

**Registration Form for Age Restricted Housing  
Chapter 291 of the Acts of 2006 - (Amends M.G.L. c.151B sec.4(6) & (7))**

**DATE:** \_\_\_\_\_ **Registration Effective for Two (2) Years**

Name of Development: \_\_\_\_\_

Address: \_\_\_\_\_

Name of Owner or Manager: \_\_\_\_\_

Address: \_\_\_\_\_

**RENTAL**

**Total Units in Development** \_\_\_\_\_

**Total Units 55 & Over** \_\_\_\_\_

**Total Units 62 & Over** \_\_\_\_\_

**OWNERSHIP**

**Total Units in Development** \_\_\_\_\_

**Total Units 55 & Over** \_\_\_\_\_

**Total Units 62 & Over** \_\_\_\_\_

**CHECK IF A RENEWAL**

**This Form May Be Mailed or Submitted Electronically:**

**Mailing Address:**

**Executive Office of Housing and Livable Communities**

**Office of the General Counsel**

**Att: Age Restricted Housing Registration Form**

**100 Cambridge Street, Suite 300**

**Boston, MA 02114**

**Electronic Address: [margaux.leclair@mass.gov](mailto:margaux.leclair@mass.gov)**

**Submitted by:**

\_\_\_\_\_  
**(Signature)**

\_\_\_\_\_  
**(Name & Title)**

\_\_\_\_\_  
**(Address)**

\_\_\_\_\_  
**(Phone)**

**05/05/07. Last revised 3/7/24**