	Town of Gilmanton	
	Town Clerk Tax Collector's Office	
	PO Box 550, Gilmanton, NH 03237	
	Ph: (603) 267-6726 Fax: (603) 267-6701 Monday - Thursday 9:00 a.m. – 5:00 p.m.	
	<b>Resident Confirmation by Owner</b> THIS FORM MUST BE NOTARIZED	
	THIS FORM MUST BE NOTARIZED	
Date:		
I,	, owner of the below li	isted
	property, located in Gilmanton or Gilmanton Iron Works do hereby declare that I am allowing:	
to reside at	t my property and use this address as their primary residence.	
The addres	ss of primary residence is:	
The addres	so or primary residence is.	
	List Full Address	
	List Full Address	
with a mail	ling address of:	
Owner's Si	ignature:	
	(Signed under Penalty of Perjury)	
Owner's T	elephone Number:	
Owner s I		
Notary:	County of, ss.	
	State of On thisday of, 20	
	On this, 20,	
	know to me or proven to the instrument subscriber(s), personally appeared	
	before me and acknowledged that he/she/they executed the foregoing instrument.	
	Notary Signature:	
	Printed Name:	
	Date Commission Expires:	

**21:6-a Residence**. – Residence or residency shall mean a person's place of abode or domicile. The place of abode or domicile is that designated by a person as his principal place of physical presence for the indefinite future to the exclusion of all others. Such residence or residency shall not be interrupted or lost by a temporary absence from it, if there is an intent to return to such residence or residency as the principal place of physical presence. **Source.** 1981, 261:1, eff. June 16, 1981.