

Full Name:
Address1:
Address2:
City State Zip:
Email:
Case Manager Email:

THIS SECTION FOR APPLICANT:

Date Generated:

← Mail this form to the address at left.

Dear Fold on this line _____
I am applying to the following waitlist, which I believe is open:

WAITLIST ADMINISTRATOR: Discard this Mailing Page

IF REJECTING THIS APPLICATION, please email, mail, or fax the form below to HousingWorks. We will pass it on to the applicant. Include this page so we know who the application is for!

We will also update our system, so the changed status of your waitlists will reach many thousands of applicants and their housing advocates. Also, you will boost your Fair Housing and ADA compliance exponentially!

support@housingworks.net
HousingWorks
P.O. Box 231104
Boston, MA 02123
617-536-8561 fax

- ☐ This waitlist is closed. The only waitlists open at present are:

- ☐ This is not the right application. We have enclosed the correct application.
- ☐ You do not appear to qualify for this property, because: _____
Name of Waitlist Administrator *optional* _____
Phone of Waitlist Administrator *optional*: _____ - _____ - _____ X _____

Date Time Received. Application will be stamped to show when it was received:

Resale Application

Development: _____

The Maximum Income Limits for Households are as follows:

1 Person - \$52,850

2 Person - \$ 60,400

3 Person - \$ 67,950

Households cannot have more than \$275,000 in property equity or combined assets.

Applicant General Information

Name _____

Address _____

City _____ State _____ Zip Code _____

Home Telephone Number _____

Work Telephone Number _____

Number of persons in household _____

Email address: _____ Date: _____

Household Information

Please list ALL household members, regardless of age, who will occupy the affordable home:

Name	Date of Birth	Relationship
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_____	_____	_____
-------	-------	-------

_____	_____	_____
-------	-------	-------

_____	_____	_____
-------	-------	-------

_____	_____	_____
-------	-------	-------

_____	_____	_____
-------	-------	-------

_____	_____	_____
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First-Time Homebuyers

Have you owned a home or joint interest in a home in the past three years from the date of this application? ☐ YES ☐ NO

If YES, please explain:

If you are working with a Real Estate Agent, please provide contact information:

Optional Section: Please check off the appropriate race category for each household member. This information will be used only in accordance with New England Fund guidelines to ensure affirmative marketing requirements.

	Head of Household	Co-Applicant	Dependent(s)
Native American/Alaskan Native			
Asian/Pacific Islander			
African American			
Hispanic/Latino			
Cape Verdean			
White/Non-Minority			
Other			

Employment Status

Applicant's Name:

Occupation:

Present Employer

Contact Information:

Date of Hire:

Name & Title of Supervisor:

Annual Gross Salary:

Co-Applicant's Name: _____
Occupation: _____
Present Employer _____
Contact Information: _____

Date of Hire: _____
Name & Title of Supervisor: _____
Annual Gross Salary: _____

If other adult household members are employed, please attach a separate sheet with their current employment information.

Income Information

Please complete the following information for all persons receiving income in the household at the time of applicant. Household income includes gross wages, retirement income (if drawing on it for income), business income, veteran's benefits, alimony/child support, unemployment compensation, social security, pension/disability income, supplemental second income and dividend income.

In addition to completing the following, please attach all income documentation including:

- Five most recent pay stubs
- Social security documentation
- Pension documentation
- Entire Federal Tax Returns for the last 3 years
- W2s for all household member for the most recent year

Applicant

Salary: \$ _____
Interest & Dividends \$ _____
Alimony/Child Support \$ _____
Other Income & Source \$ _____
TOTAL INCOME: \$ _____

Co-Applicant

Salary: \$ _____
Interest & Dividends \$ _____
Alimony/Child Support \$ _____
Other Income & Source \$ _____
TOTAL INCOME: \$ _____

If there are other adult household members who are earning income, please attach a separate sheet with their current income information.

Asset Information

Please complete the following Asset Information for all household members. Assets include liquid assets, such as cash in checking or savings accounts, stocks, bonds and other forms of capital investments, excluding equity accounts in homeownership programs or state assisted public housing escrow accounts.

In addition to completing the following, **please attach all asset documentation such as bank statements, brokerage statements, etc.**

Applicant

Name on Account: _____
Bank Name: _____
Bank Address: _____
Savings Acct#/Amount: _____
Balance: _____
Checking Acct#/Amount: _____
Balance: _____
Other Accounts: _____

Gift amounts to be
Received for down payment: \$ _____

Source: _____

Co-Applicant

Name on Account: _____
Bank Name: _____
Bank Address: _____
Savings Acct#/Amount: _____
Balance: _____
Checking Acct#/Amount: _____
Balance: _____
Other Accounts: _____

Gift amounts to be
Received for down payment: \$ _____

Source: _____

If there are other adult household members who have assets, please attach a separate sheet with their current asset information.

Applicant Signature

Co-Applicant Signature

Date

Attachments: Complete Application Checklist
Disclosure Form
Deed Rider
Deed Rider Signature of Understanding

Application Checklist

**Your application is not considered COMPLETE without the following documents.
Incomplete applications will not be reviewed.**

- ☐ Completed and signed application
- ☐ All income documentation including 5 most recent pay stubs, entire federal tax returns for the last three (3) years, W2s from the most recent year, and any additional income documentation (such as social security or pension income)
- ☐ All asset information including checking and savings account bank statements, evidence of the value of CDs, brokerage statements, etc.
- ☐ A pre-approval letter from a bank or mortgage company indicating your household qualifies for a mortgage sufficient enough to purchase a home at this development
- ☐ Signed Disclosure Form
- ☐ Signed Signature of Understanding for the Deed Rider

Please submit the complete application to:

**Attention: Mary DiDomenico
ERA Key Realty Services
16 E. Main Street
Milford, MA 01757**

508-478-7777 Cell: 508-395-0463

Disclosure Form

Development: _____

Please check and fill in the following items that apply to you

1. I/We certify that our household size is _____ persons.
2. I/We certify that our annual household income is _____. Income from all family members has been included.
3. I/We certify that my/our total liquid assets do not exceed \$275,000 the asset limit. (combine property equity or liquid assets cannot exceed \$275,000)
4. The household size listed on the application form includes only and all the people who will be living in the residence.
5. I/We certify that the information contained in this application is true and accurate to the best of my/our knowledge and belief under full penalty of perjury. I/We understand that perjury will result in dis-qualification from further consideration.
6. I/We understand that by submitting this application it does not guarantee that I/we will be able to purchase this property. I/We understand that all application data will be verified and additional financial information will be required and reviewed in detail prior to purchasing the unit.
7. I/We understand that it is my/our obligation to secure the necessary mortgage for the purchase of the home and that all expenses, including closing costs and down payments, are my/our responsibility.
8. I/We further authorize CHAPA to verify any and all income and assets and other financial information, to verify any and all household, resident location and workplace information. I/we direct any employer, landlord or financial institution to release any information to CHAPA, as the project's monitoring agency, for the purpose of determining income eligibility for _____ Development.
9. I/We have completed an application and have reviewed and understand the process that will be used to sell the available affordable homes at _____ Development.

Applicant Signature

Date

Co-Applicant Signature

Date

Deed Rider Signature of Understanding

Development: _____-

Deed Rider

Affordability and Resale Restrictions

I/We have read the resale restrictions for _____ Development and agree to the restrictions. I/We also understand that, if selected to purchase this unit, a full copy of the Deed Rider will be provided or I can obtain a recorded copy at the registry of Deeds.

Applicant

Date

Co-Applicant

Date