

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
○

Office Use Only:	App. Rec'd Date _____	Postmark Date _____	Rec'd By _____
Applicants Qualify For:	Studio _____	One-Bedroom _____	



# **Application for Affordable Year-round Housing Seashore Point**

## **Studio & One-Bedroom Apartments**

RETURN COMPLETED APPLICATION WITH ALL ATTACHMENTS TO:  
SEASHORE POINT, 100 ALDEN STREET, PROVINCETOWN, MA 02657

### **Section 8 and Housing Voucher Holders May Inquire**

Applicants must be at least 62 years of age and their household income may not exceed 80% of the Barnstable County median income guidelines as defined by the US Department of HUD.

### **FY 2016 Income Limits Provincetown, Massachusetts**

Household size of 1: Maximum Income Limit \$46,100

Household size of 2: Maximum Income Limit \$52,650

### **2016 Monthly Rental**

**Studio \$1,100**

**One-Bedroom \$1,250**

## HEAD OF HOUSEHOLD INFORMATION:

APPLICANT NAME \_\_\_\_\_ SOC. SEC. # \_\_\_\_\_  
RESIDENTIAL ADDRESS \_\_\_\_\_  
TOWN / STATE \_\_\_\_\_ ZIP \_\_\_\_\_  
MAILING ADDRESS \_\_\_\_\_  
TOWN \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_  
HOME PHONE \_\_\_\_\_ WORK PHONE \_\_\_\_\_  
CELL PHONE \_\_\_\_\_ E-MAIL ADDRESS \_\_\_\_\_

## ELIGIBILITY REQUIREMENTS

### PRELIMINARY DETERMINATION OF INCOME ELIGIBILITY

Evidence of income eligibility must be provided with this application:

- IRS Form 1040 Federal Income Tax Return for 2014; if you have not filed taxes in the last 6 months or are not required to file please explain.
- Please provide documentation of anticipated income, Social Security, SSDI, Alimony, Death benefits, pensions, or W-2 wages from employment.
- Signed Notarized Statement of Current Anticipated Annual Income (last page of this application).

### PRELIMINARY DETERMINATION OF PERSONAL ASSETS LIMITATION

Provide documentation of all personal assets held in your name or in trust for your benefit. This includes checking and savings accounts, investment accounts, certificates of deposits (CDs), stocks, bonds, mutual funds, real estate owned, limited partnership investments, annuities, pensions, insurance policies, ownership of shares in a corporation or cooperative, cash on hand - in safe deposit boxes, or in mattresses.

List all assets and their value on the form on the last page of the application, even if it does not generate income. If assets are held in restricted accounts for retirement purposes identify them as such.

**NOTE: APPLICANTS SELECTED THROUGH THE LOTTERY PROCESS ARE SUBJECT TO FURTHER CONFIRMATION OF ELIGIBILITY, THIRD PARTY INCOME AND ASSET VERIFICATION, CRIMINAL RECORDS CHECKS AND OTHER DOCUMENTATION AS PART OF FINAL DETERMINATION OF ELIGIBILITY**

### PRELIMINARY DETERMINATION OF HOUSEHOLD SIZE

- An individual may only be part of one household in this application process.
- Single person households may apply for a studio or a one-bedroom apartment, two-person households may **only** apply for a one-bedroom apartment.
- Applicant must certify no other household members are anticipated or intended to be added to the household (see certification page). Changes in current household composition will require further verification if selected in the lottery process.
- Applicant has 3 days to accept or deny initial lottery decision and must remove their name from that lottery but may choose to remain on a waiting list for future units.

☐

**Total Number in Applicant Household.**

## PRELIMINARY DETERMINATION OF LOCAL PREFERENCE STATUS

The Provincetown Board of Selectmen defines Local Preference as an individual who:

- Is a current resident of the Town of Provincetown
- Is an employee of the Town of Provincetown
- Is an employee of a Provincetown business
- Households with children attending Provincetown schools
- Subject to appropriate and acceptable documentation, a Provincetown resident may also be defined as an individual who is, or who has been, displaced from his or her home in Provincetown due to condominium conversion or the sale of his or her unit by the property owner

Please check mark and answer the following if they apply to any member of the household:

☐ I presently live in Provincetown. If so, how long? \_\_\_\_\_ Years \_\_\_\_\_ Months

☐ I presently work for the Town of Provincetown. If so, how long? \_\_\_\_\_ Years \_\_\_\_\_ Months

Name of Department: \_\_\_\_\_ Contact Telephone: \_\_\_\_\_

☐ I presently work for a business operating in Provincetown. If so, how long? \_\_\_\_\_ Years \_\_\_\_\_ Months

Name of business: \_\_\_\_\_ Contact Telephone: \_\_\_\_\_

☐ I was displaced from my/our home in Provincetown due to a condominium conversion or the sale of my/our unit by the property owner within the past \_\_\_\_\_ years.

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

Displaced due to: ☐ Condominium conversion ☐ Sale of home by property owner

## MINORITY STATUS

A household has minority status if their heritage is one of the following:

- |   |   |
|---|---|
| <input type="checkbox"/> Native American/Alaskan Native | <input type="checkbox"/> Asian            |
| <input type="checkbox"/> Pacific Islander               | <input type="checkbox"/> African American |
| <input type="checkbox"/> Hispanic Latino                | <input type="checkbox"/> Cape Verdean     |

## PRIMARY DOMICILE- SOLE DOMICILE

The certifications at the end of the application include your certification that the apartment will be the primary and sole residence of the household. If you are selected through the lottery process to become a tenant and Provincetown is not maintained as your sole domicile you will be in violation of the affordable housing deed restriction.

## PERSONAL STATEMENT

Please explain why you are interested in living at Seashore Point.

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## PERSONAL REFERENCES

Please provide the names, addresses and phone numbers of three people who know you and members of your household (excluding relatives). Include at least one neighbor.

Name	Address	Phone	Relationship
<hr/>	<hr/>	<hr/>	<hr/>
<hr/>	<hr/>	<hr/>	<hr/>
<hr/>	<hr/>	<hr/>	<hr/>

**Note:** As part of the application review process, background checks will be conducted to determine if the prospective tenants have a history of criminal or anti-social behavior that could be detrimental to the stability of the community.

If there are circumstances in your past that might detract from your application, please provide an explanation below.

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## STATEMENT OF CURRENT ANTICIPATED ANNUAL INCOME

Income is an anticipation of all combined income from all Household members over the next 12 months.

<b>PART I. GROSS ANNUAL INCOME (USE ANNUAL AMOUNTS)</b>				
Applicant or Co-Applicants	(A) Gross W-2 Wages, Tips and Commissions, and/or Net Self-Employment Income	(B) Social Security and Pensions	(C) Unemployment and Public Assistance	(D) Other Income (Alimony, Annuities, Insurance Policies, Death Benefits, etc.)
Sub-totals				

Add sub-totals from (A) through (D)

TOTAL INCOME (E)

- Wages, tips and commissions for applicants are gross wages
- Self employment is net employment income which can never be less than “0”
- If you work seasonally and anticipate collecting unemployment during part of the year, you must anticipate an unemployment amount.
- Alimony includes regular contributions or gifts received from organizations or from persons not residing with the household.
- Exclusions of income include:
  1. Medical expense re-imbursements
  2. Gifts: temporary, nonrecurring, or sporadic income
- Income from Assets must be counted even if the applicant does not directly receive the income.
- Assets may not exceed \$150,000

The following web site is a useful resource to help answer questions concerning anticipated income and assets:

<http://www.hud.gov/offices/cpd/affordablehousing/training/calculator/definitions/part5.cfm> .

Applicant or Co-Applicants	(F) Type of Asset (checking, savings, etc.)	(G) Cash Value of Asset	(H) Annual Income from Asset
Sub-totals			

Add sub-totals from (F) through (H)

TOTAL INCOME FROM ASSETS (I)

Add sub-totals (E) plus (I)

TOTAL INCOME (J)

## HOUSEHOLD CERTIFICATION & SIGNATURES

I understand that eligibility to become a tenant is subject to income limits based on household size and based on 80% of Barnstable County median income as described in the application. The information in this application and the information provided in attachments will be used to determine income eligibility. I have provided accurate information of current anticipated annual income. I certify that no other income is anticipated and no additional household members are intended to be added to the household.

I certify that, should I be selected in the lottery to become a tenant at Seashore Point, my sole domicile, the address where I will reside year round, and the address of my voter registration (if any) will be Seashore Point, Provincetown. This housing is not intended for seasonal use.

I understand that selection through the lottery does not guarantee that I will become a tenant. Prior to final approval of residency at Seashore Point, all information included in the application will be reviewed in detail and eligibility must be verified. If selected through the lottery process, I authorize release of confidential information from employers, financial institutions, and their representatives, personal references, and from police records relating to criminal convictions, if any, including minor dependents. I hereby authorize you to verify any and all information contained in this application and release all concerned parties from any liability in connection with any information they may provide.

I hereby certify that responses to the questions on the application and information provided in attachments are accurate and true to the best of my knowledge and belief. I have not knowingly withheld any fact or circumstance which would, if disclosed, affect my application unfavorably. False, misleading or incomplete information may result in disqualification.

I understand that, should I be chosen as a lottery winner, the apartment selection will be determined by Seashore Point.

\_\_\_\_\_  
Applicant

\_\_\_\_\_  
Date

Acknowledged by: \_\_\_\_\_

\_\_\_\_\_  
*Notary Public*  
*My commission expires:*

\_\_\_\_\_  
*Date*

\_\_\_\_\_  
Applicant

\_\_\_\_\_  
Date

Acknowledged by: \_\_\_\_\_

\_\_\_\_\_  
*Notary Public*  
*My commission expires:*

\_\_\_\_\_  
*Date*