

**TOWN OF DURHAM**  
8 NEWMARKET RD  
DURHAM, NH 03824  
(603) 868-8064  
[www.ci.durham.nh.us](http://www.ci.durham.nh.us)

**LOT LINE ADJUSTMENT APPLICATION**  
**Town of Durham, New Hampshire**

Date: 11/16/21 [office use only. Check # \_\_\_\_\_ amount \$ \_\_\_\_\_ date \_\_\_\_\_ ]

**Property information**

Tax map #: 6; lot #'s): 11-8, 11-6; zoning district: RC

Property address/location: NEWMARKET ROAD - ROUTE 108

Name of project (if applicable): N/A

**Property owner – Parcel A**

Name (include name of individual): Great Bay Animal Hospital, LLC - Jim McKiernan

Mailing address: 31 Newmarket Road Durham, NH 03824

Telephone #: 603-682-8216 Email: drijim@greatbayah.com

**Property owner – Parcel B** (clarify whether both parcels are owned by the same person(s))

Name (include name of individual): Jeffrey S. Osborn Joan B. Osborn

Mailing address: 21 Newmarket Road Durham, NH 03824

Telephone #: 408-455-8258 Email: jeff@osborncapital.com

**Surveyor**

Name (include name of individual): Kevin McEneaney, LLS - McEneaney Survey Associates

Mailing address: 24 Chestnut Street Dover, NH 03820

Telephone #: 603-742-0911 Fax #: N/A

Email address: kevin@surveynh.com Professional license #: NH LLS #661

**Proposed project**

What is the purpose of the lot line revision? \_\_\_\_\_

\_\_\_\_\_ Lot 6-11-8 to convey "Parcel A" (3.75 ac.) to Lot 6-11-6

Will any encroachments result? No

**Comments**

Please feel free to add any comments, additional information, or requests for waivers here:

---

---

---

---

---

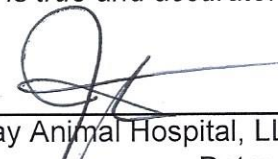
---

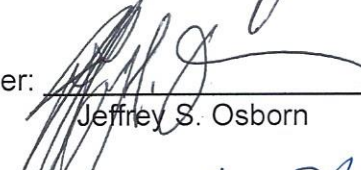
---

**Submission of application**

This application must be signed by the property owner(s) *and/or* the agent.

*I/we hereby submit this Lot Line Adjustment application to the Town of Durham Planning Board pursuant to the Town of Durham Subdivision Regulations and attest that to the best of my knowledge all of the information on this application form and in the accompanying application materials and documentation is true and accurate. As agent, I attest that I am duly authorized to act in this capacity.*

Signature of property owner:   
(Parcel A) Great Bay Animal Hospital, LLC - Jim McKiernan  
Date: 11-16-21

✓ Signature of property owner:   
(Parcel B) Jeffrey S. Osborn  
Date: 11/16/21

✓ Signature of agent:   
McEneaney Survey Associates - Kevin McEneaney, LLS  
Date: 11/16/21