

Middleborough Rent Board  
10 Nickerson Avenue  
Middleborough, MA 02346

**OWNER PETITION FOR FINAL 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)

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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.

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3. List the Total Financial Expenditure of the Improvement(s) for which you are requesting an increase. Please attach a copy of the FINAL bills for the work done:

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4. State the Date of Commencement of the work: \_\_\_\_\_

5. State the 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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**OWNER PETITION FOR FINAL APPROVAL OF  
RENT ADJUSTMENTS  
CAPITAL IMPROVEMENTS/EQUIPMENT  
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.

**Date 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.

# OWNER PETITION FOR FINAL APPROVAL OF RENT ADJUSTMENTS CAPITAL IMPROVEMENTS/EQUIPMENT RENT SCHEDULE

Mobile Home Park: \_\_\_\_\_  
Please read instructions on previous page

TENANT'S NAME:	DATE LEASE EXPIRES (MO/DAY/YR)	DATE(S) RENT LAST SET (MO/DAY/YR)	CURRENT MONTHLY RENT	PROPOSED MONTHLY INCREASE	PROPOSED TOTAL MONTHLY RENT	CURRENT MONTHLY TOWN TAX
(1)	(2)	(3)	(4)	(5)	(4 + 5 = 6)	(7)
<b>MONTHLY TOTAL:</b>			\$	\$	\$	\$
<b>YEARLY TOTAL:</b>			\$	\$	\$	\$

Please List ALL mobile home accommodations whether requesting an Increase or not, for a particular Unit.