

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 envelopes. Fold on the line, and addresses will fit in 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.*

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

\_\_\_\_\_

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

\_\_\_\_\_

☐ **Any other info you wish to tell HousingWorks?**

\_\_\_\_\_

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

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

HousingWorks Fax: 617-536-8561



○	Head of Household's FIRST Name
	Head of Household's MIDDLE Name
	Head of Household's LAST Name

HoH's SOCIAL SECURITY NUMBER	GENDER	HoH's DATE OF BIRTH
○	○	○

ETHNICITY Also provide your race at right!	RACE: Asian , Black, White, Native American, Pacific Islander, Multi-racial Do <b><u>NOT</u></b> write Spanish, Hispanic, Latino here – and do <b><u>NOT</u></b> write your country!
○	○

○ YOUR MOTHER'S MAIDEN NAME
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YOUR HOME TELEPHONE	SECOND TELEPHONE
○	
YOUR EMAIL ADDRESS	
○	

CURRENT ADDRESS <u>OR</u> LONG-TERM CONTACT ADDRESS
This is:
○
○

SECOND CONTACT ADDRESS
This is:
○
○

TOTAL HOUSEHOLD SIZE	# BEDROOMS	How much money does your family receive in a year?
○ # Adults # Children Total #	○	○ .0 0

INCOME SOURCES
○

MOBILE RENTAL ASSISTANCE, if any
○

REQUESTED ACCOMMODATIONS
○

SPECIAL CIRCUMSTANCES THAT <u>SOME</u> PROGRAMS MAY USE TO ASSIGN PRIORITY OR PREFERENCE
○

# Lottery Application for Moderate Income Units Continuum (Allston) and/or Van Ness (Fenway)

Due by 4 pm January 6<sup>th</sup>, 2016

All 13 units at Van Ness and all 42 units at Continuum are ready for occupancy now but applicants will not be able to move-in until April or May 2016 at the earliest as the lottery and certification process typically take a few additional months to complete. Van Ness and Continuum are smoke free communities.

**MINIMUM Income Requirements (approximate)** to afford the BRA rents (for households who do not currently have a subsidy like a Section 8 voucher) are: \$25,632 to lease a studio, \$29,904 to lease a 1-BR unit, \$34,176 to lease a 2-BR unit and \$38,448 to lease the one 3-BR unit at Continuum.

**MAXIMUM Household Income Limits:**

\$48,250\* (1 person), \$55,150\* (2 people), \$62,050\* (3 people), \$68,950\* (4 people), \$74,450\* (5 people), \$80,000\* (6 people)

**MAXIMUM Household Assets** are \$75,000 except for households where all members are age 65 or older who are allowed to have up to \$250,000 in assets. Please see page 7 for more details, particularly on how retirement accounts are counted.

**Rents are \$1,068\* (studio), \$1,246\* (1 BR), \$1,424\* (2 BR), \$1,602\* (the only 3BR unit is at Continuum and is disabled-accessible).** Rents for Van Ness do not include parking or the following utilities (which tenant will be responsible for paying): electricity (heat and hot water are electric), water and sewer, internet, cable and telephone.

Rents for Continuum do not include parking or any utilities. Tenant will be responsible for all utilities including hot water, cooking, heating, electricity, water, sewer, internet, cable and telephone.

**\* Rents and Income Limits are subject to change when the BRA publishes their annual rents and income limits.** This is not subsidized housing as tenants will be responsible for paying the full rent themselves (unless they already have a Section 8 voucher or similar). Households with subsidies can and should apply. **Please read the Information Packet for more details.**

## Directions:

**Applications (and proof of Boston preference, if applicable) must be completed and delivered by 4 pm January 6<sup>th</sup>, 2016.** If materials are mailed in, they cannot be postmarked after January 6<sup>th</sup>, 2016. Late applications and materials will not be accepted for the lottery. This application must be filled out entirely in order for your application to be processed. If a question does not apply to you, check "N/A". LEAVE NOTHING BLANK. **Send applications to:**

SEB

Re: Continuum & Van Ness

165 Chestnut Hill Ave, Unit #2

Brighton, MA 02135

Seb.housing@gmail.com

Fax: 617.782.4500

**DO NOT SEND THIS APPLICATION TO THE ON-SITE LEASING OFFICE.** Applications can be dropped off to the above Brighton address between 10 AM and 4 PM up on Jan 5<sup>th</sup> and Jan 6<sup>th</sup>, 2016. Applications may also be dropped off in person at the Honan-Allston Branch of the Boston Public Library (300 North Harvard Street, Allston) Tuesday Dec 15<sup>th</sup> (1 pm to 6 pm) and Wednesday Dec 16<sup>th</sup> (4 pm to 8 pm) and Saturday Dec 19<sup>th</sup> (10 AM to 2 PM).



## **BRA APPLICATION ADDITIONAL QUESTIONS**

**You must answer these questions in addition to all the questions on the following pages.**

**1. Please mark which development you are applying for. You may apply for BOTH developments using this same application.**

- ☐ Van Ness (in Fenway, 1335 Boylston Street)
- ☐ Continuum (in Allston, 199 N Harvard Street)
- ☐ Both Van Ness AND Continuum

**2. Do you or a member of your household need the features of a unit for the Hearing Impaired?**

- ☐ Yes                      ☐ No



**If you are applying for Boston resident preference, you must submit the documentation as directed by the question on page 5 of the attached application (see the section on “Boston Resident”).**

**Please continue to the next page of the application**



## Boston Redevelopment Authority

### Application for BRA Affordable Rental Units

**To be completed by Marketing Agent.**

**Development Name and address:** Van Ness, 1335 Boylston St. (in Fenway) and/or Continuum, 199 N Harvard Street (in Allston)

**Deadline:** In-person: 4 PM, Wednesday, January 6, 2016 or Postmarked January 16, 2016

**Location:** 165 Chestnut Hill Ave, #2, Brighton, MA 02135

**For Questions regarding this application, please contact the Marketing Agent directly, [seb.housing@gmail.com](mailto:seb.housing@gmail.com) 617-782-6900**

Applicant's Name: \_\_\_\_\_

Address: \_\_\_\_\_

City/State: \_\_\_\_\_ Zip: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Work Phone: \_\_\_\_\_

Cell Phone: \_\_\_\_\_ Employer: \_\_\_\_\_

Email address: \_\_\_\_\_

Applicant's Name: \_\_\_\_\_

Address: \_\_\_\_\_

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

Home Phone: (\_\_\_\_\_) \_\_\_\_\_ Work Phone: (\_\_\_\_\_) \_\_\_\_\_

Cell Phone: (\_\_\_\_\_) \_\_\_\_\_ Employer: \_\_\_\_\_

Email address: \_\_\_\_\_ @ \_\_\_\_\_

(Please note: the use of the singular "I" or "my" shall include the plural in the case of more than one prospective tenant.)



## **INCOME: “HOUSEHOLD INCOME” DEFINED**

Immediate family members of any developer or “Applicant” (as the contracting party is sometimes referred to) are prohibited from entering any lottery held for any Boston Redevelopment Authority Inclusionary/Affordable housing unit. Immediate family members of any Marketing Agent hired by developers/Applicants are prohibited from entering any lottery for housing units at the project for which the Marketing Agent has been hired. “Immediate family” shall be defined as it is in Massachusetts General Law c.268A, the Conflict of Interest Law. However, this policy may be further expanded to include a broader degree of kinship, and may be refined to encompass a broader range of parties other than a named developer or named applicant.

If no lottery is held because there were not a sufficient number of applications submitted, the same rules apply (i.e., the same rules apply to a “First-Come-First-Served situation”).

Please fill out the chart below with income information for the prospective tenants and all members of the household.

“**Household**” shall mean all persons whose names appear on the lease, and also all persons who intend to occupy the housing unit as their permanent primary residence. For the purpose of **income determination**, persons over the age of 18 who are not Immediate Family as defined by Massachusetts General Law c.268A and do not have employment income as well as minors/dependents who are not listed on the most recent tax return and do not have legal custody/guardianship paperwork will not be included as part of the household for income eligibility and certification purposes. Legally married couples shall both be considered part of the household, even if separated.

The incomes of *all* household members will be included, with one exception:

- Income from employment is not counted for household members under the age of 18.

The BRA reserves the right to **request additional** information at any point in the Income Certification process. Income Information can include but is not limited to the source of income and the estimated current annualized gross amounts of income, from any source, both taxable and non-taxable income, such as:

1. Wages, salaries, tips, overtime, bonuses, commissions, fees, credits, sick pay, deferred income, and any other compensation received for personal services;
2. Dividends, interest, annuities, pensions, IRA or other retirement accounts distributions, social security benefits;
3. Income received from: trusts, business activities including partnership income and Schedule K-1 information, corporate distributions, rental or lease income, investments, and any other income or gains from any asset;
4. Legally documented alimony & support payments, disability payments & workers compensation.
5. All assets

### **Please note:**

1. Gross income from current wages, salaries, tips, etc. is the full amount, before any deductions, and is the amount used to determine estimated current annualized income. The BRA does not use income as reported on your W-2 to determine *estimated current annualized income*.
2. Only income which is reported to the IRS or which is evidenced on official pay stubs and/or benefit letters may be considered as income. Unemployment compensation is not considered income for eligibility purposes unless applicant has a 2 year history of seasonal employment along with receipt of unemployment compensation.
3. Full-time undergraduate students age 18 and over are **not** eligible **unless** they are a co-applicant with an immediate family member who is a non-full-time student. The BRA’s determination of full-time student status will be final.
4. Full-time graduate students without income are **not** eligible **unless** they are a co-applicant with an immediate family member who is a non-full-time student.

5. If you are *substantially* below the income limit, the BRA reserves the right to request additional documentation to determine your ability to lease the unit.

NAME A.	AGE B.	TENANT OR OCCUPANT C.	RELATIONSHIP TO TENANT D.	ESTIMATED CURRENT ANNUALIZED GROSS INCOME E.

Do you currently receive or do you have a Section 8 mobile voucher or certificate? (Agent does not discriminate based on source of income. This question is asked for the sole purpose of determining ability to pay rent. )

☐ Yes

☐ No

If yes please provide copy of current voucher from appropriate Housing Authority

#### **HOUSEHOLD ASSETS:**

Please complete the chart below and attach supporting documentation (no more than 60 days old) for all assets held by each household member over the age of 18. Assets include but are not limited to the following: Checking or savings accounts, CDs, money market accounts, Treasury bills, stocks, bonds, securities, trust funds, gifts, pensions, IRAs, Keoghs, other retirement accounts, real estate, rental property, other real estate holdings, all property held as an investment, and safe deposit box contents (include the value). All accounts must include complete statements with all pages and list dividend and interest information if applicable.

#### **Asset Limitation:**

- (A) For a household at or below the 80% of the area median income category, the combined total assets of the household cannot exceed \$75,000. For a household above 80% of the area median income category, the combined total assets of the entire household cannot exceed \$100,000. Government-approved college savings accounts and qualified retirement accounts, such as IRAs, Keogh plans, pension plans, and similar that have been established at least six (6) months prior to applying for an affordable unit, are exempt from consideration as part of the household's total assets unless they are being liquidated.
- (B) Applicants applying for affordable rental units can exceed the set forth asset limitations if all of the household members are 65 years of age or older. In this instance, a household can have combined assets, **including all retirement funds of \$250,000.**
- (C) **If a household has disposed of an asset for less than the fair market value during the two years preceding the filing of an application for affordable housing, then the BRA will count the asset as belonging to the applicant and will use its fair market value as part of the asset calculation.**

Please also note that the information provided above only serves to determine for which units an applicant may qualify. **Once a tenant is selected, formal income verification will be done by the developer or its agent in conjunction with the BRA.**



Account Holder's Name	Balance	Type Of Account or Asset	Account Number	Date Account Opened

\*\*\*\*Disclosure: If it is determined that all of an applicant's assets were not disclosed at the time of application, an applicant can be denied approval.

\*\*\*\*Households that are determined to be ineligible cannot restructure their finances and reapply. There will be a two year waiting period to reapply for an affordable unit in the same income category after an applicant is deemed ineligible for being over the income/asset limit.

\*\*\*\*An applicant or household currently residing in an affordable unit who is not in compliance with the covenant for affordable unit requirements or income/asset limit for such affordable unit may not be eligible as an applicant for a different affordable Unit. The Authority reserves the right to deny approval of such applicant or household.

**PREFERENCE INFORMATION:**

The following are the preferences attached to this project. Lottery participants who qualify for these preferences will be ranked higher than those that do not.

**“Disabled Household”** shall mean applicant with a disabled household member who is in need of an accessible unit

Adaptable units are available to persons with mobility, hearing, or vision impairments that substantially limit one or more major life activities. This shall include but not be limited to those who have the inability to walk, difficulty walking, hearing difficulties, lack of coordination, and difficulty interpreting and reacting to sensory data.

Do you or a member of your household need an accessible unit?

☐ Yes

☐ No

If yes, you will be required to provide supporting documentation.

**“Boston Resident”** shall mean any individual whose permanent principal residence, where he or she normally eats, sleeps and maintains his or her normal personal and household effects, is in the City of Boston.

Are you seeking preference as a resident of the City of Boston?

- ☐ Yes  
☐ No

If yes, attach proof of residency – copy of two (2) utility bills 1 from each utility company in your name dated within the last 60 days; e.g., (1)electric, (1) oil, (1) gas, or (1) telephone.

If utility bills cannot be provided the following documentation **must** be provided: current signed lease **AND EITHER** proof of voter registration from City of Boston Election Department **OR** proof of automobile insurance (showing the address where the car is garaged). An official letter from a shelter may also be accepted in lieu of a current signed lease.

**Household Size:** Households with at least one person per bedroom occupying the unit have preference over household with fewer than one person per bedroom.

My household size is \_\_\_\_\_

**Bedroom Size Information:** For which bedroom size are you applying? **Choose one only.**

- ☐ Studio  
☐ 1 bedroom  
☐ 2 bedroom  
☐ 3 bedroom – **The only three bedroom unit is at Continuum and it is an accessible unit with a preference for households with mobility impairment. There are not any 3 bedroom units in Van Ness.**

**The following documents are required and must be attached to this application if you are seeking a Boston Resident preference in the lottery:**

- ☐ Copies of 2 utility bills

**Please be aware that the following documents will be required if you are selected as a prospective tenant through the lottery:**

- Copies of the **two** most recent consecutive **pay stubs** for each household members 18 years or older
- Copies of current **supporting documentation** for all **assets** held by each household member over the age of 18 (e.g., bank statements, mutual fund statements, retirement/ 401(k) statements etc.)
- Copies of **two years** most recent **federal** income tax returns (including all attachments, amendments, **W-2 forms**, and any income reported on form 1099) for each household member 18 years or older
- Copies of **two years** most recent **state** income tax returns (including all attachments and amendments) for each household member 18 years or older
- A year-to-date profit and loss statement for every member of the household 18 years old or older who is self-employed

**Marketing Agents/ Property Manager's Signature:**

\_\_\_\_\_  
Marketing Agent's Signature

\_\_\_\_\_  
Date

**Please read each item below carefully before you sign.**

1. I hereby certify that the information provided in this preliminary application is correct to the best of my knowledge.
2. I understand that this is a preliminary application and the information provided **does not** guarantee housing. Additional information and verifications will be necessary to complete the income certification process, which will take place if the marketing agent offers me a unit that I find acceptable.
3. I understand that any material change in the income or assets of my household that occurs after the submission of this application may make me ineligible for affordable housing.
4. Co-signers and Guarantors **are not** permitted unless they are co-tenants who will reside in the unit.
5. I understand that approval from any source other than the BRA **does not guarantee** BRA income certification approval.
6. I understand that I may submit only one application per household and that submitting duplicate applications will disqualify my household from the lottery.

\_\_\_\_\_  
Applicant's Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Applicant's Signature

\_\_\_\_\_  
Date

The information provided in this document is intended for **confidential purposes** used only for internal verification and confirmation and is exempt from public disclosure to the fullest extent permitted by law.

**Race and Ethnic Data  
Reporting Form**U.S. Department of Housing  
and Urban Development  
Office of HousingOMB Approval No. 2502-0204  
(Exp. 06/30/2017)

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**Name of Property****Project No.**

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**Name of Owner/Managing Agent****Type of Assistance or Program Title:**

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**Name of Head of Household****Name of Household Member****Date (mm/dd/yyyy):** \_\_\_\_\_

<b>Ethnic Categories*</b>	<b>Select One</b>
Hispanic or Latino	
Not-Hispanic or Latino	

<b>Racial Categories*</b>	<b>Select All that Apply</b>
American Indian or Alaska Native	
Asian	
Black or African American	
Native Hawaiian or Other Pacific Islander	
White	
Other	

**\*Definitions of these categories may be found on the reverse side.****There is no penalty for persons who do not complete the form.**

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**Signature**

---

**Date**

**Public reporting burden** for this collection is estimated to average 10 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. This information is required to obtain benefits and voluntary. HUD may not collect this information, and you are not required to complete this form, unless it displays a currently valid OMB control number.

This information is authorized by the U.S. Housing Act of 1937 as amended, the Housing and Urban Rural Recovery Act of 1983 and Housing and Community Development Technical Amendments of 1984. This information is needed to be in compliance with OMB-mandated changes to Ethnicity and Race categories for recording the 50059 Data Requirements to HUD. Owners/agents must offer the opportunity to the head and co-head of each household to "self certify" during the application interview or lease signing. In-place tenants must complete the format as part of their next interim or annual re-certification. This process will allow the owner/agent to collect the needed information on all members of the household. Completed documents should be stapled together for each household and placed in the household's file. Parents or guardians are to complete the self-certification for children under the age of 18. Once system development funds are provided and the appropriate system upgrades have been implemented, owners/agents will be required to report the race and ethnicity data electronically to the TRACS (Tenant Rental Assistance Certification System). This information is considered non-sensitive and does not require any special protection.

## Instructions for the Race and Ethnic Data Reporting (Form HUD-27061-H)

### A. General Instructions:

This form is to be completed by individuals wishing to be served (applicants) and those that are currently served (tenants) in housing assisted by the Department of Housing and Urban Development.

Owner and agents are required to offer the applicant/tenant the option to complete the form. The form is to be completed at initial application or at lease signing. In-place tenants must also be offered the opportunity to complete the form as part of the next interim or annual recertification. Once the form is completed it need not be completed again unless the head of household or household composition changes. There is no penalty for persons who do not complete the form. However, the owner or agent may place a note in the tenant file stating the applicant/tenant refused to complete the form. **Parents or guardians are to complete the form for children under the age of 18.**

The Office of Housing has been given permission to use this form for gathering race and ethnic data in assisted housing programs. Completed documents for the entire household should be stapled together and placed in the household's file.

1. The two ethnic categories you should choose from are defined below. You should check one of the two categories.

1. **Hispanic or Latino.** A person of Cuban, Mexican, Puerto Rican, South or Central American, or other Spanish culture or origin, regardless of race. The term "Spanish origin" can be used in addition to "Hispanic" or "Latino."
2. **Not Hispanic or Latino.** A person not of Cuban, Mexican, Puerto Rican, South or Central American, or other Spanish culture or origin, regardless of race.

2. The five racial categories to choose from are defined below: You should check as many as apply to you.

1. **American Indian or Alaska Native.** A person having origins in any of the original peoples of North and South America (including Central America), and who maintains tribal affiliation or community attachment.
2. **Asian.** A person having origins in any of the original peoples of the Far East, Southeast Asia, or the Indian subcontinent including, for example, Cambodia, China, India, Japan, Korea, Malaysia, Pakistan, the Philippine Islands, Thailand, and Vietnam.
3. **Black or African American.** A person having origins in any of the black racial groups of Africa. Terms such as "Haitian" or "Negro" can be used in addition to "Black" or "African American."
4. **Native Hawaiian or Other Pacific Islander.** A person having origins in any of the original peoples of Hawaii, Guam, Samoa, or other Pacific Islands.
5. **White.** A person having origins in any of the original peoples of Europe, the Middle East or North Africa.