
DECLARATION OF RESTRICTIVE COVENANT

I. RECITALS

1. I/We, _____, am/are the owner (the Owner) of the property known as and numbered _____, Plymouth County, Massachusetts (the "Property"), by virtue of a deed dated _____, And recorded with Plymouth county Registry of Deeds, Book _____, Page _____. The property is more particularly described in "Exhibit A" attached hereto.

2. As a condition to receiving a permit _____ from the building department for the Town of Hingham, acting by and through its Board of Health, the Owner is required to enter into this Declaration.

NOW, THEREFORE, in consideration of the sum of One and 00/100 (\$1.00) Dollar and other good and valuable consideration, the receipt and sufficiency of which is hereby acknowledged, the Owner of the Property hereby declares that the Property shall be held, occupied, sold, transferred and conveyed subject to Declaration as hereinafter described.

II. RESTRICTION AND COVENANT

1. The Owner hereby imposes the following restriction and covenant on the Property for the benefit of the Board of Health.

(a) that the premises shall not contain more than _____ bedrooms without first obtaining approval of the Hingham Board of Health.

2. This Declaration shall be governed by the laws of the Commonwealth of Massachusetts. The provisions of this Declaration shall be binding upon all the parties having or acquiring any right, title or interest in the Property, shall be for the benefit of the Board of Health, and

shall run with and bind the Owner of the Property and their heirs, devisees, legal representatives, successors and assigns.

3. The Owner, its successors and assigns shall be fully discharged and relieved of liability under this Declaration, upon ceasing to hold an interest in the Property.

4. Each successor owner of the Property by accepting delivery of a deed subject to this Declaration or executing an assent to this Declaration agrees and covenants that the terms and conditions of this Declaration are reasonable and agrees to be bound thereby.

5. The Board of Health may prosecute proceedings at law against any person violating or attempting to violate the provisions hereof either to restrain violation or to recover damages.

6. The failure of the Board of Health to enforce any restriction, covenant, or provision hereof, shall not be deemed to be a waiver of the right to do so thereafter as to the same breach or to one occurring prior to subsequent thereto.

7. If any provision hereof or the application of any such provision to any person or circumstances shall be held invalid, the remainder of this Declaration or the application of such provision to persons or circumstances other than those as to which it is held invalid, shall not be affected thereby.

Executed as a sealed instrument this _____ day of _____, _____.

Owner/s,

X _____

X _____

For Use by Notary Public Only:

Commonwealth of Massachusetts

_____, ss.

On this _____ day of _____, 20_____, before me, the undersigned notary public, personally appeared _____ and proved to me through satisfactory evidence of identification which were _____ to be the person(s) who signed the preceding or attached document in my presence and who swore or affirmed to me that the contents of the document are truthful and accurate to the best of (his) (her) (their) knowledge and belief.

Notary Public

My commission expires: _____