

# Annual Report Filing Guide

Docket No. 19-01004

## Applicable to Owners/Landlords of Manufactured Home Parks

Pursuant to Nevada Revised Statutes (“NRS”) 704.960, each landlord of a Manufactured Home Park (“MHP”) who is billed by a utility or an alternative seller, and in turn charges the tenants or occupants of the dwellings for the service provided by the utility or alternative seller, must file an annual report (“report”) with the Public Utilities Commission of Nevada (“Commission”). Landlord is defined in NRS 118B.014 as the owner or lessor of a manufactured home park. Nevada Administrative Code (“NAC”) 704.987 requires the report to be filed on or before **March 30<sup>th</sup>** of the year following the calendar year for which the report is submitted. **There is no grace period.**

NAC 704.987 specifies the contents of the report and NRS 703.193 requires that the report be submitted under oath. The oath page does not need to be notarized.

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Please file the completed report and any additional documents as required, single-sided, by March 30<sup>th</sup>.

- To file electronically, visit the Commission’s website at <http://puc.nv.gov>.

or

- Mail or hand-deliver to either of the Commission’s offices:

- |   |  |
|---|--|
| • Public Utilities Commission of Nevada<br>1150 East William Street<br>Carson City, NV 89701-3109 | • Public Utilities Commission of Nevada<br>9075 W. Diablo Drive, Suite 250<br>Las Vegas, NV 89148-7674 |
|---|--|

Failure to submit the completed report as described above may subject you to an administrative fine of up to \$1,000 per day for each day of the violation pursuant to NRS 703.380, and/or other remedies available to the Commission.

If the mailing address, owner or contact information for your MHP has changed since the last annual report, you must notify the Commission in writing of the change immediately. This is also required for any future changes.

**Please note that your report and any attachments, once filed, will become a public record, unless you request portions of it to be treated as confidential. Please follow the Commission’s procedures for confidential treatment, which are located in NAC 703.5274. If you submit any portion of your Annual Report confidentially, you must complete and file a Protective Agreement with the Regulatory Operations Staff of the Commission.**

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If you have any questions regarding your responsibilities with regard to filing your report, contact the Financial Analysis Division of the Regulatory Operations Staff of the Commission in Carson City at (775) 684-6155.

# MANUFACTURED HOME PARK ANNUAL REPORT

**Original:**

**Corrected:** \* If the original filing is being amended or corrected, the entire report must be resubmitted.

Date: \_\_\_\_\_

**Calendar Year**      **2018**

**Docket Number**    **19-01004**

for

Park Name: \_\_\_\_\_

Park Physical Address: \_\_\_\_\_

City, State, Zip: \_\_\_\_\_

Park Telephone: \_\_\_\_\_

- Please file the completed report and any additional documents as required, single-sided, by March 30<sup>th</sup>.
  - The report can be filed electronically on the Commission's website at <http://puc.nv.gov>.
- or
- Mail or hand-deliver to either of the Commission's offices:
    - Public Utilities Commission of Nevada  
1150 East William Street  
Carson City, NV 89701-3109
    - Public Utilities Commission of Nevada  
9075 W. Diablo Drive, Suite 250  
Las Vegas, NV 89148-7674

## Section 1 – General Information

**1A) Legal name, address, telephone number, and e-mail address of manufactured home park landlord/owner(s):**

Beginning of Year:

Name					
Address					
City		State		Zip	
Phone					
E-mail					

End of Year: (enter any changes from beginning of year, or check “No Change” box)

No Change

Name					
Address					
City		State		Zip	
Phone					
E-mail					

Alternate Contact/Address Information:

Name					
Address					
City		State		Zip	
Phone					
E-mail					

**1B) Name and telephone number of the park manager:**

Name					
Phone					

## **Section 2 – Manufactured Home Park and/or RV Spaces**

Total number of mobile home park and/or RV spaces: \_\_\_\_\_

Number of MHP spaces occupied on December 31: \_\_\_\_\_

Number of RV spaces occupied on December 31: \_\_\_\_\_ (None = 0)

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## **Section 3 – Resale of Utility Service Information**

As used in this report, the term “resell or bill for any utility service” means a park landlord receives a bill from a utility company and then bills the tenants of the park for the utility service. This includes the provision of natural gas, propane, electric or water service.

**3A) Does the manufactured home park resell or bill for any utility service to the tenants?**

(Must check one)

**Yes**     *If Yes, complete questions 3B through 3D on pages 4–6.*

**OR**

**No**     *If No, skip to Section 4 on page 7.*

**3B) Does the manufactured home park resell or bill for natural gas/propane service to the tenants?**

(Must check one)

**Yes**     *If Yes, complete the following Reconciliation Schedule.*

**OR**

**No**     *If No, skip to 3C on page 5*

**NATURAL GAS / PROPANE SERVICE RECONCILIATION**

Year Ending December 31, 2018

Name of the company supplying Natural Gas/Propane service to the park tenants:

Company Name: \_\_\_\_\_

d/b/a: \_\_\_\_\_

(Check one)     **Natural Gas** or     **Propane**

Total amount the Utility charged the MHP ----- \$ \_\_\_\_\_

Total amount the MHP collected from tenants ----- \$ \_\_\_\_\_

Is a late charge\* assessed for the late payment of natural gas/propane service charges?

(Check one)     **Yes** or     **No**     *If Yes, indicate the amount of the late charge: \$ \_\_\_\_\_*

Check the appropriate box below, or explain how the park bills its tenants for Natural Gas/Propane service:

(Check one or explain other method used)

Each tenant is billed an equal amount based on the park's current utility bill.

**OR**

Each tenant is billed an amount based on the usage recorded for his/her individual space.

**OR**

If some other method is used, please provide a brief explanation of how the tenants are billed:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

\* Pursuant to NAC 704.988 the assessed late charge may not be more than the tenant would pay the utility for the same delinquency.

**3C) Does the manufactured home park resell or bill for electric service to the tenants?**

(Must check one)

**Yes**     *If Yes, complete the following Reconciliation Schedule.*

**OR**

**No**     *If No, skip to 3D on page 5.*

**ELECTRIC SERVICE RECONCILIATION**

Year Ending December 31, 2018

Name of the company supplying Electric service to the manufactured home park:

Electric Company: \_\_\_\_\_

d/b/a: \_\_\_\_\_

Total amount the Utility charged the MHP ----- \$ \_\_\_\_\_

Total amount the MHP collected from tenants ----- \$ \_\_\_\_\_

Is a late charge\* assessed for late payment of electric service charges?

(Check one)     **Yes** or     **No**     *If Yes, indicate the amount of the late charge: \$ \_\_\_\_\_*

Check the appropriate box below, or explain how the park bills its tenants for Electric service:

(Check one or explain other method used)

Each tenant is billed an equal amount based on the park's current utility bill.

**OR**

Each tenant is billed an amount based on the usage recorded for his/her individual space.

**OR**

If some other method is used please provide a brief explanation of how the tenants are billed:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

\* Pursuant to NAC 704.988 the assessed late charge may not be more than the tenant would pay the utility for the same delinquency.

**3D) Does the manufactured home park resell or bill for water service to the tenants?**

(Must check one)

**Yes**     *If Yes, complete the following Reconciliation Schedule.*

**OR**

**No**     *If No, skip to Section 4 on page 7.*

**WATER SERVICE RECONCILIATION**

Year Ending December 31, 2018

Name of the company supplying Water service to the manufactured home park (if park-owned well, please indicate):

(Check one) **Park-owned well:**     **Yes or**     **No**

Water Company: \_\_\_\_\_

d/b/a: \_\_\_\_\_

Total amount the Utility charged the MHP ----- \$ \_\_\_\_\_

Total amount the MHP collected from tenants ----- \$ \_\_\_\_\_

Is a late charge\* assessed for late payment of water service charges?

(Check one)     **Yes or**     **No**     *If Yes, indicate the amount of the late charge: \$ \_\_\_\_\_*

Check the appropriate box below, or explain how the park bills its tenants for Water service:

(Check one **or** explain the other method used):

Each tenant is billed an equal amount based on the park's current utility bill.

**OR**

Each tenant is billed an amount based on the usage recorded for his/her individual space.

**OR**

If some other method is used please provide a brief explanation of how the tenants are billed:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

\* Pursuant to NAC 704.988 the assessed late charge may not be more than the tenant would pay the utility for the same delinquency

## **Section 4 – Tenant Service Charge**

Must check **Yes** or **No** to each question below:

Has a tenant service charge been charged to the tenants for natural gas utility service during the past year?

(Check one)     **Yes** or     **No**     *If Yes, complete Natural Gas Schedule I on page 8.*

Has the manufactured home park maintained an interest bearing tenant service charge account for natural gas utility service during the past year?

(Check one)     **Yes** or     **No**     *If Yes, complete Natural Gas Schedule II on page 9 and include a copy of the bank statement for this account through December 31<sup>st</sup>.*

**Please redact (black out) any confidential information such as bank account numbers, Social Security Numbers or Employer Identification Numbers on the bank statement, or file the information confidentially pursuant to the Commission's procedures in NAC 703.5274.**

Has a tenant service charge been charged to the tenants for electric utility service during the past year?

(Check one)     **Yes** or     **No**     *If Yes, complete Electric Schedule I on page 10.*

Has the manufactured home park maintained an interest bearing tenant service charge account for electric utility service during the past year?

(Check one)     **Yes** or     **No**     *If Yes, complete Electric Schedule II on page 11 and include a copy of the bank statement for this account through December 31<sup>st</sup>.*

**Please redact (black out) any confidential information such as bank account numbers, Social Security Numbers or Employer Identification Numbers in the bank statement, or file the information confidentially pursuant to the Commission's procedures in NAC 703.5274.**

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**NATURAL GAS  
SCHEDULE I**

**Complete if Tenant Service Charges for natural gas service are assessed and collected**

MONTH	SERVICE CHARGE PER TENANT	×	NO. OF TENANTS	=	TOTAL BILLED	TOTAL COLLECTED (to Schedule II)
JANUARY	\$				\$	\$
FEBRUARY	\$				\$	\$
MARCH	\$				\$	\$
APRIL	\$				\$	\$
MAY	\$				\$	\$
JUNE	\$				\$	\$
JULY	\$				\$	\$
AUGUST	\$				\$	\$
SEPTEMBER	\$				\$	\$
OCTOBER	\$				\$	\$
NOVEMBER	\$				\$	\$
DECEMBER	\$				\$	\$

**NATURAL GAS  
SCHEDULE II**

**Summary of Tenant Service Charge Deposits and Disbursements**

**DEPOSITS**

Column A	Column B	Column C	Column D
MONTH	TOTAL COLLECTED (from Schedule I)	TOTAL DEPOSITED	DIFFERENCE (provide explanation on NOTES page)
January	\$	\$	\$
February	\$	\$	\$
March	\$	\$	\$
April	\$	\$	\$
May	\$	\$	\$
June	\$	\$	\$
July	\$	\$	\$
August	\$	\$	\$
September	\$	\$	\$
October	\$	\$	\$
November	\$	\$	\$
December	\$	\$	\$
<b>Totals:</b>	<b>\$</b>	<b>\$</b>	<b>\$</b>

**DISBURSEMENTS**

DATE	DESCRIPTION	PUCN DOCKET NUMBER	TOTAL DISBURSEMENTS
			\$
			\$
			\$
			\$
<b>Total:</b>			<b>\$</b>

A) Account Balance from Previous Year as of December 31 <sup>st</sup>	\$ _____
B) Total Interest Earned This Year (Jan. – Dec.)	+ \$ _____
C) Total Bank Fees Paid This Year (Jan. – Dec.)	- \$ _____
D) Total Tenant Service Charges Deposited (from Column C above)	+ \$ _____
E) Total Disbursements	- \$ _____
F) Year End Account Balance*	= \$ _____

\*Be sure to include a copy of the bank statement for this account through December 31<sup>st</sup>. If account does not reconcile, provide a detailed explanation on the NOTES page.

**ELECTRIC  
SCHEDULE I**

**Complete if Tenant Service Charges for electric service are assessed and collected**

MONTH	SERVICE CHARGE PER TENANT	×	NO. OF TENANTS	=	TOTAL BILLED	TOTAL COLLECTED (to Schedule II)
JANUARY	\$				\$	\$
FEBRUARY	\$				\$	\$
MARCH	\$				\$	\$
APRIL	\$				\$	\$
MAY	\$				\$	\$
JUNE	\$				\$	\$
JULY	\$				\$	\$
AUGUST	\$				\$	\$
SEPTEMBER	\$				\$	\$
OCTOBER	\$				\$	\$
NOVEMBER	\$				\$	\$
DECEMBER	\$				\$	\$

## ELECTRIC SCHEDULE II

### Summary of Tenant Service Charge Deposits and Disbursements

#### DEPOSITS

Column A	Column B	Column C	Column D
MONTH	TOTAL COLLECTED (from Schedule I)	TOTAL DEPOSITED	DIFFERENCE (provide explanation on NOTES page)
January	\$	\$	\$
February	\$	\$	\$
March	\$	\$	\$
April	\$	\$	\$
May	\$	\$	\$
June	\$	\$	\$
July	\$	\$	\$
August	\$	\$	\$
September	\$	\$	\$
October	\$	\$	\$
November	\$	\$	\$
December	\$	\$	\$
<b>Totals:</b>	<b>\$</b>	<b>\$</b>	<b>\$</b>

#### DISBURSEMENTS

DATE	DESCRIPTION	PUCN DOCKET NUMBER	TOTAL DISBURSEMENTS
			\$
			\$
			\$
			\$
<b>Total:</b>			<b>\$</b>

- |   |            |
|---|------------|
| A) Account Balance from Previous Year as of December 31 <sup>st</sup> | \$ _____   |
| B) Total Interest Earned This Year (Jan. – Dec.)                      | + \$ _____ |
| C) Total Bank Fees Paid This Year (Jan. – Dec.)                       | – \$ _____ |
| D) Total Tenant Service Charges Deposited (from Column C above)       | + \$ _____ |
| E) Total Disbursements  | – \$ _____ |
| F) Year End Account Balance*  | = \$ _____ |

\*Be sure to include a copy of the bank statement for this account through December 31<sup>st</sup>. If account does not reconcile, provide a detailed explanation on NOTES page 12.



**OATH**

I, (**Name of person signing Oath**) \_\_\_\_\_, on behalf of (**Name of manufactured home park**) \_\_\_\_\_ declare under penalty of perjury under the laws of the State of Nevada that I have carefully examined the foregoing information provided to the Public Utilities Commission of Nevada, and declare it to be a complete and correct statement to the best of my knowledge, information and belief; and that I have the authority to make these representations and to bind the regulated entity on whose behalf I am providing this information. I further declare that the foregoing information has been prepared by me or under my direction from the original books, papers and records of the regulated entity and that any accounts and/or figures provided embrace all the relevant financial operations of the regulated entity during the period of time for which the information is provided.

Printed Name: \_\_\_\_\_

Title: \_\_\_\_\_

Date: \_\_\_\_\_

Signature\*: \_\_\_\_\_

*\*Notarization of this report is not necessary.*