

Mail this application to:

The name of the waitlist I'm applying for is: _____

Some waitlists are closed: Before sending this application, check <http://www.housingworks.net/> to see what is open

You **must** answer every question on this application: respond to questions that are not applicable by writing "N/A".
Incomplete applications may be returned or discarded.

Name of HoH: _____

Long-Term Mailing Address _____

City/State/Zip: _____
(this address should ideally work for the next 3-5 years):

Phone(s): _____ - _____ - _____ _____ - _____ - _____

Email: _____

The **SSN** for the head of household is: _____

Does the HoH have a **Social Security Number (SSN)**? ☐ Yes ☐ No *If "Yes" you must provide it above).*

What is your **date of birth**? _____ What is your **gender**? _____

Race (white, black, asian, etc)? _____

What was your **mother's last name** when she was born? *Protects your privacy*) _____

How many people will be living in the unit? _____ people. What **unit size** are you seeking? _____ BR

Describe your **Income Sources** (Job, Food Stamps, SSI, TAFDC, etc.) _____

What is your family's **ANNUAL** income? \$ _____ (do NOT write an hourly, weekly, or monthly amount!)

☐ YES ☐ NO Do you have a **rental voucher** or **some other form of regular rental assistance**?

Specify: ☐ Section 8 ☐ MRVP ☐ AHVP ☐ Homebase ☐ _____

☐ YES ☐ NO Do you need a **wheelchair accessible unit** (or a "no-steps" unit)?

☐ YES ☐ NO Do you need **reasonable accommodations** due to a disability, either during the application period or tenancy? _____

☐ YES ☐ NO Are you or any member of your household subject to a lifetime registration requirement under a **State Sex Offender Registration** program?

☐ YES ☐ NO **Priority/Preference Status:** If there is a section in this application that asks about priorities and preferences, did you claim any?

Office Only: Date/Time Stamp



GREATER LYNN YMCA
(781) 581-3105

DORMITORY APPLICATION

Room # _____

It is understood that the premises are to be used as a residence to be occupied by not more than one person. An application fee in the sum of \$25.00 will be paid with the clear understanding that this application is subject to approval and acceptance by landlord in its sole discretion. In no event is the application fee refundable. However, if the application for residency is accepted, the \$25.00 fee will be applied towards the first weeks rent. I hereby authorize Landlord to obtain information it deems desirable in the processing of my application, including, credit reports, civil or criminal actions, rental history, employment/salary details, police and vehicle records and any other relevant information; and release landlord, its employees and agents from all liability for any damage whatsoever incurred in furnishing or obtaining such information. Upon approval and acceptance, the applicant agrees to pay the first and last weeks rent plus key deposit. Key deposit is refundable with return of keys upon completion of rental period. The application fee shall be retained by Landlord as the agreed compensation for credit investigation, processing and verification of the application, other expenses and/or loss of rent and the Landlord shall have no further obligation to the applicant if applicant fails to accept Landlord's acceptance of application. The application fee is non-refundable to the applicant, except in the event that Landlord fails to deliver possession of the premises as may be required by any agreement executed between the parties. The applicant hereby waives any claim for damages by reason of non-acceptance of this application, which the landlord or his agent may reject without stating reasons for doing so. It is further agreed that if any information herein is false, the rental agreement made on me strength of this application may, at the option of the landlord, be terminated at any time.

Signature: _____ **Date** _____

Applicant Information

1. Applicant Name _____
Last First M.I.
2. Address _____ Apt # _____
City _____ State _____ Zip Code _____
Length of stay at current address _____
3. Home Phone _____ Work Phone _____
4. Birth Date _____ Birthplace _____
5. Social Security Number _____

Applicant's Rental History

1. Length of time at current address (in item A) _____
2. Name of present landlord _____
3. Previous address _____
4. Length of time at previous address _____ Previous landlord _____

Applicants Employment/Financial Background

1. Current Occupation _____ Length of time in position _____
2. Employers Name/Address _____
3. Employer Contact Name/Phone Number _____
4. Current salary _____ Other sources of Income _____

Please list 2 personal references (i.e. former boss, former landlord etc.)

1. Name _____ Telephone # _____
Relationship _____ How Long Known _____
2. Name _____ Telephone # _____
Relationship _____ How Long Known _____

Emergency Contact

In case of emergency please notify:

Name _____ Telephone # _____ Relationship _____

Please Read and Sign House rules on Next Page

Please select type or report(s) desired:

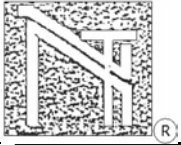
☐ Combined Report

☐ Criminal
(DOB Required)

☐ Retail Report

☐ Tenant Perf.

☐ No Report (Move-In/Out)
(CIRCLE ONE)



Send Promptly To:

National Tenant Network

Tel: (978) 858-0756 Fax: (978) 858-0831

P.O. Box 98 · Tewksbury · Massachusetts · 01876

MOVE-IN FORM 1

RENT AMOUNT _____ MOVE-IN DATE _____

APPLICANT/TENANT NAME(S)

1. _____
LAST

2. _____
LAST

FIRST/M.I.
APARTMENT APPLIED FOR:

FIRST/M.I.

STREET ADDRESS

CITY/STATE/ZIP

TO SPEED SERVICE PLEASE OBTAIN: **Date of Birth:**

Date of Birth:

SOCIAL SECURITY #

SOCIAL SECURITY #

DRIVER'S LICENSE #

DRIVER'S LICENSE #

CURRENT STREET ADDRESS

CURRENT STREET ADDRESS

CITY/STATE/ZIP

CITY /STATE/ZIP

PREVIOUS STREET ADDRESS

PREVIOUS STREET ADDRESS

CITY/STATE/ZIP

CITY /STATE/ZIP

I CERTIFY THE ABOVE INFORMATION IS CORRECT & COMPLETE & I AUTHORIZE YOU TO MAKE ANY INQUIRIES YOU FEEL NECESSARY TO EVALUATE MY TENANCY INCLUDING RETAIL CREDIT & A FULL CRIMINAL BACKGROUND SEARCH. IF I RENT THE UNIT, I UNDERSTAND THE INFORMATION CONTAINED ON THIS FORM & RENTAL AGREEMENT MAY BE MAINTAINED IN A TENANT DATABASE FOR UP TO 6 YEARS AFTER I VACATE, TO BE MADE AVAILABLE TO OTHER LANDLORDS

1. _____
APPLICANT/TENANT SIGNATURE

2. _____
APPLICANT/TENANT SIGNATURE

MANAGER/LANDLORD'S SIGNATURE

MA 2437
ACCESS # _____ DATE _____

MOVE-OUT FORM 2

TOTAL AMOUNT OWED _____ MOVE-OUT DATE _____

DID THIS TENANT VIOLATE HIS/HER RENTAL AGREEMENT? [] YES [] NO IF "YES" PLEASE CHECK THE VIOLATION(S) BELOW

- 1) [] NON-PAYMENT OF RENT \$ _____
- 2) [] NON-PAYMENT OF UTILITIES
- 3) [] NSF CHECKS # _____
[] STOPPED PAYMENT # _____
- 4) [] NO MOVE-OUT NOTICE
- 5) [] EVICTION FILING REQUIRED
- 6) [] UNAUTHORIZED PETS
- 7) [] UNAUTHORIZED OCCUPANTS
- 8) [] KEYS NOT RETURNED

- 9) [] UNIT DAMAGED \$ _____
- 10) [] TENANT GIVEN NOTICE TO VACATE
- 11) [] OTHER LEASE VIOLATIONS (call subscriber)
- 12) [] SUBSCRIBER TRYING TO LOCATE
- 13) [] REFER TO COLLECTIONS (attach rental application)
WHEN DID DELINQUENCIES BEGIN? DAY _____ MONTH _____ YEAR _____
GOV'T SUBSIDIZED / SECTION 8 HOUSING
- 14) [] FRAUD \$ _____
- 15) [] PROGRAM VIOLATIONS (CALL SUBSCRIBER)

MANAGER/LANDLORD'S SIGNATURE

ACCESS # _____ DATE _____

**IS THE ABOVE INFORMATION DISPUTED BY THE TENANT(S) Yes _____ No _____

THE ABOVE MANAGER AGREES THAT IF ANY ITEM ON THIS FORM IS DISPUTED BY THE TENANT NOW OR IN THE FUTURE THE MANAGER WILL PROMPTLY INVESTIGATE THE INFORMATION AND PROMPTLY REPORT FINDINGS TO NTN/BOSTON.
IT IS ILLEGAL TO REPORT INACCURATE INFORMATION.



Office Use Only: _____
Date Initials

ROOM CHARGES

Deposits

Standard \$180.00 + \$10.00 Key Deposit
Deluxe \$220.00+\$10.00 Key Deposit

Weekly Rates

Standard \$ 90.00
Deluxe \$110.00

Monthly Rates

Standard \$390.00
Deluxe \$476.66

HOUSE RULES

Please read the house rules, sign and date, and then complete the one-page application.

1. **Membership:** All dormitory residents will become members of the YMCA while living at this facility. Residents will have full use of the facility according to the regular schedule. Membership cards must be used to gain access to the facility.
2. **Room Rents:** Rent payments are due one week in advance. Failure to pay rents on time will result in the room being vacated unless special arrangements are made with the Director of Building Services. Such exceptions are subject to the approval of the Executive Director. Rents shall be paid between 6:00 a.m. & 10:00 p.m.
3. **Key Deposit:** A room key deposit is required and will be refunded upon return of the key to the front desk when the room is vacated.
4. **Notice of Intent to Vacate:** Residents must give one week's notice to the desk attendant before vacating a room. Except in emergencies rent will be charged for one week after a vacating notice is given.
5. **Payment of Damages:** Residents are responsible for all damages to room and furnishings and will be charged for same. Damage payments shall be arranged with the Director of Building Services.
6. **Housekeeping:** Residents are required to keep their rooms neat and dean. Hot plates or other cooking devices are not allowed. Radios and TV's are permitted although electric wiring must not be altered or tampered with. Use of extension cords must be approved by the director of Building Services. Outside antennas, SW transmitters or battery chargers may not be used. Thumb tack, scotch tape or other fasteners may not be used on walls or molding.
7. **Visitors:** Visitors must be met in the front lobby. No more than 2 visitors may visit a resident in the dormitory area at one time. Women are not permitted in the dormitory. Visiting hours are between 9:00 a.m. and 10:00 p.m.
8. **Quiet Time:** After 10:00 p.m. is QUIET TIME. Radios, TV's, musical instruments, telephones and tape decks must be of such a volume as to create no disturbance to other residents.
9. **Personal Standards:** Alcoholic beverages, narcotics or behavior-influencing drugs, firearms, loud and abusive and ungentlemanly conduct are not permitted in the YMCA dorm.
10. **Protection from Loss:** The YMCA assumes no liability for loss of resident's property from fire, theft or other causes. Money or valuables should be checked at the front desk for deposit in the safe. The YMCA will exercise reasonable diligence in protecting dormitory rooms and their contents.

I have read the above YMCA House Rules and agree to comply with the same recognizing that violation of the House Rules may result in my dismissal.

Signature

Date

Witness

Date

Housing History, Page 1

Note: you can often locate landlord information by using the Tax Assessor's website in each town (or by calling the Tax Assessor's phone number in most towns): To determine if there is an online Tax Assessor page for a town search the web like this: "Tax Assessor, Boston MA" or "Property Assessment, Dallas TX".

CURRENT RESIDENCE

DATES YOU LIVED THERE:

Name on the lease _____ to: _____ or present

Address you lived at: _____
Street and Apt# City State Zip

Landlord's Name and Address _____

Landlord Tel: _____

Did this landlord bring any court action against the leaseholder or you? ☐ Yes ☐ No

Did this landlord return your security deposit? (check one) ☐ Yes ☐ No ☐ N/A

PRIOR RESIDENCE

DATES YOU LIVED THERE:

Name on the lease _____ to _____

Address you lived at: _____
Street and Apt# City State Zip

Landlord's Name and Address _____

Landlord Tel: _____

Did this landlord bring any court action against the leaseholder or you? ☐ Yes ☐ No

Did this landlord return your security deposit? (check one) ☐ Yes ☐ No ☐ N/A

RESIDENCE BEFORE THAT

DATES YOU LIVED THERE:

Name on the lease _____ to _____

Address you lived at: _____
Street and Apt# City State Zip

Landlord's Name and Address _____

Landlord Tel: _____

Did this landlord bring any court action against the leaseholder or you? ☐ Yes ☐ No

Did this landlord return your security deposit? (check one) ☐ Yes ☐ No ☐ N/A

Housing History, Page 2

RESIDENCE BEFORE THAT

DATES YOU LIVED THERE:

Name on the lease _____ to _____

Address you lived at: _____
Street and Apt# City State Zip

Landlord's Name and Address _____

Landlord Tel: _____

Did this landlord bring any court action against the leaseholder or you? ☐ Yes ☐ No

Did this landlord return your security deposit? (check one) ☐ Yes ☐ No ☐ N/A

RESIDENCE BEFORE THAT

DATES YOU LIVED THERE:

Name on the lease _____ to _____

Address you lived at: _____
Street and Apt# City State Zip

Landlord's Name and Address _____

Landlord Tel: _____

Did this landlord bring any court action against the leaseholder or you? ☐ Yes ☐ No

Did this landlord return your security deposit? (check one) ☐ Yes ☐ No ☐ N/A

RESIDENCE BEFORE THAT

DATES YOU LIVED THERE:

Name on the lease _____ to _____

Address you lived at: _____
Street and Apt# City State Zip

Landlord's Name and Address _____

Landlord Tel: _____

Did this landlord bring any court action against the leaseholder or you? ☐ Yes ☐ No

Did this landlord return your security deposit? (check one) ☐ Yes ☐ No ☐ N/A

Housing History, Page 3

RESIDENCE BEFORE THAT

DATES YOU LIVED THERE:

Name on the lease _____ to _____

Address you lived at: _____
Street and Apt# City State Zip

Landlord's Name and Address _____

Landlord Tel: _____

Did this landlord bring any court action against the leaseholder or you? ☐ Yes ☐ No

Did this landlord return your security deposit? (check one) ☐ Yes ☐ No ☐ N/A

RESIDENCE BEFORE THAT

DATES YOU LIVED THERE:

Name on the lease _____ to _____

Address you lived at: _____
Street and Apt# City State Zip

Landlord's Name and Address _____

Landlord Tel: _____

Did this landlord bring any court action against the leaseholder or you? ☐ Yes ☐ No

Did this landlord return your security deposit? (check one) ☐ Yes ☐ No ☐ N/A

RESIDENCE BEFORE THAT

DATES YOU LIVED THERE:

Name on the lease _____ to _____

Address you lived at: _____
Street and Apt# City State Zip

Landlord's Name and Address _____

Landlord Tel: _____

Did this landlord bring any court action against the leaseholder or you? ☐ Yes ☐ No

Did this landlord return your security deposit? (check one) ☐ Yes ☐ No ☐ N/A