

Middleborough Rent Board
10 Nickerson Avenue
Middleborough, MA 02346

**OWNER PETITION FOR PRE-APPROVAL
OF RENT ADJUSTMENT
CAPITAL IMPROVEMENTS/EQUIPMENT**

In the Matter of:
(Address of Property)

Name of Mobile Home Park

No. Street City ZIP

I HEREBY PETITION FOR ADJUSTMENT OF RENTS
AT THE ABOVE NAMED PROPERTY.

THIS PETITION, INCLUDING THE ACCOMPANYING
SCHEDULES AND ATTACHMENTS, SIGNED UNDER
THE PAINS AND PENALTIES OF PERJURY.

Signature of Owner

Date

NAME OF OWNER:

FIRST

LAST

ADDRESS OF OWNER:

NO.

STREET

CITY

STATE

ZIP

TELEPHONE NO.

1. Do the affected mobile home accommodations comply with the State Sanitary Code, the Building Code, the Fire Code and the Zoning Code? Yes _____ No _____
(If NO, explain, attaching a separate sheet if necessary)

2. State the scope, nature and reasons for the proposed Capital Improvement(s). (Please include the # of Units affected by the Improvement(s) and the # of Units to which the increase would apply.)

3. List the Total Financial Expenditure of the Improvement(s) for which you are requesting an increase. Please attach three (3) written estimates for the work to be done (or three (3) estimates for each separate sub-portion), and indicate which estimate you propose to use:

4. State the estimated Date of Commencement of the work: _____

5. State the estimated Date of Completion: _____

6. State the Date on which the Rent Increase is to begin: _____

7. State the Amortization Period you plan to use (e.g. 10 years): _____

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RENT SCHEDULE INSTRUCTIONS**

Please Read Carefully

Complete this schedule for all mobile home accommodations in the Mobile Home Park (except as indicated). If the property contains more than twenty (20) accommodations and rents vary within the Mobile Home Park accommodations, please add copies of this schedule. All forms must be printed in INK or typewritten. Please fill all appropriate boxes and answer all questions.

Tenant's Name (column 1):

List only the First Initial and Last Name of the tenant(s) presently occupying the mobile home accommodation.

Lease Expires (column 2):

If the mobile home accommodation is occupied under a Lease, indicate the month, day and year that the Lease expires. If the unit is occupied by a Tenant At Will, indicate by "T/W".

Date(s) Rent Last Set (column 3):

Complete this column indicating the date(s) that Rent was last set.

Current Monthly Rent (column 4):

Enter the Current Monthly Rent for each mobile home accommodation, even in a rent increase is not being requested.

Proposed Monthly Rent Increase (column 5):

Enter the Proposed Monthly Rent Increase for those Units for which you are requesting that rental increase – enter ONLY the increase, not the Total Rent being requested.

Proposed Total Monthly Rent (column 6):

Enter the Proposed Total Monthly Rent, that is the Current Monthly Rent (column 4) plus the Proposed Monthly Rent Increase (column 5).

Monthly Town Tax (column 7):

Enter the Monthly Tax paid to the Town of Middleborough.

