshire licensed land surveyor to do your plans. Be sure he has an updated copy of Kingston's subdivision regulations. Final approval will not be granted by the Planning Board if a valid New Hampshire land surveyor's seal is not in evidence.
3. Any and all State and Town permits required must be applied for, before applications will be accepted by the Board for an appointment. Copies of the permit applications must be provided at the time of the subdivision application. (Including but not limited to: Septic design, approved by the Town before the State; Dredge and Fill; High Intensity Soil Survey; Driveway entrance onto State highway).
4. File application, copies of all state and town permit applications, twelve (12) full-size copies of the plan, five (5) 11 x 17 copies of the plan, supporting documents and necessary fees with the Planning Board. (See Fee Schedule A) **Electronic copies of subdivision plans are to be sent to the Planning Board email address ([pb@kingstonnh.org](mailto:pb@kingstonnh.org)) as part of the submission requirements; deadlines as posted apply. In lieu of electronic receipt of the plans, a waiver can be requested that includes an additional 11x17 copy of the plan being submitted.** All necessary documents and fees must be in to the Board not less than twenty-one days prior to the meeting at which the application is to be accepted and placed on an agenda for a public hearing. Deadline dates are available at the Planning Board office. Public Hearings are held on the third Tuesday of each month.\* **All documents must include property address and tax map number.**
5. Applicant must appear before the Planning Board at the public hearing. If it is not possible for the applicant to appear, an agent or representative for the applicant may appear with a NOTARIZED letter of authorization from the applicant.
6. A copy of the deed to the property shall be required.
7. If you wish, you may request a meeting with the Town Planner prior to submitting your plans to discuss your proposal or with the Planning Board that would require abutter notification of the discussion.

**\*Unless Otherwise Posted**

KPB

Adopted August 20, 2008

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Amended: 10/2008, 02/2009, 1/2010, 2/22/2011,

6/28/2011, 03/2012, 02/2013, 02/2014, 5/2014, 10/2017, 6/2018

09/2019' 08/2021, 11/15/2022

8. By signing and submitting the application, the property owner grants permission for the Planning Board to access private property for the purposes of a site walk. The property owner will receive prior notification of any scheduled site walk.
9. By signing this document, I acknowledge that I am aware that, upon Planning Board final approval, I also am responsible for any required permits/fees such as, but not limited to, Sign Permit(s), Building Permit(s), Business Occupancy Permit and Impact Fees. It is my responsibility to contact the appropriate permitting authority prior to commencing with my project. If the engineer on the plan is completing this information, it is the engineer's responsibility to make the owner aware of this acknowledgement.

I have read the Procedures for Subdivision and the Subdivision Regulations for the Town of Kingston and understand what is required.

\_\_\_\_\_  
*Signature of Owner(s)*

\_\_\_\_\_  
*Date*

\_\_\_\_\_  
*Signature of Applicant(s)(If different from Owner)*

\_\_\_\_\_  
*Date*

\_\_\_\_\_  
*Property Address*

\_\_\_\_\_  
*Tax Map Number*

\_\_\_\_\_  
*Contact Phone Number(s)*

\_\_\_\_\_  
*email address – owner (optional)*

\_\_\_\_\_  
*Contact Phone Number(s)*

\_\_\_\_\_  
*email address – applicant (optional)*

**SUBDIVISION APPLICATION**

**KINGSTON PLANNING BOARD**

Date:

Applicant's Name and Address:

Property Owner's Name and Address:

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

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

(Phone): \_\_\_\_\_

(Phone): \_\_\_\_\_

(Attach additional list as may be necessary)

Tax Map and Lot Numbers of parcel(s) involved: \_\_\_\_\_

Street Address/Location: \_\_\_\_\_

Zoning Districts affecting property (check all that apply):

- |  |   |
|--|---|
| _____ Rural Residential District       | _____ Commercial Zone ____ I ____ II ____ III |
| _____ Single Family Residential        | _____ Industrial District                     |
| _____ Single Family Res/Agricultural   | _____ Aquifer Protection Zone                 |
| _____ Historic District ____ I ____ II | _____ Shoreland Protection District           |
| _____ Housing for Elderly District     | _____ Wetlands Conservation District          |
| _____ Groundwater Management Zone      | _____ Other                                   |

Description of Proposal: \_\_\_\_\_

Date of Rockingham County Conservation Test Pit Witnessing: \_\_\_\_\_

State permits applied for (include date of application):

- |                                    |                                    |
|------------------------------------|------------------------------------|
| _____ State Subdivision Approval   | _____ Site Specific Permit         |
| _____ Dredge and Fill Permit       | _____ State Driveway Access Permit |
| _____ Alteration of Terrain Permit | Other: specify: _____              |
| Other: specify: _____              |                                    |

**Names and Addresses of Abutters:** (Please note, the definition of abutter can be found in the Town of Kingston Subdivision Regulations) – Attach a list of the names and addresses of abutters to this application.

*By signing this application, the applicant acknowledges that this application has been completed truthfully and understands the standards set forth by the Kingston Planning Board's Site Plan Review and/or Subdivision Regulations.*



**Upon Approval of a Subdivision by the Planning Board, the following is required prior to the Board Chairman signing the Mylar:**

1. All Mylars must be **pre-approved** by the Rockingham County Registry of Deeds. The applicant, or his/her representative, **must provide the date** that the Registry reviewed and approved the mylar as adequate for recording.
2. A copy of the entire approved plan set must be provided to the Planning Board on “CD” in PDF format. *(Adopted January 5, 2010)*
3. One (1) “paper copy” of the entire approved “D” sized plan set must be provided to the Board; the Chairman will sign and date each page as confirmation of the approval. In addition, two (2) copies of the entire approved plan set in 11 x 17 format must be provided to the Planning Board as a “paper copy”. *(Adopted January 5, 2010; amended June 21, 2011)*
4. All associated fees must be received.
5. Certificate of Monumentation must be completed and submitted to the Planning Board.

<hr/> Tax Map #
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**SUBDIVISION FEE SCHEDULE – B**  
 (To be submitted **AFTER** approval)

All documentation must note the property Tax Map ID number.

**THE FOLLOWING ITEMS ARE REQUIRED UPON APPROVAL.**

- A. A fee of \$40.00 per approved lot to cover the cost of making the necessary changes to the Town’s tax map. A separate check to be made payable to the “Town of Kingston”.

\_\_\_\_\_ x \$40 = \_\_\_\_\_  
 (# of lots)

- B. The cost, as determined by the Rockingham County Registry of Deeds, necessary to record an approved Mylar plan showing all required elements as determined by the Kingston Planning Board.

First Sheet x \$50 = \_\_\_\_\_

\_\_\_\_\_ x \$26 = \_\_\_\_\_  
 (each additional # of sheets to be recorded)

\_\_\_\_\_ x \$12 ( Four (4) size “D” copies for the Board at \$3.00 each) = \_\_\_\_\_  
 (# of sheets to be recorded)

Mailing of Copies:   \$5.00  

\_\_\_\_\_ X \$15 (Ten (10) size 8 ½ x 11 Copies at \$1.50 each) = \_\_\_\_\_  
 (# of sheets to be recorded)

**Total of items listed under “B”:** \_\_\_\_\_  
 (A separate check made payable to “Town of Kingston”)



**Comments:**

Cc: Town Engineer  
Board of Selectmen  
Finance Officer

**Patriot Law Information Form\***

1. Name of Owner or Principle of Corporation

\_\_\_\_\_

2. Home Address

\_\_\_\_\_

\_\_\_\_\_

3. Social Security Number

\_\_\_\_\_

4. Property Tax Map Number

\_\_\_\_\_

5. Date of Birth

\_\_\_\_\_

6. Driver's License Number (Please include a copy of the current license.)

\_\_\_\_\_

7. Corporation Tax ID Number (also known as FID Number.)

\_\_\_\_\_

8. Contact Number (Phone/Cell Phone)

\_\_\_\_\_

*\*A requirement for the Town's Financial files only when submitting an  
Engineering Costs Agreement Form.*

***An IRS W-9 must be submitted; copies are available through the Planning Board office.***

*Sensitive information (Items 3,5,6,7) is redacted prior to being placed in the Planning Board's files.*

**PROPERTY OWNER'S ACKNOWLEDGEMENT\***

*\*To be completed when the Applicant is not the Property Owner.*

*This document must be notarized if the Property Owner is unable to attend the Public Hearing for the review of the proposal.*

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

\_\_\_\_\_  
*Property Co-Owner's Name (if applicable)*

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_  
*Property Address*

\_\_\_\_\_  
*Mailing Address*

\_\_\_\_\_  
*Contact Number (Phone, Cell, etc.)*

\_\_\_\_\_  
*email address (optional)*

\_\_\_\_\_  
*Property Tax Map and Lot Number*

\_\_\_\_\_  
*Applicant's Name*

**I am aware of the Subdivision proposal being submitted for review by the Kingston Planning Board.**

\_\_\_\_\_  
(Property Owner's Signature)

\_\_\_\_\_  
(Date)

\_\_\_\_\_  
(Property Co-Owner's Signature, if applicable)

\_\_\_\_\_  
(Date)

**ESCROW AGREEMENT RELEASE ACKNOWLEDGEMENT**

*It is the applicant's responsibility to request the release of the balance of any remaining escrow funds held by the Town of Kingston. However, once the Planning Board has determined that an application has ended and all associated costs have been finalized, a release request may be initiated by the Board to eliminate any unnecessary financial accounts.*

*The following information will be given to the Town of Kingston's Finance Officer regarding the dispersal of funds held in escrow by the Town of Kingston.*

Name of Applicant: \_\_\_\_\_

Property Tax Map Number: \_\_\_\_\_

Mailing Address where the Balance of Funds can be sent:

\_\_\_\_\_  
(Person or Business to whom the check should be written)

\_\_\_\_\_  
(Mailing Address)

\_\_\_\_\_  
(Mailing Address)

\_\_\_\_\_  
(Mailing Address)

*By signing this form, the applicant acknowledges receipt of this information and has given the correct information regarding the dispersal of any unused escrow funds held by the Town of Kingston. It is the*

responsibility of the applicant to supply any change of information, in writing, to the Town of Kingston Planning Board.

\_\_\_\_\_  
(Applicant Signature)

\_\_\_\_\_  
(Date)

\_\_\_\_\_  
Home Phone Number

\_\_\_\_\_  
Cell Phone Number



## Town of Kingston New Hampshire

# CERTIFICATE OF MONUMENTATION

SUBDIVIDER'S NAME: \_\_\_\_\_

MAILING ADDRESS: \_\_\_\_\_

STREET ADDRESS  
OF SUBDIVIDED  
PROPERTY: \_\_\_\_\_

\_\_\_\_\_  
(Tax Map Number)

\_\_\_\_\_  
(Date of Planning Board Approval)

\_\_\_\_\_  
(Recorded Plan Number)

\_\_\_\_\_  
(# of Granite Markers Required)

\_\_\_\_\_  
(# of Concrete Markers Required)

\_\_\_\_\_  
(# of Iron Pipes Required)

**I hereby certify that the monumentation required on the above referenced subdivision plan has been accurately installed under my supervision and said monumentation complies with the provisions of the Town of Kingston's Ordinances, Rules and Regulations.**

\_\_\_\_\_  
(Surveyor's Signature)

\_\_\_\_\_  
(Date)

\_\_\_\_\_  
(Name of Surveyor – Printed)

KPB

Adopted August 20, 2008

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Seal of Surveyor

(Telephone Number/Cell Phone Number)

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(Surveying Company)

For Planning Board Use Only:

Date of Receipt: \_\_\_\_\_ Received by: \_\_\_\_\_