#### Don't staple the pages of this application together!

- 1. Some providers *scan* the application, and if you staple, that means removing staples from 1000 applications every week or month.
- 2. If you include a letter, don't staple that either: providers need to quickly get to your waitlist data and your cover page just gets in the way.

Use #10 double window envelope old on the line, a addresses will fit the windows.

Dear

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

## Housing Authority or Management Office Only

**Is this waitlist closed? Any other questions or concerns?** Fill in the appropriate circle(s) below and fax this page to HousingWorks at the number below – and we will correct the problem. Hundreds of thousands of applicants check our free website to see what lists are open! Keeping us updated will save you many phone calls, reduces frivolous applications - and takes only 10 minutes a year.

O This particular waitlist is closed: The only open waitlists we have at present are:

O This is not the correct application. The correct application is available by/from:

O Any other info you wish to tell HousingWorks?

Your position or title at this housing program:

Your signature:



HousingWorks Fax: 617-536-8516

	Head of Household's FIRST Name					
0						
	Head of Household's MIDDLE Name					
0						
	Head of Household's LAST Name					
0						
	HoH's SOCIAL SECURITY NUMBER				GENDER	HoH's DATE OF BIRTH
0				0		0
	ETHNICITY	RACE:	Asia	n , Blac	k, White, Native A	American, Pacific Islander, Multi-racial

	ETHNICTTY	RACE:	Asian, Black, White, Native American, Pacific Islander, Multi-racial
	Also provide your race at right!		Do NOT write Spanish, Hispanic, Latino here – and do NOT write your country!
0		0	

## O YOUR MOTHER'S MAIDEN NAME

	YOUR HOME TELEPHONE	SECOND TELEPHONE
0		
	YOUR EMAIL ADDRESS	
0		

#### CURRENT ADDRESS OR LONG-TERM CONTACT ADDRESS

This is:	
0	
0	

	SECOND CONTACT ADDRESS
	This is:
0	
0	

TOTAL HOUSEHOLD SIZE			# BED	ROOMS		How much money does your family receive ir	n a yea	ar?	
0	# Adults	# Children	Total #	0		0		.0	0

	INCOME SOURCES
0	

# MOBILE RENTAL ASSISTANCE, if any

0

REQUESTED ACCOMMODATIONS

Ο

SPECIAL CIRCUMSTANCES THAT SOME PROGRAMS MAY USE TO ASSIGN PRIORITY OR PREFERENCE



# MALDEN HOUSING AUTHORITY



630 Salem Street Malden, Massachusetts 02148 Telephone: (781) 322-9460 Fax: (781) 322-4838 TDD: (800) 545-1833 x103 (24 hrs.)

www.maldenhousing.org

 THIS IS AN IMPORTANT NOTICE

 Please have a family member translate this for you

 Cet avis est important, Veuillez le faire traduire.

 Enformasyon sa-a empotant, fe tradwui?L.
 Dây là môt thông báo quan trọng

 Это очень важное объязление!
 Hãy nhờ một người trong gia đình dịch

 Itomanyacta, попросите кого-ныбудь из членов Вашей семыя перевести
 Each of the set vice was nepesecta

 Вам это объязление.
 Each of the set vice was nepesecta

## PRE-APPLICATION for LOW RENT PUBLIC HOUSING NEWLAND STREET FEDERAL FAMILY GENERAL OCCUPANCY

# Instructions: <u>Please read carefully</u>.

## Incomplete, photocopied, faxed and/or e-mailed Pre-Applications will not be processed.

- 1. To be qualified for admission to public housing an applicant must:
  - (a) Be a family as defined in the MHA's Admission and Continued Occupancy Policy (ACOP);
  - (b) Meet HUD's requirements on citizenship or immigration status;
  - (c) Have an Annual Income at the time of admission that does not exceed the income limits established by HUD as posted in the MHA's offices;
  - (d) Provide documentation of Social Security numbers for all family members, age 6 or older, or certify that they do not have Social Security numbers;
  - (e) Meet or exceed the Applicant Selection Criteria, including attending and successfully completing an MHA-approved pre-occupancy orientation session; and
  - (f) Meet the MHA's screening requirements including, but not limited to, those related to criminal activity and alcohol abuse.
- 2. Upon receipt, completed pre-applications will be date and time-stamped, sorted according to unit type and size, scored in accordance with each applicant family's claim of admission preference(s) as established by the MHA's ACOP, and then entered on the waiting list highest preference score to lowest preference score according to the date and time received within each preference category.
- 3. Pre-Applications will be accepted by the MHA either delivered in hand or received by mail at the above referenced address only. Upon request, the MHA will provide applicants with disabilities assistance in completing the pre-application at the above referenced address.
- 4. Include the name, social security number, date of birth and all income information for every family member who will live in the household.
- 5. Provide your complete address and telephone number so the MHA can reach you to schedule an application interview when your name comes to the top of the waiting list. Immediately inform the MHA of any change in your contact information at the address referenced above.

# The Malden Housing Authority is an Equal Opportunity Housing Provider

# PHA use Only:

Date/Time of Pre-Application:

Bedroom Size:

Control Number:

## MHA PRE-APPLICATION for LOW RENT PUBLIC HOUSING NEWLAND STREET FEDERAL FAMILY GENERAL OCCUPANCY

- 1. Name of head of household:
- 2. Name of adult co-head of household:
- Current address, Street, Apt. #: Current City, State and Zip: Current Area Code and Phone #: Work Address (City/Town/State only): Mailing Address (if different from current address):

# For Statistical Purposes Only (Not Required)

4.	Race of Head:	_ African American/Black	Asian or Pacific Islander
	-	_ Native American/ Native Alaskan	Caucasian/White

5. Ethnicity of Head: <u>Hispanic/Latino</u>

\_\_\_\_Non-Hispanic/Non-Latino

5

# FAMILY INFORMATION

	First Name	Date	Sex	Social	Relation	Aged 62 or	Birthplace	Fulltime
	(& Last Name if	of	(M/F)	Security	to	Older (E)	{Country}	Student?
	different from	Birth		Number	Head	Or Disabled		(Y/N)
	Head's)					(D)		
Η					Head			
2								
3								
4								
_								
5								
6								
7								
								<u> </u>

8

Please circle the number of bedrooms you require: 1 2 3 4

9

- 6. Has the applicant family has been displaced by:
  - a) A declared Natural Disaster, i.e. flood, hurricane, earthquake, tornado, etc.? \_\_\_Yes \_\_\_No
  - b) Governmental action through no fault of their own? \_\_\_\_Yes \_\_\_\_No
  - c) Domestic violence? <u>Yes</u> No
- 7. Is any adult family member employed? \_\_\_Yes \_\_\_No Is the employer located in Malden? \_\_Yes \_\_\_No
- 8. Is any adult family member enrolled in a job-training program, including one required under the welfare program? \_\_\_\_Yes \_\_\_\_No
- 9. Are any household members under the age of 18 full-time students? \_\_\_\_ Yes \_\_\_\_ No If yes, please list the school that the student attends full-time (for each family member): Name of School: \_\_\_\_\_\_
- 10. Is any adult family member enrolled in an education program full-time? \_\_\_\_Yes \_\_\_\_No
- 11. <u>Family Income Information</u>: Please list the source and amount of all current income received by all family members, including yourself. Include all earnings and benefits received from employment, AFDC/TANF, VA, Social Security, SSI, SSDI, Unemployment, Worker's Compensation, Child Support, etc.

Family Member Name	Source of Income	Amount	Frequency Week/Month/Year

### 12. Total Gross Annual Household Income: <u>\$</u>\_\_\_\_\_\_

13. *Current Landlord's name and phone #: _	
Date Family moved to current address:	

14. *Prior landlord's name and phone #:	
Date Family moved to/from this location: To:	From:
Prior address, Street, Apt. #:	
Prior City, State and Zip:	
Prior Area Code and Phone #:	

\*As part of the tenant screening process, the MHA will contact an applicant family's former landlords prior to the family receiving an offer of housing.

## 15. Claim of Preferences (Circle <u>ALL</u> that apply):

<u>Please read attached "MHA Local Preferences" to determine which apply to you</u>. The Malden Residency Preference is a "Super Preference" which must be claimed in order to qualify for any additional preference. \*(*The MHA will request documentation verifying your claim of preference(s) at the time you reach the top of the waiting list but prior to receiving an offer of housing.*)

## Malden Residency (4 points)

Veteran (2 points)

Working Family/Elder/Disabled (1 point)

TOTAL PREFERENCE POINTS:

## **Pre-Application Certification:**

I/we certify that the statements on this pre-application **are true** to the best of my/our knowledge and belief and understand that **they will be verified**. I/we authorize the release of information to the Malden Housing Authority by my/our employer(s), the Department of Public Assistance, the Social Security Administration, and/or all other business or government agencies. I/we understand that any **false statement** made on this application will cause me/us to be **disqualified** for admission.

Applicant Signature

**Co-applicant Signature** 

<u>Warning</u>: 18 U.S.C. 1001 provides, among other things, that whoever knowingly and willfully makes or uses a document or writing containing false, fictitious or fraudulent statement or entry in any matter within the jurisdiction of a department or agency of the United States shall be fined not more than \$10,000 or imprisoned for not more than five years, or both.

Date

Date

## MHA Local Preferences {From the MHA's ACOP and 24 CFR 960.206}

Public Housing Authorities are permitted to establish local preferences and to give priority to serving families that meet those criteria. HUD specifically authorizes and places restrictions on certain types of local preferences. HUD also permits the MHA to establish other local preferences, at its discretion. Any local preferences established must be consistent with the MHA plan and the consolidated plan, and must be based on local housing needs and priorities that can be documented by generally accepted data sources [24 CFR 960.206(a)].

## **MHA Policy**

The MHA will use the following local preferences, the scoring for which will be aggregated using the following system: each verified preference will receive an allocation of points. The more preference points an applicant receives, the higher the applicant's place on the waiting list.

<u>Residency Preference (4 points)</u>: A "residency" preference for a family that resides in the City of Malden, Massachusetts, inclusive of a family member who works, or has been notified that they are hired to work, in Malden. The preference cannot have the effect of disproportionately delaying or denying admission to members of protected classes. A residency <u>requirement</u> is prohibited.

In order to verify that an applicant is a resident, the MHA will require an applicant family to produce a minimum of three (3) of the following types of satisfactory verification documents: rent receipts, leases, utility bills, employer or agency records, school records, drivers licenses, voters registration records, credit reports, or a landlord's statement which is otherwise verifiable by the MHA.

For families of which a member is working or has been hired to work in Malden, a notarized employment verification statement signed by the employer will be required.

# If a family's claim of residency is verified to the MHA pursuant to the above, then the family may also qualify for and receive the benefit of the following additional local preferences:

# <u>Veteran's Preference (2 points)</u>: A "Veteran's" preference is available to current members of the U.S. Armed Forces, veterans, or the surviving spouses of veterans.

"Veteran" shall mean (1) any person, (a) whose last discharge or release from his wartime service as defined herein, was under honorable conditions and who (b) served in the army, navy, marine corps, coast guard, or air force of the United States, or on full time national guard duty under Titles 10 or 32 of the United States Code or under sections 38, 40 and 41 of chapter 33 for not less than 90 days active service, at least 1 day of which was for wartime service; provided, however, than any person who so served in wartime and was awarded a service-connected disability or a Purple Heart, or who died in such service under conditions other than dishonorable, shall be deemed to be a veteran notwithstanding his failure to complete 90 days of active service; (2) a member of the American Merchant Marine who served in armed conflict between December 7, 1941 and December 31, 1946, and who has received honorable discharges from the United States Coast Guard, Army, or Navy; (3) any person (a) whose last discharge from active service was under honorable conditions, and who (b) served in the army, navy, marine corps, coast guard, or air force of the United States for not less than 180 days active service; provided, however, that any person who so served and was awarded a service-connected disability or who died in such service under conditions other than dishonorable, shall be deemed to be a veteran notwithstanding his failure to complete 180 days of active service; provided a service-connected disability or who died in such service under conditions other than dishonorable, shall be deemed to be a veteran notwithstanding his failure to complete 180 days of active service.

"Wartime service" shall mean service performed by a "Spanish War veteran", a "World War I veteran", a "World War II veteran", a "Korean veteran", a "Vietnam veteran", a "Lebanese peace keeping force veteran", a "Grenada rescue mission veteran", a "Panamanian intervention force

veteran", a "Persian Gulf veteran", or a member of the "WAAC" as defined in this clause during any of the periods of time described herein or for which such medals described below are awarded.

"Spanish War veteran" shall mean any veteran who performed such wartime service between February fifteenth, eighteen hundred and ninety-eight and July fourth, nineteen hundred and two.

"World War I veteran" shall mean any veteran who (a) performed such wartime service between April sixth, nineteen hundred and seventeen and November eleventh, nineteen hundred and eighteen, or (b) has been awarded the World War I Victory Medal, or (c) performed such service between March twenty-fifth, nineteen hundred and seventeen and August fifth, nineteen hundred and seventeen, as a Massachusetts National Guardsman.

"World War II veteran" shall mean any veteran who performed such wartime service between September sixteenth, nineteen hundred and forty and December thirty-first, nineteen hundred and forty-six--, except that for the purposes of chapter thirty-one it shall mean all active service between the dates of September sixteenth, nineteen hundred and forty and June twenty-fifth, nineteen hundred and fifty.

"Korean veteran" shall mean any veteran who performed such wartime service between June twentyfifth, nineteen hundred and fifty and January thirty-first, nineteen hundred and fifty-five, both dates inclusive, and any person who has received the Korea Defense Service Medal as established in the Bob Stump National Defense Authorization Act for fiscal year 2003.

"Korean emergency" shall mean the period between June twenty-fifth, nineteen hundred and fifty and January thirty-first, nineteen hundred and fifty-five, both dates inclusive.

"Vietnam veteran" shall mean (1) any person who performed such wartime service during the period commencing August fifth, nineteen hundred and sixty-four and ending on May seventh, nineteen hundred and seventy-five, both dates inclusive, or (2) any person who served at least one hundred and eighty days of active service in the armed forces of the United States during the period between February first, nineteen hundred and fifty-five and August fourth, nineteen hundred and sixty-four; provided, however, that for the purposes of the application of the provisions of chapter thirty-one, it shall also include all active service between the dates May seventh, nineteen hundred and seventy-five and June fourth, nineteen hundred and seventy-six; and provided, further, that any such person who served in said armed forces during said period and was awarded a service-connected disability or a Purple Heart, or who died in said service under conditions other than dishonorable, shall be deemed to be a veteran notwithstanding his failure to complete one hundred and eighty days of active service.

"Lebanese peace keeping force veteran" shall mean any person who performed such wartime service and received a campaign medal for such service during the period commencing August twenty-fifth, nineteen hundred and eighty-two and ending when the President of the United States shall have withdrawn armed forces from the country of Lebanon.

"Grenada rescue mission veteran" shall mean any person who performed such wartime service and received a campaign medal for such service during the period commencing October twenty-fifth, nineteen hundred and eighty-three to December fifteenth, nineteen hundred and eighty-three, inclusive.

"Panamanian intervention force veteran" shall mean any person who performed such wartime service and received a campaign medal for such service during the period commencing December twentieth, nineteen hundred and eighty-nine and ending January thirty-first, nineteen hundred and ninety. "Persian Gulf veteran" shall mean any person who performed such wartime service during the period commencing August second, nineteen hundred and ninety and ending on a date to be determined by presidential proclamation or executive order and concurrent resolution of the Congress of the United States.

"WAAC" shall mean any woman who was discharged and so served in any corps or unit of the United States established for the purpose of enabling women to serve with, or as auxiliary to, the armed forces of the United States and such woman shall be deemed to be a veteran.

### None of the following shall be deemed to be a "veteran":

(a) Any person who at the time of entering into the armed forces of the United States had declared his intention to become a subject or citizen of the United States and withdrew his intention under the provisions of the act of Congress approved July ninth, nineteen hundred and eighteen.

(b) Any person who was discharged from the said armed forces on his own application or solicitation by reason of his being an enemy alien.

(c) Any person who has been proved guilty of willful desertion.

(d) Any person whose only service in the armed forces of the United States consists of his service as a member of the coast guard auxiliary or as a temporary member of the coast guard reserve, or both.

(e) Any person whose last discharge or release from the armed forces is dishonorable.

"Armed forces" shall include army, navy, marine corps, air force and coast guard.

"Active service in the armed forces", as used in this clause shall not include active duty for training in the army national guard or air national guard or active duty for training as a reservist in the armed forces of the United States.

## Any preference that may be granted by the MHA to a "Veteran" as defined herein may also be awarded to their surviving spouse following the death of such Veteran, provided such spouse has not remarried prior to the time of admission to the MHA's program.

The MHA will require verifiable U.S. government documents which establish that the applicant qualifies under the above definition; and

<u>The Working Family Preference (1 point)</u>: In order to bring higher income families into public housing, the MHA will establish a preference for "working" families, where the head, spouse, cohead, or sole member is employed at least 20 hours per week and has been so employed for a minimum of either eighteen (18) consecutive months preceding the family's selection from the waiting list or continuously from that time at which such claim of preference was made, whichever is greater, and such employment can be verified by the MHA by employer's third party certification(s). As required by HUD, families where the head, spouse, co-head, or sole member is a person age 62 or older, or is a person with disabilities, will also be given the benefit of the working preference [24 CFR 960.206(b)(2)].

<u>Relating to MHA tenant selection from the waiting list from among applicant families having the same</u> preference score, the date and time of application shall control.