

Form LRC-147**Statement of Rent for Mobile Home Park
Lot Rent, Co-ops, and Land Trusts**

* 2 5 1 4 7 1 1 0 0 *

If you have five or more tenants to report, you are required to e-file on myVTax.vermont.gov.**Section A: Landlord and Lot Information (Please complete all fields)**

| | | | |
|--|------------|---|----------|
| Name of Park Owner or Landlord | | | |
| | | | |
| Park Owner's or Landlord's Mailing Address | City | State | ZIP Code |
| | | | |
| Park Owner's or Landlord's Email Address | | Park Owner's or Landlord's Phone Number | |
| | | | |
| Location of Lot (number, street/road name) | | SPAN- REQUIRED (from property tax bill) | |
| | | - - | |
| City/Town | | Calendar Year | |
| | | | |
| Tenant #1 Last Name | First Name | Middle Initial | |
| | | | |
| Tenant #2 Last Name | First Name | Middle Initial | |
| | | | |
| Tenant #3 Last Name | First Name | Middle Initial | |
| | | | |
| Tenant #4 Last Name | First Name | Middle Initial | |
| | | | |

Do you own a for-profit mobile home park or is it a land trust, co-op, or nonprofit mobile home park?

☐**For-profit mobile home park.** Complete Section B (Lines 1-3), skip Section C, and sign the return.☐**Land trust, co-op, or nonprofit mobile home park.** Skip Section B, complete Section C (Lines 4-5), and sign the return.**Section B: For-Profit Mobile Home Lot Rent**

1. Total lot rent paid for calendar year listed above1. _____ .00
2. Rental adjustment2. 21.00 %
3. Allocable rent (MULTIPLY Line 1 by Line 2)3. _____ .00
Enter amount from Line 3 onto Form HS-122, Homestead Declaration and Property Tax Credit Claim, Line B9.

Section C: For Land Trust, Co-op and Nonprofit Mobile Home Parks

4. Housesite Education Tax Allocated for Land Trust. Enter on Form HS-122, Line B10.4. _____ .00
5. Housesite Municipal Tax Allocated for Land Trust. Enter on Form HS-122, Line B115. _____ .00

Section D: Signature**I certify the rental information on this statement is, to the best of my knowledge and belief, true, correct, and complete.**

Signature of Park Owner, Landlord, or Authorized Representative

Date (MMDDYYYY)

Daytime Telephone Number

| | | |
|--|--|--|
| | | |
|--|--|--|

Form LRC-147

Page 1 of 1

Rev. 10/25