

Applicant: Write your full name and address,  
including your apartment # and zipcode.

Mail this application to the address you  
see at left.

Dear

I am applying to the following waitlist, which I believe is open:

App Generated:

 **ATTN: WAITLIST ADMINISTRATOR** 

**Is this waitlist closed? Anything else you want to tell the 900 Housing Advocates and the nearly 200,000 applicants using our system?**

**USE BLOCK PRINT to fill in the appropriate information below.** Save paper and ink by faxing only this one page to HousingWorks – we will immediately update your information! See fax number below.

☐ **This particular waitlist is closed: At present, our only open waitlists are:**

\_\_\_\_\_

☐ **This is not the correct application. The correct application is available in this way:**

\_\_\_\_\_

Your position or title at this housing program: \_\_\_\_\_

Your signature: \_\_\_\_\_

**HousingWorks Fax: 617-536-8561**

*If you direct applicants to try our free search to locate OTHER HOUSING OPTIONS,  
you reduce frivolous applications and eliminate possibly hundreds of phone calls:*

**www.HousingWorks.net**



**DO NOT LEAVE ANY QUESTION UNANSWERED!**

- ☐ HEAD OF HOUSEHOLD'S FIRST NAME
- ☐ HEAD OF HOUSEHOLD'S COMPLETE MIDDLE NAME
- ☐ HEAD OF HOUSEHOLD'S LAST NAME (EX: BAEZ GONZALEZ) ☐ SUFFIX
- ☐ YOUR MOTHER'S LAST NAME WHEN SHE WAS A CHILD

ANSWER THIS: ☐ Yes ☐ No Does the HoH have a Social Security Number? *If "Yes" you must provide the full SSN!*

- ☐ HEAD OF HOUSEHOLD'S SOCIAL SECURITY NUMBER ☐ HEAD OF HOUSEHOLD'S DATE OF BIRTH ☐ GENDER

- ☐ ETHNICITY ☐ RACE: Asian , Black, White, Native American, Pacific Islander, Multi-racial

- ☐ REQUESTED ACCOMMODATIONS Fill in the circle for anything you need:
- |  |   |   |
|--|---|---|
| <input type="radio"/> <b>Fully Accessible Wheelchair</b> Unit      | <input type="radio"/> <b>Blind Accessible</b> Unit            | <input type="radio"/> Need an <b>Interpreter</b>      |
| <input type="radio"/> <b>No-Steps unit</b> (elevator to any floor) | <input type="radio"/> <b>Deaf Accessible</b> Unit             | <input type="radio"/> <b>Domestic Violence Victim</b> |
| <input type="radio"/> <b>First-Floor unit only</b>                 | <input type="radio"/> Unit for <b>Environmental Allergies</b> | <input type="radio"/> <b>Personal Care Attendant</b>  |

- ☐ HoH's CAREER STAGE ☐ ANY VETERANS in HH? ☐ Yes ☐ No
- ☐ Employed ☐ Unemployed ☐ Retired ☐ FT Student ☐ PT Student

- ☐ PERMANENT MOBILE RENTAL ASSISTANCE, if any
- ☐ I do not have mobile rental assistance ☐ Mobile Section 8 voucher ☐ MRVP ☐ AHVP ☐ VASH or similar

- ☐ CRIMINAL RECORD AND SEX OFFENDER
- Head of Household:** Any **Felony/Conviction?** ☐ Yes ☐ No Any **Misdemeanor Conviction?** ☐ Yes ☐ No
- Other Members:** Any **Felony Convictions?** ☐ Yes ☐ No Any **Misdemeanor Conviction?** ☐ Yes ☐ No
- Is anyone in HH subject to a **lifetime sex offender registration** in any state? ☐ Yes ☐ No

- ☐ ANY PETS? ☐ Yes ☐ No Describe: \_\_\_\_\_

- ☐ HOUSEHOLD SIZE AND COMPOSITION ☐ ANNUAL INCOME ☐ DOCUMENTED DISABILITY?
- \_\_\_\_\_ ← # Adults \_\_\_\_\_ ← # Children \_\_\_\_\_ ← Total # in Household \$ \_\_\_\_\_ ☐ Yes ☐ No

- ☐ CURRENT HOUSING STATUS ☐ Homeless ☐ Housing Loss in 14 days ☐ Homeless under other federal status
- ☐ Homeless because Fleeing domestic violence ☐ At risk of homelessness ☐ Stably Housed

- ☐ BEST TELEPHONE NUMBER TO USE ☐ SECOND TELEPHONE

- ☐ EMAIL ADDRESS

- ☐ WHERE YOU LIVE OR BACKUP ADDRESS

- ☐ BEST MAILING ADDRESS

- ☐ # BEDROOMS NEEDED? ☐ SPECIAL CIRCUMSTANCES? (*some programs may grant you priority status*)
- ☐ Disability ☐ Elder ☐ Veteran ☐ Fleeing Domestic Violence ☐ Rent-burdened  
☐ Displaced by ☐ Public Action ☐ Sanitary Code ☐ Natural Forces ☐ Other

**AFFORDABLE HOUSING UNITS**  
**MIDDLEBOROUGH HOUSING AUTHORITY,**  
**MANAGEMENT AGENT**

**4 RENTAL UNITS**

**WATER STREET CROSSING**  
**7 WATER STREET**  
**LAKEVILLE, MA**

**Four (4) 3-bedroom, 2.5 bath unit 1,600 SF**  
**RENT: \$1,528/month plus utilities**

**\*\*\*Income & Family Size Limits Apply\*\*\***

**Deliver to: Middleborough Housing Authority**  
**8 Benton Street, Middleborough, MA 02346**

**For more information contact MHA at:**  
**508.947.3824 or [housing@middleborooha.org](mailto:housing@middleborooha.org)**

**Applications may be obtained at the following locations:**

- **Middleborough Housing Authority 8 Benton St**  
**Middleboro MA 02346**

**The Developer and the Management Agent do not discriminate**  
**on the basis of race, color, disability, religion, sex, familial status, or**  
**public assistance.**



<b>TELEPHONE</b>	<b>508.947.3824</b>
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#### **RIGHT TO REASONABLE ACCOMMODATION**

Middleborough Housing Authority and Water Street Crossing will consider a reasonable accommodation, upon request for qualified people with disabilities when an accommodation is necessary, not just desirable, to ensure equal access to the development, its amenities, services and programs. Reasonable accommodations may include changes to the building, grounds, or an individual unit; changes to policies, practices, and procedures; and mitigating circumstances.

#### **FAIR HOUSING/EQUAL OPPORTUNITY INFORMATION**

Middleborough Housing Authority and Water Street Crossing do not discriminate on the basis of race, color, religion, national origin, gender, disability, familial status, marital status, sexual orientation, genetic information, veteran/military status, receipt of public assistance, ancestry, age, gender identity or other basis prohibited by federal, state, or local law in the access or admission to its programs or employment or its programs, activities, functions or services.

## **Water Street Crossing Procedures, Process, Requirements & Preferences**

### **AVAILABLE UNITS OVERVIEW**

#### **Water Street Crossing, 7 Water Street, Lakeville, MA**

Four (4) affordable housing units will be available through the 40B affordable housing process. The property will include fourteen town house style rental units in two buildings. Each building will have seven three bedroom units; two affordable units will be in each building. Each of the four affordable units will consist of three (3) bedrooms, two and one half (2.5) bathrooms, kitchen, dining room and living room. These units are located in close proximity to major highways ( Rt 140, Rt 24 & Rt 495), Bristol Community College, Galleria Mall shopping, entertainment and cultural activities. The units occupy approximately 1,600 square feet of gross living area with rent of \$1,528 per month. Each kitchen is equipped with all appliances including a stove, a refrigerator, a microwave and a dishwasher. Kitchen and baths have granite countertops. The master bathroom contains one sink, one shower and tile flooring. The second bathroom contains one sink, one bath/shower combo and tile flooring. The units have wall to wall carpet in all areas except the kitchen and bathrooms. Every unit has a private entrance and a private rear deck from the living room slider door. All buildings will have coin operated washers and dryers in the common area basement. A private storage area for each unit is also located in the basement. Onsite parking is available for 2 cars per unit. The units are heated and cooled by an electric heat pump with cooking by electric stoves. The tenant will pay for all utilities. At lease inception, deposits of the first and last month's rent and a \$500 security deposit are required.

#### **INITIAL MARKETING**

The initial marketing for the units will be carried out by the Middleborough Housing Authority (“Agent”). All units will be available on an equal opportunity basis. In carrying out this Affirmative Marketing Plan, the marketing agent will not discriminate against applicants on the basis of race, creed, color, religion, national or ethnic origin, citizenship, ancestry, class, marital status, disability, military/veteran status, presence of children, source of income, age, gender, sexual orientation, or any other basis prohibited by local, state, or federal law. The units will be advertised in a way that will provide ample opportunities for people from diverse backgrounds with a variety of language skills to learn about and apply for the rental opportunities.

Every person has the right to submit an application for housing at the Water Street Crossing. Management will supply oral interpretation should an applicant or resident have difficulty understanding material because of limited English Proficiency. This service will be at no cost to the applicant or resident.

Applications may also be obtained by mail, e-mail or online:

- Call the Middleborough Housing Authority at (508) 947-3824, ext.2 or 4 to request an application package.
- Email to [housing@Middleboroha.org](mailto:housing@Middleboroha.org)

For questions, assistance in preparing an application, or to request a reasonable accommodation, please contact:

Middleborough Housing Authority, 8 Benton Street, Middleborough MA 02360.

Phone: 508-947-3824 ext 2 or 4      Fax: 508-947-6393

E-mail: [housing@Middleboroha.org](mailto:housing@Middleboroha.org)

## ELIGIBILITY REQUIREMENTS

Applicants must meet specific requirements to qualify for the affordable rental units. Eligibility requirements shall be updated as necessary to comply with all regulations and guidelines that may be applicable.

### Income Eligibility

In order to be eligible to rent one of the affordable units at Water Street Crossing in Lakeville, income and assets must be within the guidelines listed below.

### For information regarding the definition of income and assets, please see attached, APPENDIX I: Maximum Income

Eligible applicants must have a combined annual household income from all sources for all income-earning members of the household of not more than 80% of area median income, as defined by HUD and adjusted for household size. According to the 2016 Income Guidelines released by HUD, 80% of the area median income for Lakeville, MA and therefore the maximum allowable household income is as follows:

### Household Size - Maximum Income

Household	Maximum Income
3	\$59,650
4	\$66,250
5	\$71,550
6	\$76,850

### Minimum Income

The household income must be sufficient for the unit to be affordable to the household. Specifically, the monthly rent plus heat, hot water and electricity should not equal more than 30% of the household's gross income but can not exceed 40% of the household's gross income. Based on the above criteria, the projected minimum income to support these requirements is as follows:

Unit Size	Rent	Utility Factor	Total Monthly Rent Requirement including Utility Factor	Minimum Annual Income ( 40%)
Three bedroom	\$1,528	\$176	\$ 1,704	\$51,300

### Allowance for Tenant Furnished Utilities

	3 bedroom
Electric Heat	\$79
Electric cooking	\$17
Electricity	\$58
Electric Hot Water	<u>\$22</u>
<b>Total</b>	<b>\$176</b>

## **LEASE PROVISIONS**

The lease form for all units is attached. **Please read it carefully.** The lease is for 1 year and stipulates:

- The tenant may not be evicted for any reason other than substantial violation of a material provision of the lease.
- The tenant shall be given a minimum of 60 days written notice that the lease will not be renewed.
- The tenant is required to furnish annual information sufficient to determine and document continued compliance with the income eligibility requirements.
- The tenant shall furnish the names and the number of people in the current household and their relationship to one another annually and whenever a change to the household occurs.

## **PREFERENCES - HOUSEHOLD SIZE/LARGER HOUSEHOLD**

**Household/Apartment Size:** A “household” shall mean one or more persons who will live regularly in the unit as their primary residence and who are related by blood, marriage, law or who have otherwise evidenced a stable inter-dependent relationship, or an individual. Household size should be appropriate for the number of bedrooms in the home. A minimum of one person will be assigned per bedroom. Maximum household size will be based on the State Sanitary Code, applicable local bylaws and will not violate state or federal civil rights. Household size shall not exceed the Massachusetts State Sanitary Code requirements. (105 CMR 400).

## **SCREENING AND TENANT SELECTION**

The Agent and/or the Management Company will interview all applicants. During the interview process, applicants will be asked a number of standard questions. The Agent will also send out income verification forms, credit checks, etc as a means to verify eligibility. The Middleborough Housing Authority will be responsible for the obtaining and reviewing the income verification forms for all of the affordable units with the project.

All applicants will be notified by mail of their preliminary eligibility. Note: Eligibility does not constitute acceptance and further screening is required to determine an applicant’s ability to maintain a successful tenancy.

Each adult member of an applicant family will be required to sign the necessary consent forms to secure third-party verifications of income, credit reports, housing related criminal convictions and landlord references. Once information has been verified, the appropriate certification forms will be completed.

Reasons for an ineligible determination at this point may include, but are not limited to, total family income insufficient to afford monthly rents, housing related criminal convictions, and/or total family income above the maximum guidelines.

## **Statement of Non-discrimination/No Conflict of Interest**

In carrying out this Tenant Selection Plan, the Agent will not discriminate against applicants on the basis of race, creed, color, religion, national or ethnic origin, citizenship, ancestry, class, marital status, disability, familial status, military/veteran status, presence of children, source of income, age, gender, sexual orientation, or any other basis prohibited by local, state, or federal law in any aspect of tenant selection or matters related to continued occupancy

## **Privacy Policy**

It is the policy of the Agent to guard the privacy of individuals in accordance with the Federal Privacy Act of 1974 and the Massachusetts Privacy Act, and to ensure the protection of records maintained by the property concerning the applicants or tenants.

The Agent shall not disclose any personal information contained in its records to any persons or agencies other than the Monitoring Agent, the Management Agent (Water Street Crossing) or other authorized agency unless the individual about whom information is requested has given written consent to such disclosure, or unless disclosure is otherwise in accordance with provisions in the state or federal privacy acts.

This privacy policy in no way limits the Agent's ability to collect such information as it may need to determine eligibility, compute rent, or determine an applicant's suitability for tenancy or to gather information to process reasonable accommodations requests under Section 504 of the Rehabilitation Act of 1973, the Americans with Disabilities Act, and the Fair Housing Act.

The above policies in no way limit the right or duty of the Agent to make abuse, neglect or other protective service or emergency reports. Additionally, such policies do not forbid management from sharing information in the public domain with relevant service or government agencies.



## APPENDIX I

### DEFINITION OF INCOME

Annual gross income means all amounts, monetary or not, which go to, or on behalf of, the family head or spouse or to any other family member received from a source outside the family during the 12 month period following application. Annual income includes but is not limited to:

1. The full amount, before any payroll deductions, of wages and salaries, overtime pay, commissions, fees, tips, and bonuses, and other compensation for personal services.
2. The net income from the operation of a business or profession. Expenditures for business expansion or amortization of capital indebtedness shall not be used as deductions in determining net income. An allowance for depreciation of assets used in a business or profession may be deducted, based on straight line depreciation, as provided in Internal Revenue Service regulations. Any withdrawal of cash or assets from the operation of a business or profession will be included in income, except to the extent the withdrawal is reimbursement of cash or assets invested in the operation by the family.
3. Interest, dividends, and other net income of any kind from real or personal property. Expenditures for amortization of capital indebtedness shall not be used as deductions in determining net income. An allowance for depreciation is permitted as provided by the Internal Revenue Service regulations.
4. The full amount of periodic amounts received from Social Security, annuities, insurance policies, retirement funds, pensions, disability or death benefits, and other similar types of periodic receipts, including a lump-sum amount that is the delayed start of a periodic payment.
5. Payment in lieu of earnings, such as unemployment and disability compensation, worker's compensation and severance pay.
6. Periodic and determinable allowances, such as alimony and child support payments, and regular contributions or gifts received from organizations or from persons not residing in the dwelling.
7. All regular, special pay, and allowances of a member of the Armed Forces.
8. Income derived from assets to which any member of the family has access. Where the household has net assets in excess of \$5,000, annual income shall include the greater of the actual income derived from all net family assets or one percent (1%) of the value of such assets.

Annual Income **Does NOT** include the following:

1. Income from employment of children (including foster children) under the age of 18 years.
2. Payments received for the care of foster children or foster adults. (usually persons with disabilities, unrelated to the tenant family, who are unable to live alone)
3. Lump-sum additions to family assets, such as inheritances, insurance payments (including payments under health and accident insurance and worker's compensation), capital gains, and settlement for personal or property losses.
4. Amounts received by the family that are specifically for, or in reimbursement of, the cost of medical expenses for any family member.

5. Income of a live-in-aid.
6. The full amount of student financial assistance paid directly to the student or to the educational institution.
7. The special pay to a family member serving in the Armed Forces who is exposed to hostile fire.
8. Temporary, nonrecurring, or sporadic income such as gifts.
9. Deferred periodic amounts from supplemental Social Security income and Social Security benefits that are received in a lump sum amount or in prospective monthly amounts.
10. Amounts paid by a state agency to a family with a member who has a developmental disability and is living at home to offset the cost of services and equipment needed to keep the developmentally disabled family member at home.
11. Amounts specifically excluded by any other Federal statute from consideration as income for the purpose of determining eligibility or benefits under a category of assistance program.

## **DEFINITION OF ASSETS**

The value of necessary items of personal property, such as furniture or automobiles shall be excluded. Determination of assets shall be based upon a full and fair cash value of the asset at the time of application to the program. If a potential purchaser divests himself or herself of an asset for less than full and fair present cash value of the asset within one year prior to application, the full and fair cash value of the asset at the time of its disposition must be declared and shall be included for the purpose of calculating eligibility.

### **Household Assets include the following:**

1. Cash held in savings and checking accounts, safe deposit boxes, homes, etc. For savings accounts, use the current balance. For checking accounts, use the average balance for the last six (6) months.
2. Revocable trusts: The cash value of any revocable trust available to the applicant.
3. Equity in rental property or other capital investments: The current fair market value less (a) any unpaid balance on any loans secured by the property, and (b) reasonable cost that would be incurred in selling the asset (e.g., penalties, broker fees, etc.).
4. Stocks, bonds, treasury bills, certificates of deposit, mutual funds, and any money market accounts: The value of stocks and other assets vary from one day to another and should be determined no more than one (1) month in advance of the applicant's submission to participate in the subject housing program.
5. Individual retirement, 401K, and Keogh accounts: When the holder has access to the funds, even though a penalty may be assessed. If the applicant is making occasional withdrawals from the account, determine the amount of the asset by using the average balance for the previous six (6) months. (Do not count withdrawals as income.)
6. Retirement and pension funds:

- a. While the person is employed: Amounts the applicant withdraws without retiring or terminating employment. Count the whole amount less any penalties or transaction costs.
- b. At retirement, termination of employment, or withdrawal: Periodic receipts from pension and retirement funds are counted as income. Lump sum receipts from pension and retirement funds are counted as assets. Count the amount as an asset or as income, as provided below. If benefits will be received in a lump sum, include the lump sum receipt in net household assets. If benefits will be received through periodic payments, include the benefits in annual income. Do not count any remaining amounts in the account as an asset.

If the applicant initially receives a lump-sum benefit followed by periodic payments, count the lump-sum benefit as an asset and treat the periodic payment as income. In subsequent years, count only the periodic payment as income. Do not count the remaining amount as an asset.

**NOTE:** This paragraph assumes that the lump-sum receipt is a onetime receipt and that it does not represent delayed periodic payments, then the account would be consider as income and not an asset.

7. Cash value of life insurance policies available to the applicant before death (e.g., the surrendered value of whole life policy or a universal policy): Do not include a value for term insurance, which has no cash value to the applicant before death.
8. Personal property held as an investment: Gems, jewelry, coin collections, or antique cars held as investment. Personal jewelry is NOT considered an asset.
9. Lump-sum receipts or one-time receipts: Inheritance, capital gains, onetime lottery winnings, victim's restitution, settlement on insurance claims (including health and accident insurance, worker's compensation, and personal or property losses), and any other amounts that are not intended as periodic payments.
10. A mortgage or deed of trust held by an applicant: Payments on this type of asset are often received as one combined payment for principal and interest with the interest portion counted as income from the asset. This combined figure needs to be separated into the principal and interest portions of the payment. (This can be done by referring to an amortization schedule that relates to the specific term and interest rate of the mortgage.)
11. A life estate: A life estate is an interest in real property which entitles the life tenant to benefit from the property until his or her death. Usually, the life tenant is entitled to the use of a house for life and may be entitled to sell his or her interest. This right is of value to the tenant, but is rarely sold on an open market. (Purchasers of real property would typically not be tempted by such an uncertain term of ownership.)

The value of an applicant's life estate is included when calculating his or her assets based on the Internal Revenue Service's latest guidance to determine the value of life estates. (See Internal Revenue Service Publication 1457, "Actuarial Values, Book Aleph," (7-1999).)

Household Assets **DO NOT** include the following:

1. Personal property (clothing, furniture, cars, wedding rings, other jewelry that is not held as an investment, vehicles specially equipped for persons with disabilities).

2. Interests in Indian trust land.
3. Term life insurance policies (i.e., where there is no cash value).
4. Equity in the cooperative unit in which the applicant lives.
5. Assets that are part of an active business: “Business” does NOT include rental of properties that are held as investments unless such properties are the applicant’s main occupation.
6. Assets that are NOT effectively owned by the applicant: Assets are not effectively owned when they are held in an individual’s name but:
  - (a) the assets and any income they earn accrue to the benefit of someone else who is not the applicant, and
  - (b) that other person is responsible for income taxes incurred on income generated by the assets.

# APPLICATION INSTRUCTIONS

## **PLEASE PRINT ALL INFORMATION CLEARLY**

Persons with disabilities are entitled to request a reasonable accommodation of rules, policies, practices or services, or to request a reasonable modification of the housing, when such accommodations or modifications are necessary to afford the person(s) with disabilities equal opportunity to use and enjoy the housing.

### **Complete Application Package:**

A complete Application Package shall consist of the following:

- A completed and signed Application Form
- A signed General Authorization for Release of Information Form
- All Required Documentation listed in the Application Checklist

The following section provides guidance in completing and submitting an eligible application

### **Instructions:**

#### **Application Form – Page 1**

**Part 1** of the application form collects information about the Applicant Household. Please provide the requested information. Applicant is the Head of Household. Co-Applicant is the spouse/partner or co-owner (another name on the lease for the unit). Additional Household members include every person who will live in the affordable home as a member of the household, including children. Extended family members must provide documentation that they have been a part of the household for the past year. Social Security numbers and birthdates are required for each household member. Describe the relationship to the Applicant for each household member (for example: Wife, Son Daughter, Mother, Nephew, etc.).

**Part 2** of the application form captures information relative to a Local Selection Preference. Please check box if you request a local preference. A household is eligible for the local preference if: 1) the household currently resides in the community, 2) is employed in the community 3) has a bona fide offer of employment in the community or 4) has a child in the local school system. You must provide 3<sup>rd</sup> party documentation of residency, employment, employment offer or school.

**Part 3** of the application is optional, and designed to capture racial data on applicant households.

**Part 4** of the application captures information relative to your present and or previous housing. Please fill in the requested information in the appropriate spaces. Please check whether your present housing receives state or federal subsidy. This includes Section 8 Housing Choice Voucher program, Massachusetts Rental Voucher Program (MRVP), project based subsidy, etc. Please check whether you have owned any real estate in the past two years. Please provide documentation such as real estate tax bills, sale documents, etc.

**Part 5** of the application captures income data for the applicant household. Please fill in the requested information in the appropriate spaces. A section for the full-time occupation and income for the applicant and co-applicant is provided, as well as an additional section, to capture additional income from part-time jobs, alimony, child support, disability, retirement or investment income, etc. You must provide documentation of all

income (see the application form and the checklist at the end for guidance). Please provide documentation that is current with the application date (most recent time period). Should you have any questions, please contact the Lakeville Housing Authority for guidance before submitting your application.

**Part 6** of the application captures information about household assets. Assets include liquid assets such as cash in savings and checking accounts, real estate owned, investment accounts (stocks, bonds, mutual funds, etc.). You must include all retirement accounts. Please indicate in whose name(s) each account is held and name of the bank or brokerage. If it is an interest-bearing account (such as a savings account), show the interest rate (example: if your savings account pays 2.5% interest, list 2.5 in the column for interest rate). The current balance should include the principal balance (or value if a non-cash asset) as of the most recent statement. Please include documentation as outlined in the application package and checklist.

**Part 7** of the application should be filled out regarding members of the applicant household who are over 18 years of age and registered as a full-time student(s) in a school or college. Please include a letter from the educational institution showing that the household member is a full-time student(s), and the anticipated graduation date(s).

**Part 8** of the application is for signatures and certifications by the Applicant and Co- Applicant. Please read the certification statement and sign this page.

#### **General Authorization for Release of Information Form**

All household members over the age of 18 must sign and date this form. This form will be used to verify information provided with the application.

- The Developer and the Management Agent do not discriminate on the basis of race, color, disability, religion, sex, familial status, or public assistance.
- Co-signers or guarantors are not allowed.
- Individuals or their families related to the Developer or with a financial interest in the project are prohibited from applying.

# WATER STREET CROSSING

## APPLICATION CHECKLIST

### ENCLOSURES REQUIRED: (Do not enclose originals – COPIES ONLY)

- \_\_\_\_\_ Signed Application.
- \_\_\_\_\_ Copies of social security card(s) and birth certificate(s) for each member of the applicant household.
- \_\_\_\_\_ If an adult member of the applicant household is a full-time student, a letter from the school or college stating enrollment status and anticipated date of graduation.
- \_\_\_\_\_ Proof of Wage Income (5 most recent pay stubs OR salary verification letter on employer stationary, signed by an authorized individual) (for each job – and each household member).
- \_\_\_\_\_ Proof of Social Security, Disability, SSI, TAFDC, Veterans Benefits, Unemployment Compensation or other government benefits in the form of a letter from the appropriate agency (for each member of household).
- \_\_\_\_\_ Verification of need of an accessible unit (Doctor's note or equivalent)
- \_\_\_\_\_ Proof of local residency or local employment
- \_\_\_\_\_ Complete Tax Returns **for the past three years**, including W2's, 1099's, all schedules and other attachments for each member of the applicants' household. If you filed electronically and did not retain copies, please visit the IRS at [irs.gov](http://irs.gov) and request copies. You must sign and date these copies. Use the current date.
- \_\_\_\_\_ For Self Employment income, submit Income and Expense data certified by an independent accountant for the past two quarters.
- \_\_\_\_\_ Documentation of all Assets owned by any members of the Applicant household; documentation must include valuation. This includes the value of real estate owned; investments such as stocks and bonds or mutual funds accounts, and Certificates of Deposit.
- \_\_\_\_\_ Copies of savings and checking and other investment account statements, 3 most recent statements for each account held by each member of the applicant household.
- \_\_\_\_\_ Evidence of funds available for lease deposits (may be identified from savings or a signed and notarized gift letter from a person or organization providing funds.

# Water Street Crossing, 7 Water Street, Lakeville, MA APPLICATION

**PLEASE PRINT ALL INFORMATION CLEARLY**

**APPLYING for:** ☐ **Three (3) Bedroom two and 1/2 (2.5) bath unit**

## Part 1 - Applicant Information

<b>Applicant Name</b>	<b>Mr./Mrs</b>	<b>First Name</b>	<b>Last Name</b>

<b>CO- Applicant's Name</b>	<b>Mr./Mrs</b>	<b>First Name</b>	<b>Last Name</b>
<b>Applicants Address</b>			
	<b>Street/Apt. #/ PO Box</b>		
	<b>City</b>	<b>State</b>	<b>Zip</b>

<b>Applicants Mailing Address</b>			
	<b>Street/Apt. #/ PO Box</b>		
	<b>City</b>	<b>State</b>	<b>Zip</b>

<b>Phone/Email</b>	<b>Home Phone</b>	<b>Cell Phone</b>	<b>Email</b>

**Household Members** (List all household members, regardless of age, who will occupy the affordable unit)

Name	Relationship	Date of Birth	Social Security #
	<b>Applicant</b>		
	<b>Co-Applicant</b>		



**List Addresses for each Adult Household Member** for the last five (5) years in reverse order.

**1. Name of Primary Leaseholder**\_\_\_\_\_

Address and Apt#\_\_\_\_\_ Date from\_\_\_\_\_ To Present Day

City\_\_\_\_\_ State\_\_\_\_\_ Zip\_\_\_\_\_

Landlord Name\_\_\_\_\_ Phone\_\_\_\_\_

Landlord Address\_\_\_\_\_ City\_\_\_\_\_ State\_\_\_\_\_ Zip\_\_\_\_\_

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

Did this landlord return your security deposit? Yes\_\_\_\_\_ No\_\_\_\_\_

**2. Name of Primary Leaseholder**\_\_\_\_\_

Address/Apt #\_\_\_\_\_ Date from\_\_\_\_\_ To\_\_\_\_\_

City\_\_\_\_\_ State\_\_\_\_\_ Zip\_\_\_\_\_

Landlord Name\_\_\_\_\_ Phone\_\_\_\_\_

Landlord Address\_\_\_\_\_ City\_\_\_\_\_ State\_\_\_\_\_ Zip\_\_\_\_\_

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

Did this landlord return your security deposit? Yes\_\_\_\_\_ No\_\_\_\_\_

**3. Name of Primary Leaseholder**\_\_\_\_\_

Address/Apt #\_\_\_\_\_ Date from\_\_\_\_\_ To\_\_\_\_\_

City\_\_\_\_\_ State\_\_\_\_\_ Zip\_\_\_\_\_

Landlord Name\_\_\_\_\_ Phone\_\_\_\_\_

Landlord Address\_\_\_\_\_ City\_\_\_\_\_ State\_\_\_\_\_ Zip\_\_\_\_\_

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

Did this landlord return your security deposit? Yes\_\_\_\_\_ No\_\_\_\_\_

## Part II (A) - Applicants Household Income

### Applicant's Full Time Occupation

**Employer Name:** \_\_\_\_\_

**Employer Address:** \_\_\_\_\_  
**Street City/Town State Zip code**

**Supervisor :** \_\_\_\_\_  
**Name Phone # Ext. #**

**Total Income before any deductions:**

If paid Weekly (attach 5 most recent pay stubs)	\$ Period #1	\$ Period #2	\$ Period #3	\$ Period #4	\$ Period #5
If Paid B-Weekly (attach 3 most recent pay stubs)	\$ Period #1	\$ Period #2	\$ Period #3		
If paid Monthly (attach 2 most recent income stubs/ documentation)	\$ Period #1	\$ Period #2			
<b>Applicant's Total Gross Income</b>					

## Part II (B) - Co-Applicants Household Income

### Co- Applicant's Full Time Occupation

**Employer Name:** \_\_\_\_\_

**Employer Address:** \_\_\_\_\_  
**Street City/Town State Zipcode**

**Supervisor :** \_\_\_\_\_  
**Name Phone # Ext. #**

**Total Income before any deductions:**

If paid Weekly (attach 5 most recent pay stubs)	\$ Period #1	\$ Period #2	\$ Period #3	\$ Period #4	\$ Period #5
If Paid B-Weekly (attach 3 most recent pay stubs)	\$ Period #1	\$ Period #2	\$ Period #3		
If paid Monthly (attach 2 most recent pay stubs)	\$ Period #1	\$ Period #2			
<b>Co-Applicant's Total Gross Income</b>					

## Part II (C) - Other Household Income

( ie self employed, child support, alimony, periodic payments from family/friends, SS, SSI, SSDI, pension, retirement, unemployment, workers compensation, interest income, any other income)

Household Member	Type of Income	Monthly Gross Amount

## Part III - Asset Income

( ie checking accounts, savings accounts, CD's, IRA's, real estate, etc.)

Name on Account	Bank/Brokerage Name	Account Type/Interest Rate	Balance
			\$
			\$
			\$
			\$
			\$
			\$
		<b>Total Assets</b>	\$

## PART IV - Adult Full Time Students

Is any member of the Applicants Household over 18 years a full-time student? Yes \_\_\_\_\_ No \_\_\_\_\_

If yes, list name of full- time students (s) and school attending:

Name	School
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**\*Attach a letter from each school verifying the student is enrolled full-time**

## Part V- Local Preference

**APPLYING** for:

- ☐ **Local Preference** ( live, work, school or have a bona fide employment offer in the town of Lakeville.

1. **Current residents must provide documentation of residency such as rent receipts, utility bills, street listing or voter registration.**

<b>Name</b>	<b>Current address</b>	<b>Date from</b>	<b>Date to</b>

2. **Applicants that work in Lakeville must provide documentation of employment such as last 5 most recent pay stubs**

<b>Household member</b>	<b>Current employer</b>	<b>Employer's address</b>	<b>Employer's phone #</b>	<b>Hired date</b>

3. **Applicants that have been hired to work in Lakeville must provide documentation of employment such as letter from employer stating start date**

<b>Household member</b>	<b>Employer</b>	<b>Employer address</b>	<b>Employer phone #</b>	<b>Hire date</b>

4. **Applicants that have a child currently enrolled in the Lakeville school system**

<b>Student's Name</b>	<b>School</b>		<b>Student's Name</b>	<b>School</b>

## Part VI - Minority Information for Applicant's

\* Optional: Please check the appropriate Race Category for each Household Member

Household Member	Native American/Alaskan	Native Hawaiian/ Pacific Islander	African American	Hispanic/ Latino	White/ Non-Minority	Other/ Non-White

## Part VII – Housing Information

**Section 8 or similar housing subsidy (circle yes or no):** Do you currently have a Section 8 Voucher (or similar housing subsidy)? **YES** **NO**

If yes, from which Housing Authority /agency is your voucher issued?

**Real Estate:** Do you, or anyone on this application, own any property or have owned property in the past 3 years? **YES** **NO**

Are you, or anyone on this application, entitled to receive any amount of money from the sale of any property? (Currently or thru an upcoming court settlement) **YES** **NO**

*If yes to either question*, type of property: \_\_\_\_\_

Location of property: \_\_\_\_\_

Appraised Market Value: \$ \_\_\_\_\_

Mortgage or outstanding loans balance due: \$ \_\_\_\_\_

## Part VIII - Certification

I/We certify that the information contained in this application is true and accurate to the best of my/our knowledge.

I/We understand that only applications that are complete and eligible under the guidelines and contain all necessary documentation and certifications.

Applicant Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Co-Applicant Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**Received by Managment Agent:**

Date	Time	Received by Deadline	MHA Signature

The information given in this application will be used to check that you are income qualified to be given an *opportunity* to lease an affordable unit in the Town of Lakeville as part of this program. Eligibility for an affordable unit does not guarantee you a unit.

**THIS IS NOT A LEASE APPLICATION.**

Please submit this application along with **ALL** of the listed documents to:

Middleborough Housing  
Authority  
8 Benton St.  
Middleboro, MA 02346

# General Authorization for Release of Information

## Water Street Crossing Rental Units

I/We hereby authorize the Middleborough Housing Authority to do a credit report and to verify any and all income, assets and other financial information. I/we direct any employer, landlord, or financial institution to release any information to the Middleborough Housing Authority for the purpose of determining income eligibility for the affordable housing units in Lakeville, MA. Any information released will be kept confidential.

_____	_____	_____
Applicant Signature	last 4 digits of SS#	Date

_____	_____	_____
Co-Applicant Signature	last 4 digits of SS#	Date

_____	_____	_____
Additional Family Member	last 4 digits of SS#	Date

_____	_____	_____
Additional Family Member		Date

### General Authorization for Release of Information Form

All household members over the age of 18 must sign and date this form. This form will be used to verify information provided with the application.

**This authorization is valid for a period of one year from the date noted above.**