



PROCUREMENT OFFICE

140 Main Street, Marlborough, MA 01752

DIRECT DIAL (508) 460-3707 TDD (508) 460-3610

KHOLMI@MARLBOROUGH-MA.GOV

ABUTTER LOTS REQUEST TO PURCHASE APPLICATION

1. Abutter Lot Address:

2. Applicant's Name:

Home Address:

City: _____ State: _____ Zip Code: _____

Phone Number: _____ Work Phone: _____

Mailing Address (if different from above):

3. Address of property you own next to the abutter lot:

4. Recording reference of the property you own:

Deed Book: _____ Page: _____

5. Please indicate the type of property you own next to the lot:

- | | |
|---------------------------------------------------------|------------------------------------------|
| <input type="checkbox"/> Residence (Owner
Occupied) | <input type="checkbox"/> Business |
| <input type="checkbox"/> Residence (Renter
Occupied) | <input type="checkbox"/> Vacant Land |
| <input type="checkbox"/> Church | <input type="checkbox"/> Other:
_____ |

6. *Co-applicant's Name (if applicable):

Address: _____

*Co-Applicant's Name (if applicable):

Address: _____

*Co-applicants or co-owners are any other person(s) listed on your deed for the abutting property.
Please provide a copy of the death certificate for any co-owner who is deceased.

7. Please indicate your proposed use(s) for the abutter lot:

- | | |
|------------------------------------------------------------|------------------------------------------------|
| <input type="checkbox"/> Garden | <input type="checkbox"/> Landscaped Open Space |
| <input type="checkbox"/> Side Yard | <input type="checkbox"/> Off Street Parking |
| <input type="checkbox"/> Septic
Improvements | <input type="checkbox"/> Garage |
| <input type="checkbox"/> Addition to Existing
Structure | <input type="checkbox"/> Other:
_____ |

8. When do you plan to start and complete your proposed improvements to the lot?

Start Date: _____ Completion Date: _____

9. If you are proposing to make improvements to the lot, what are your expected projects costs?

\$ _____

10. Have you (or your tenants) assisted in maintaining this lot? ☐ Yes ☐ No

If yes, please explain:

11. Describe your proposed use for the lot in as much detail as possible. If you are going to make improvements to the lot, please tell us what kind of materials that you will be using. Please enclose or attach a rough sketch of your proposed use and design for the lot. Attach additional pages if necessary.

12. If another abutter applies for the same lot, would you be willing to purchase the lot together to subdivide at your own expense after the sale? ☐ Yes ☐ No

13. What other property do you own in Marlborough? Please include properties in which you have a partial ownership through trusts or other straw organizations.

I CERTIFY THAT ALL THE INFORMATION INCLUDED IN THIS APPLCIATION IS ACCURATE AND COMPLETE TO THE BEST OF MY KNOWLEDGE.

Applicant's Signature: _____ Date: _____
If applicable

Co-Applicant's Signature: _____ Date: _____

Co-Applicant's Signature: _____ Date: _____

Affidavit

Any person submitting an application to purchase an Abutter Lot must truthfully complete this affidavit and submit it with their application. Questions apply to you as an applicant and any co-applicant(s) or co-owner(s). *The applicant and all co-applicants must sign this affidavit below.*

1. Do you or any of the co-applicants owe the City of Marlborough any monies for incurred real estate taxes, water, sewer, tickets or any other indebtedness?
☐ No ☐ Yes, Explanation: _____
2. Were you or any of the co-applicants ever the owner of property upon which the City of Marlborough foreclosed for his/her failure to pay real estate taxes or other indebtedness?
☐ No ☐ Yes, Explanation: _____
3. Have you or any of the co-applicants ever been convicted of any arson-related crimes, or are you currently under indictment for any such crime?
☐ No ☐ Yes, Explanation: _____
4. Have you or any of the co-applicants ever been convicted of violating any law, code, statute or ordinance regarding conditions of human habitation?
☐ No ☐ Yes, Explanation: _____
5. Have you or any of the co-applicants ever been convicted of housing discrimination or a violation of fair housing laws and ordinances?
☐ No ☐ Yes, Explanation: _____
6. Are you or any of the co-applicants and immediate family members (spouses, parents, offspring, and siblings) currently employed, employed within the last 12 months, or held within the last 12 months an elected or appointed position by the City of Marlborough?
☐ No ☐ Yes
If yes, please include the name of the employee, their capacity or title, and the name of the department.

7. List the addresses of all property you and the co-applicants own in the City of Marlborough, including the abutting property. Use additional paper and attach if necessary.
8.

Address: _____	Address: _____
Address: _____	Address: _____
Address: _____	Address: _____

SIGNED UNDER THE PAINS AND PENALTIES OF PERJURY THIS ____ DAY OF _____.

Applicant's Signature: _____ Date: _____

Address: _____

Co-Applicant's Signature: _____ Date: _____

Address: _____

Co-Applicant's Signature: _____ Date: _____

Address: _____

DISCLOSURE OF BENEFICIAL INTEREST FORM INSTRUCTION SHEET

This form must be completed by all applicants.

NOTE: The Division of Capital Asset Management and Maintenance (DCAMM) shall have no responsibility for insuring that the Disclosure Statement has been properly completed as required by law. Acceptance by DCAMM of a Disclosure Statement for filing does not constitute DCAMM's approval of this Disclosure Statement or the information contained therein. Please carefully read M.G.L. c. 7C, s. 38 which is reprinted in Section 8 of this Disclosure Statement.

Section (1): Identify the real property, including its street address, and city or town. If there is no street address then identify the property in some other manner such as the nearest cross street and its tax assessors' parcel number.

Section (2): Identify the type of transaction to which this Disclosure Statement pertains --such as a sale, purchase, lease, etc.

Section (3): Insert the exact legal name of the Public Agency participating in this Transaction with the Disclosing Party. The Public Agency may be a Department of the Commonwealth of Massachusetts, or some other public entity. Please do not abbreviate.

Section (4): Insert the exact legal name of the Disclosing Party. Indicate whether the Disclosing Party is an individual, tenants in common, tenants by the entirety, corporation, general partnership, limited partnership, LLC, or other entity. If the Disclosing Party is the trustees of a trust then identify the trustees by name, indicate that they are trustees, and add the name of the trust.

Section (5): Indicate the role of the Disclosing Party in the transaction by checking one of the blanks. If the Disclosing Party's role in the transaction is not covered by one of the listed roles then describe the role in words.

Section (6): List the names and addresses of **every** legal entity and **every** natural person that has or will have a **direct or indirect** beneficial interest in the real property. The only exceptions are those stated in the first paragraph of the statute that is reprinted in Section 8 of this Disclosure Statement. If the Disclosing Party is another public entity such as a city or town, insert "inhabitants of the (name of public entity)." If the Disclosing Party is a non-profit with no individual persons having any beneficial interest then indicate the purpose or type of the non-profit entity. If additional space is needed, please attach a separate sheet and incorporate it by reference into Section 6.

Section (7): Write "none" in the blank if none of the persons mentioned in Section 6 is employed by DCAMM. Otherwise list any parties disclosed in Section 6 that are employees of DCAMM.

Section (8): The individual signing this statement on behalf of the Disclosing Party acknowledges that he/she has read the included provisions of Chapter 7C, Section 38 (formerly Chapter 7, Section 40J) of the General Laws of Massachusetts.

Section (9): Make sure that this Disclosure Statement is signed by the correct person. If the Disclosing Party is a corporation, please make sure that this Disclosure Statement is signed by a duly authorized officer of the corporation as required by the statute reprinted in Section 8 of this Disclosure Statement.

This completed and signed Disclosure Statement should be mailed or otherwise delivered to:

Deputy Commissioner for Real Estate
Division of Capital Asset Management and Maintenance
One Ashburton Place, 15th Floor, Boston, MA 02108

**DISCLOSURE STATEMENT FOR TRANSACTION WITH A PUBLIC AGENCY
CONCERNING REAL PROPERTY**

M.G.L. c. 7C, s. 38 (formerly M.G.L. c. 7, s. 40J)

The undersigned party to a real property transaction with a public agency hereby discloses and certifies, under pains and penalties of perjury, the following information as required by law:

- (1) REAL PROPERTY:
- (2) TYPE OF TRANSACTION, AGREEMENT, or DOCUMENT:
- (3) PUBLIC AGENCY PARTICIPATING in TRANSACTION:
- (4) DISCLOSING PARTY'S NAME AND TYPE OF ENTITY (IF NOT AN INDIVIDUAL):

- (5) ROLE OF DISCLOSING PARTY (Check appropriate role):

_____ Lessor/Landlord	_____ Lessee/Tenant
_____ Seller/Grantor	_____ Buyer/Grantee
_____ Other (Please describe): _____	

- (6) The names and addresses of all persons and individuals who have or will have a direct or indirect beneficial interest in the real property excluding only 1) a stockholder of a corporation the stock of which is listed for sale to the general public with the securities and exchange commission, if such stockholder holds less than ten per cent of the outstanding stock entitled to vote at the annual meeting of such corporation or 2) an owner of a time share that has an interest in a leasehold condominium meeting all of the conditions specified in M.G.L. c. 7C, s. 38, are hereby disclosed as follows (attach additional pages if necessary):

NAME

RESIDENCE

- (7) None of the above- named persons is an employee of the Division of Capital Asset Management and Maintenance or an official elected to public office in the Commonwealth of Massachusetts, except as listed below (insert "none" if none):

- (8) The individual signing this statement on behalf of the above-named party acknowledges that he/she has read the following provisions of Chapter 7C, Section 38 (formerly Chapter 7, Section 40J) of the General Laws of Massachusetts:

No agreement to rent or to sell real property to or to rent or purchase real property from a public agency, and no renewal or extension of such agreement, shall be valid and no payment shall be made to the lessor or seller of such property unless a statement, signed, under the penalties of perjury, has been filed by the lessor, lessee, seller or purchaser, and in the case of a corporation by a duly authorized officer thereof giving the true names and addresses of all persons who have or will have a direct or indirect beneficial interest in said property with the commissioner of capital asset management and maintenance. The provisions of this section shall not apply to any stockholder of a corporation the stock of which is listed for sale to the general public with the Securities and Exchange Commission, if such stockholder holds less than ten per cent of the outstanding stock entitled to vote at the annual meeting of such corporation. In the case of an agreement to rent property from a public agency where the lessee's interest is held by the organization of unit owners of a leasehold condominium created under chapter one hundred and eighty-three A, and time-shares are created in the leasehold condominium under chapter one hundred and eighty-three B, the provisions of this section shall not apply to an owner of a time-share in the leasehold condominium who (i) acquires the time-share on or after a bona fide arm's length transfer of such time-share made after the rental agreement with the public agency is executed and (ii) who holds less than three percent of the votes entitled to vote at the annual meeting of such organization of unit owners. A disclosure statement shall also be made in writing, under penalty of perjury, during the term of a rental agreement in case of any change of interest in such property, as provided for above, within thirty days of such change.

Any official elected to public office in the commonwealth, or any employee of the division of capital asset management and maintenance disclosing beneficial interest in real property pursuant to this section, shall identify his position as part of the disclosure statement. The commissioner shall notify the state ethics commission of such names, and shall make copies of any and all disclosure statements received available to the state ethics commission upon request.

The commissioner shall keep a copy of each disclosure statement received available for public inspection during regular business hours.

- (9) This Disclosure Statement is hereby signed under penalties of perjury.

PRINT NAME OF DISCLOSING PARTY (from Section 4, above)

AUTHORIZED SIGNATURE of DISCLOSING PARTY DATE (MM / DD / YYYY)

PRINT NAME

TITLE of AUTHORIZED SIGNER

TAX COMPLIANCE ATTESTATION

Pursuant M.G.L. c. 62C, §49A, I certify under the penalties of perjury that, to the best of my knowledge and belief, I am in compliance with all laws of the Commonwealth relating to taxes, reporting of employees and contractors, and withholding and remitting child support.

BY: _____

Signature of Individual/Corporate Name (Mandatory)

Corporate Officer (Mandatory, if applicable)

Social Security number (voluntary) or

Federal Identification Number

DATE: _____

Approval of a contract or other agreement will not be granted unless this certification clause is signed by the applicant(s). Your Social Security Number will be furnished to the Massachusetts Department of Revenue to determine whether you have met tax filing or tax payment obligations. Providers who fail to correct their non-filing or delinquency will not have a contract or other agreement issued, renewed, or extended.