**\*\*Please be advised that use of this sample notice does not guarantee an automatic determination by EOHLC that notice is compliant with Chapter 40T, 760 CMR 64.00, and/or applicable guidance. Notices are reviewed and deemed compliant on an individualized, case-by-case basis. Parties may choose to submit draft notices to EOHLC for review prior to service on tenants and Institutional Recipients.**

**For information on draft notice review, please email Caitlin Loftus at** [**Caitlin.loftus@mass.gov**](mailto:Caitlin.loftus@mass.gov) **\*\***

Property Name

Property Mailing Address

Date:

|  |  |
| --- | --- |
| Via [Method of Delivery]:  Tenants  [Mailing Address]  ATTN: CHAPTER 40T NOTICE | Via [Method of Delivery]:  CEDAC  18 Tremont Street, Suite 500  Boston, MA 02108  ATTN: CHAPTER 40T NOTICE |
| Via [Method of Delivery]:  Municipality  [Mailing Address]  ATTN: CHAPTER 40T NOTICE | Via [Method of Delivery]:  EOHLC  Office of the General Counsel  100 Cambridge Street, Suite 300  Boston, MA 02114  ATTN: CHAPTER 40T NOTICE |
| Via [Method of Delivery]:  Legal Services Organization  [Mailing Address]  ATTN: CHAPTER 40T NOTICE | Via [Method of Delivery]:  Tenants’ Organization (if applicable)  ATTN: CHAPTER 40T NOTICE |

**RE: 1-Year Notice of Intent to Complete Termination of Affordability Restriction – Chapter 40T**

To Whom It May Concern:

This letter is to inform you that [Property Name] [Property Mailing Address] is “publicly assisted housing” as defined under G.L. c. 40T (“Chapter 40T”) because it is subject to the following affordability restrictions, which are scheduled to terminate on the dates indicated below:

|  |  |  |
| --- | --- | --- |
| Affordability Restriction | Number of Units Covered | Anticipated Termination Date |
|  |  |  |
|  |  |  |
|  |  |  |

This letter and attached Exhibit A constitute notice under G.L. c. 40T, § 2 and 760 CMR 64.03 that [Affordability Restriction/s] will terminate on [anticipated termination date].

If the Owner pursues a potential sale of this property, the Executive Office of Housing and Livable Communities (EOHLC) shall have a right of first offer pursuant to M.G.L. c. 40T, § 3, unless the proposed Sale is exempted under M.G.L. c. 40T, § 6.

A 2-year Notice of Future Termination relating to [Affordability Restriction/s] was previously provided on [date] and a copy is available upon request.

If you have any questions, please contact the Property’s designated representative:

[Contact Name], [Contact Title], [Contact Phone], [Contact Email]

[Contact Address]

Sincerely,

[Property Owner]

[Name and Mailing Address of Owner]

EXHIBIT A

|  |  |
| --- | --- |
| Name and Address of Public-Assisted Housing Development: |  |
| Name and Address of Property Owner: |  |
| Name, Address, Phone Number, and Email of Owner’s Designated Representative: |  |
| Affordability Restriction That Will Terminate: |  |
| Date on which Affordability Restriction Will Terminate: |  |

***Supplemental Notice to Institutional Recipients[[1]](#footnote-1)***

(Required pursuant to EOHLC’s *Chapter 40T Guidance on Notices*, Section I.B)

Unit & Occupancy Information:[[2]](#footnote-2)

|  |  |
| --- | --- |
| Total Units in Development: |  |
| Number of Bedrooms per Unit: |  |

Unit & Occupancy Information, per Publicly Assisted Housing Affordability Restriction [insert additional tables as necessary to cover all applicable Affordability Restrictions]:

Affordability Restriction: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

|  |  |
| --- | --- |
| Summary of Affordability Restriction:[[3]](#footnote-3) |  |
| \*\*Summary must include the following information, if applicable:  Method by which tenant’s portion of rent and total rent are calculated; method by which rents can be increased; and any relevant statutes, regulations, and/or administrative guidance providing such information  Date Affordability Restriction will expire if no further action taken by Owner  Terms applicable to early termination and grounds on which the Affordability Restriction may be terminated early  Whether income restrictions apply upon entering program or through tenancy  Whether restriction is applicable to specific units or float depending on occupancy  Whether any obligation to renew the restriction exists and, if so, the applicable date and time of renewal, and indication of Owner’s intent to renew, if applicable |  |
| Number of Units Covered: |  |
| Number of Bedrooms per Unit: |  |
| Number of Units Restricted to Occupancy as of date of this Notice to Low, Very Low, and/or Extremely Low Income households |  |
| Is occupancy restricted by income only at initial occupancy or throughout tenancy? |  |

*[CHART TO BE ATTACHED TO SUPPLEMENTAL NOTICE]*

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Total Units in Project: \_\_\_  Total 40T-Restricted Units in Project: \_\_\_ | | |  |  | Number of Units | | | | | Number of Units Occupied by Eligible Households | | | | |
|  | **BR Size** | st. (studio) | 1 | 2 | 3 | 4 | st. (studio) | 1 | 2 | 3 | 4 |
| **Program  Imposing the Affordability Restriction** | | **Income Bracket**  **(% AMI)** | **Rent-Limit Formula** |  |  |  |  |  |  |  |  |  |  |  |
| \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, occupied as follows: | | Restricted to \_\_ |  |  |  |  |  |  |  |  |  |  |  |  |
|  | occupied by over-income tenants | >80% |  |  |  |  |  |  |  |  |  |  |  |  |
|  | occupied by low income tenants | > 60 %, ≤80% |  |  |  |  |  |  |  |  |  |  |  |  |
|  | occupied by very low-income tenants | > 30%, ≤60% |  |  |  |  |  |  |  |  |  |  |  |  |
|  | occupied by extremely low income tenants | ≤30% |  |  |  |  |  |  |  |  |  |  |  |  |
|  | vacant |  |  |  |  |  |  |  |  |  |  |  |  |  |
|  | |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Non-40T Restrictions | |  |  |  |  |  |  |  |  |  |  |  |  |  |
| None (Market Rate Units) | | n/a | Market Rate |  |  |  |  |  |  |  |  |  |  |  |
| \* “Total 40T units” should be total number of actual units restricted under G.L. c. 40T. Because of overlapping subsidies, the sum of the individual figures in each column may be greater than the total number of actual units. If so, please explain in narrative. | | | | Total 40T units\* |  |  |  |  |  |  |  |  |  |  |
| † “Total” should be total number of actual and occupied units, respectively, including both restricted and non-restricted units. Because of overlapping subsidies, the sum of the individual figures in each column may be greater than the total number of actual units. If so, please explain in narrative. | | | | Total† |  |  |  |  |  |  |  |  |  |  |

1. The Supplemental Notice includes additional information that must be provided to all Institutional Recipients, in addition to the information contained in the notice that is provided to tenants. The Supplemental Notice does NOT need to be provided to the tenants. [↑](#footnote-ref-1)
2. Owner may attach the chart provided in lieu of breaking down this information separately. [↑](#footnote-ref-2)
3. Owner may attach a copy of the Affordability Restriction, provided it contains all information required in the Supplemental Notice. [↑](#footnote-ref-3)