2:	← APPLICANT COMPLETE THIS SECTION
e Zip:	Use Adobe Acrobat Reader and print this application to
	"Custom Scale - 100%". Then, both addresses will appear in the windows of a #1
anager Email:	double-window envelope, saving you time.
	Mail this application to the address at left.
	Do not fax!
Date Generated:	Fold on th
THE CECTION IC FOR MAITH	T A DRAINICTD A TODG ONLY
THIS SECTION IS FOR WAITLIS	ST ADMINISTRATORS ONLY:
LANDLORD: IF REJECTING THIS APPLICATION, please email,	support@bousingworks not
LANDLORD: IF REJECTING THIS APPLICATION, please email, mail, or fax the form below to HousingWorks. We will forward it on to the applicant. Include this page so we	support@housingworks.net
LANDLORD: IF REJECTING THIS APPLICATION, please email, mail, or fax the form below to HousingWorks. We will forward it on to the applicant. Include this page so we know who the application is from!	support@housingworks.net HousingWorks P.O. Box 231104
LANDLORD: IF REJECTING THIS APPLICATION, please email, mail, or fax the form below to HousingWorks. We will forward it on to the applicant. Include this page so we know who the application is from! We will also update our system, so the changed status of your waitlists will reach thousands of applicants and their	support@housingworks.net HousingWorks P.O. Box 231104
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Full Name: Address1:

HEAD OF HOUSEHOLD'S (HoH) FIRST	NAME ONLY, type or write	in the row below:			
HEAD OF HOUSEHOLD'S COMPLETE N	MIDDLE NAME:				
HEAD OF HOUSEHOLD'S LAST NAME	/EY: BAE7 G∩N7AI E7\:				
HEAD OF HOUSEHOLD'S LAST NAIME	(LX. BALZ GONZALLZ).				
DOES THE HOH HAVE A SOCIAL SECURITY NUME	BER or ITIN? Yes No	DATE OF B	IRTH	GENDER	
Enter the last four digits of your SSN or ITI	N	Type birthyear first, using dashes	YYYY-MM-DD	F M T-MTF T-FTM	
FTHNICITY: /History is an New History is Cl	iont Defined) PACE. (Asian	. Dlack White Native American	. Docific Islandor Multir	racial Client Refused de not veite (Cnanich)
ETHNICITY: (Hispanic or Non-Hispanic, Cl	ient Refused) RACE: (Asiai	i, Black, Wille, Native American	i, Pacific Islander, Multi-r	racial, Client Refused – do not write S	Spanisn)
REQUESTED ACCOMMODATIONS: Do	you need any of these?	□ = X □ I don't ne	ed any of the accomm	nodations listed below	
\square Fully Accessible Wheelchair Unit	☐ Bathroom modificati	ons 🔲 Vision Impa	ired Unit	☐ Need an Interpreter	
\square No-Steps unit (elevator to any floo	or) Hearing I	mpaired Unit		☐ Domestic Violence Victim	n
\square First-Floor unit only	Unit desi	gned for Environmental Alle	rgies	Live-In Aide or PCA	
HEAD OF HOUSEHOLD'S CAREER STAG	GE: Employed	Unemployed	Retired F1	T Student PT Student	
ANY VETERANS IN YOUR HOUSEHOLD	Yes I	No			
PERMANENT MOBILE RENTAL ASSIST	ANCE, if any - you must sel	ect one of these answers			
I do not have mobile rental assistance	Mobile Section 8 vo	oucher MRVP	AHVP VAS	iH or similar	
CRIMINAL RECORD AND SEX OFFEND	ER INFORMATION				
Head of Household: Any Felony,	/Conviction?	No	Any Misdemeanor Conv	viction? Yes No	
Other HH Members: Any Felony	Convictions?	No	Any Misdemeanor Conv	viction? Yes No	
Is anyone in HH subject to a lifetime sex	offender registration in any sta	ate? 🗌 Yes 🔲 No			
ANY PETS: Yes No	Breed, Size, Weight,				
ANY PETS: Yes No HOUSEHOLD SIZE AND COMPOSITION			ANNUAL INC	OME DOCUMENTED DISA	ABILITY?
	N:	tal#in Household	ANNUAL INCO		ABILITY?
HOUSEHOLD SIZE AND COMPOSITION ← # Adults ← # Childi	N:	_	\$		No
HOUSEHOLD SIZE AND COMPOSITION ← # Adults ← # Childi	Homeless Housing Los	s 14 days Fleeing Dom.	\$ Violence At risk o	.00 Yes Northomelessness Stably House by Pandemic by fire/flood/earthqua	No ed ake
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Management Use Only:	
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MANAGEMENT WILL PROVIDE HELP IN REVIEWING THIS DOCUMENT. IF NECESSARY, PERSONS WITH DISABILITIES MAY ASK FOR THIS APPLICATION IN LARGE PRINT TYPE, OR OTHER ALTERNATE FORMATS.

Sycamore on Main 121 Main Street Brockton MA 02301

PRELIMINARY RENTAL APPLICATION

Phone #: (508) 434-4072

TDD: (800) 545-1833 x945

Fax #: (774) 776-2578

DATE:

How did you hear about us? via the HousingWorks.net website

APPLICATION FOR ADMISSION

Note: Please fill in all sections completely. Failure to do so will result in processing delays or rejection of your application. Should you need help in completing this application, please contact the Rental Office. Please do NOT use white out.

Applicant:	Tel #:	Email	:
Present Address:			
Street	City	State	Zip
Race: (Optional Section: Information will	be used for fair housing prog	rams only, as required by S	tate and Federal Laws.)
[] American Indian/Alaskan N	ative	[] Asian or Pa	acific Islander
[] Black (not of Hispanic original	n) [] Hispanic	[] White (not	of Hispanic origin)
CHOOSE ONLY ONE SIZE O	F APARTMENT:		
One Bedroom [] Two Bed	Iroom [] Three Be	edroom[]	
Do you have a mobile voucher?	☐ Yes ☐ No If Y	es, with what housin	g authority?
Sensory Unit Required?	□ Yes □ No		•
Accessible Unit Required?	☐ Yes ☐ No		

This is an important notice. Please have it translated. Este é um aviso importante. Que ins mandá-lo traduzir. Este es un aviso importante. Sirvase mandado traducir. DAY LÀ MỘT BẢN THÔNG CÁO QUAN TRONG XIN VUI LÒNG CHO DỊCH LẠI THÔNG CÁO ẨY Ceci est important. Veuillez faire traduire. 本通知很重要。请将之译成中文。 នេះគឺជាដំណឹងល្អ សូមមេត្តាបកព្រៃជូនជង







Does any member of the lor changes in a unit or deplease explain.					
Present Housing Cost Per	Month \$	Including Ut	ilities?	[]Yes []No	
How Long Have You Lived at Present Address?		Years	5.		
What are the reasons for	or Moving?				
FAMILY COMPOSITION	ON - List all those who	will occupy t	he apartm	ent - INCLUDE	
YOURSELF FULL NAME OF EACH PERSON IN HOUSEHOLD	RELATIONSHIP TO HEAD OF HOUSEHOLD	DATE . OF <u>BIRTH</u>	<u>SEX</u>	SOCIAL SECURITY NUMBER	FULL TIME STUDENT
1	Head of Household				Yes or No
2	•	,	•		Yes or No
3					Yes or No
					Yes or No
5					_ Yes or No
6					Yes or No
REFERENCES - Full na	me and address of Landl	ords or Offici	als at other	places you have li	ved
over the last five years, su	ch as shelters.				
Name of Present Landlord	/Official:		_ Telephone	e:	
Address:					
Name of Previous Landlor		Telephone	e:		
Address:					
NOTE: If you are unable	to furnish a landlord or o	ther housing	reference, p	lease furnish char	acter
references. They must have	ve known you for one (1)	year or more	and not be	related to you.	
Name of Character Reference: _			Telephon	e:	
Address:					
Name of Character Reference: _			Telephon	e:	
Address:					





Please indicate the income received and assets held by each member of your household. List each member by the corresponding number on the second page.

EMPLOYMENT INCOME BY HOUSEHOLD MEMBER: Please provide most recent paystub.

Member #				
Name of Present Emplo	yer		Teleph	none:
Address				
Years Employed Last years gross income Member #	Position		Current Gro	oss Salary \$]bi-weekly [_]monthly
Name of Present Employ	yer		Teleph	one:
Address			•	
Years Employed Last years gross income Member #				ss Salary \$]bi-weekly []monthly
Name of Present Employ	/er		Teleph	one:
Address				
Years Employed Last years gross income	Position		Current Gro	oss Salary \$]bi-weekly []monthly
Unemployment Compens from Rental Property, Mi Household Member		holarships, and/	or grants.	ties, Dividends, Income ings (Before Taxes)
			-	per
				per
WINDS				per
			(We	eek, Month, Year)
NCOME FROM ASSE Assets include Checking Stocks, Bonds, Real Estat	Accounts, Sav			
Household Member	<u>T</u>	vpe of Asset		Cash Value
		·		· · · · · · · · · · · · · · · · · · ·
		•		
·····	<u></u>			





OHHERUNEORVANION			
Have you, or any adults listed or If yes, describe:	n the application	n, ever been convicted of a felony	y?□ Yes□No
Have you ever been evicted or so If yes, describe reason(s):	erved with a No	tice to Quit? □ Yes □ No	-
Do you own a pet? ☐ Yes ☐	No If yes, ple	ease list below:	
		5	
I/We hereby certify that the inforbest of my/our knowledge and be All information is regarded as concertify that I/We understand that State or Federal Law.	elief. Inquiries onfidential in na formation (C O	s may be made to verify the sta ture, and a consumer credit rep RI) report may also be reques	tements herein. oort and a ted. I/We
I/We hereby certify that I/we have right to reasonable accommodation			describing the
Signed under the pains and pen	alties of perjur	y.	
Head of Household/Applicant	Date	Co-Applicant	Date

Trinity Management LLC does not discriminate on the basis of race, color, religion, sex, national origin, sexual orientation, age, familial status or physical or mental disability in the access or admission to its programs or employment, or in its programs, activities, functions or services.



Other household members

(Page 4)

Other household members

Date

Date

Consent for Release of Information

(For Use with State Subsidized Programs)

Trinity Management LLC.

GENERAL AUTHORIZATION FOR RELEASE OF INFORMATION

Name:		
	al, have authorized Trinity Management LLC to verify the accuave provided, from the following sources (specify):	ıracy
subject to the condition tha	ssion to release this information to the Trinity Management LLC it be kept confidential. I would appreciate your prompt attentio quested on the attached page to the Trinity Management LLC A	n in
within five (5) days of rece		-8
Thank you for your assistan	penalties of perjury.	
Signature	Date	





RENTAL CRITERIA

Overall Standards

Fair Housing: This community does not discriminate on the basis of race, color, sex, religion, handicap, familial status, sex ual orientation, national origin or any other class protected by applicable law.

Occupancy Standards: No more than two people per bedroom may occupy the apartment, unless there are special circumstances approved by Landlord. Infants up to twenty-four (24) months old are not considered for occupancy purposes.

Identification: All visitors and applicants must provide a valid driver's license or other U.S. or state-government issued photo identification in order to view and/or move in to the community. Non-U.S. citizens must provide a valid passport or valid visa.

Application Standards and Process

Application for Residency: An Application for Residency must be completed for each applicant who will be living in the apartment and who has reached the age of majority under state law, which in most states is 18 years or older. Application fees, if applicable, will be collected before an application can be processed.

Investigations Standards: Landlord (or it designates) may conduct an investigation of applicant, including thorough personal interviews with applicant's current and/or prior landlord(s), employer(s), and/or others with whom applicant is acquainted. These inquiries may include information regarding applicant's character, general reputation, personal characteristics, mode of living, credit report, and criminal background. Landlord will attach a summary of applicant's rights under the Fair Credit Reporting Act to applicant's application.

<u>Income History:</u> Except for applicants who receive or who will occupy an apartment unit that receives subsidies or voucher assistance, applicants must have a gross income source that can be verified and meets the minimum income requirements for the apartment being leased which are determined by multiplying the monthly rent by a specified factor of months as <u>determined by the community</u>. Applicants may be required to provide income verification, including but not limited to a pay stub, a letter from an employer, the most recent W2, the most recent tax return and/or certified verification from company accountant or bank. In instances where sufficient income requirements cannot be met, this community may elect to accept pre-paid rent, a co-signer or a guarantor. In instances where sufficient income requirements cannot be met because of the applicant's disability, the community will accept, at the applicant's option, either pre-paid rent, a co-signer or a guarantor if requested by the applicant.

Credit History: Sycamore on Main may investigate and verify credit history. Landlord evaluates credit history information with a scoring method that weighs the indicators of future rent payment performance, but Landlord retains the right to reject an application no matter an applicant's ultimate scoring. An unsatisfactory credit report can disqualify an applicant from renting an apartment, including one that reflects past or current bad debts, late payments or unpaid bills, liens, judgments or bankruptcies. If an applicant is rejected for poor credit history, the applicant will be given the name, address and telephone number of the credit reporting agency that provided the credit report but not be told the content of the credit report. An applicant rejected for unsatisfactory credit is encouraged to obtain a copy of the credit report from the credit reporting agency, correct any erroneous information that may be on the report, and resubmit an application.

<u>Criminal History:</u> Applicants, occupants and co-signers will not be accepted if they do not satisfy the criminal history inquiries required by or background investigation allowed by the residency application. However, Landlord does not guarantee or represent that residents and/or occupants currently residing at the community qualify under the criminal background criteria required by the residency application. *Sycamore on Main* maintains a strict policy prohibiting registered sex offenders from residing within our communities. *This community* reserves the right to investigate lists of registered sex offenders in any manner including online, in newspapers or by contacting state agencies.

Rental History Information regarding payment and rental history of each applicant will be collected to verify tenancy. Landlord reserves the right to reject any applicant who has been previously evicted by a court of law.

Employment History:	Sycamore on Main may	confirm employment and	d reported salary level.	
			•	sidency and meet the Resident
Selection Criteria. A resident(s) defaults.	co-signer will be fully	responsible for the ren	t obligations of the Lease	Agreement if the occupying



Applicant Signature



Date