

Full Name:

Address1:

Address2:

City State Zip:

Email:

Case Manager Email:

← **APPLICANT COMPLETE THIS SECTION**

Use Adobe Acrobat Reader and print this application to  
"Custom Scale - 100%".

Then, both addresses will appear in the windows of a #10  
double-window envelope, saving you time.

← **Mail this application to the address at left.**

**Do not fax!**

Date Generated:

Fold on this line —

**Dear**

I am applying to the following waitlist, which I believe is open – please fax HousingWorks if the list is closed.

**SECTION BELOW FOR WAITLIST ADMINISTRATORS ONLY:**

IF REJECTING THE APPLICATION BECAUSE IT IS INCOMPLETE,  
please return it to the applicant.

IF REJECTING THIS APPLICATION BECAUSE IT IS THE WRONG  
FORMAT, please email, mail, or fax the form below to  
HousingWorks. Include this page so we know who the  
application is from! We will update our system, so the changed  
status of your waitlists will reach thousands of applicants and  
their housing advocates. Also, you will boost your Fair Housing  
and ADA compliance exponentially!

[support@housingworks.net](mailto: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 Stamp – for Office Use Only*





Dear Applicant,

Thank you for your interest in District 120.

All applications must be received, or post marked no later than January 15th, 2023.

Applications will be available through the following methods:

- ✓ Please visit [www.livedistrict120.com](http://www.livedistrict120.com) and download the application.
- ✓ Call (508) 321-5043 to have one mailed to you.

Once your application is completed it can be returned by:

**Emailing to:** [District120@maloneyproperties.com](mailto:District120@maloneyproperties.com) (preferred method)

**Mailing to:** District 120, Maloney Properties, Inc., 27 Mica Lane, Wellesley MA 02481

**Deadline:** All completed applications must be received or post-marked by January 15<sup>th</sup>, 2024

**Please be advised that incomplete applications will not be included in the lottery.**

**Informational meetings will be held via ZOOM on Tuesday, December 19th @ 7pm and Saturday, January 6th @ 10am. The link to the meeting will be available on the website [www.livedistrict120.com](http://www.livedistrict120.com) the day of the meeting.**

This application is used to gather the minimum information necessary for entrance in the lottery. Entrance into the lottery is not an offer for housing. The lottery is scheduled to be held in early February 2024. Once the lottery is completed you will receive written notification of your position on the waitlist. Selection for tenancy will begin shortly after the lottery is completed. Occupancy is anticipated in late March 2024.

When you approach the top of the waitlist, we will contact you for an interview. At that time all adult members of the family will be asked to sign the required individual verification forms authorizing management to verify family income, assets, expenses, and other eligibility factors in accordance with the programs applicable to this property before any offer of a unit can be made.

Please feel free to contact us at 508-321-5043 or by email at [district120@maloneyproperties.com](mailto:district120@maloneyproperties.com) if you have any questions.



**JOIN OUR COMMUNITY TODAY!**

District 120

Worcester, MA

**Phone:** (508)321-5043 | Relay 711

**Email:** district120@maloneyproperties.com

**PRE-APPLICATION FOR DISTRICT 120**

**Please Print Clearly**

NAME: \_\_\_\_\_

UNIT SIZE REQUESTED: Studio \_\_\_\_\_

ADDRESS: \_\_\_\_\_

1 Bedroom \_\_\_\_\_

CITY/STATE/ZIP: \_\_\_\_\_

2 Bedroom \_\_\_\_\_

PHONE: \_\_\_\_\_ ALT PHONE: \_\_\_\_\_

3 Bedroom \_\_\_\_\_

EMAIL: \_\_\_\_\_

This application will be used for entrance in the lottery. All applicants will be interviewed and asked to complete a full application and additional paperwork upon being selected from the lottery. Applicants who are not selected for initial occupancy from the lottery will remain on the waiting list.

**Please complete all sections of this application and return to District 120, 27 Mica Lane, Wellesley MA 02481 or by email to district120@maloneyproperties.com. If a question is not applicable, write "N/A" in that section. If all sections are not completed, the application will not be placed on the waiting list. Every family member age 18 as well as the Head, Co-head and Spouse must sign and date the application.**

First Name, Last Name	Relationship to head of household	Date of Birth	Student Status (F1) (Must Circle as Applicable to <u>EACH</u> Member)
	Head of Household		Full-time / Part-time / Not Student
			Full-time / Part-time / Not Student
			Full-time / Part-time / Not Student
			Full-time / Part-time / Not Student
			Full-time / Part-time / Not Student
			Full-time / Part-time / Not Student



<b>CBH- Community Based Housing Program:</b> Three units are modified and set aside for this program, do you meet the definition for program eligibility? To be eligible for CBH unit, a person must have a physical or mental impairment of a permanent or long and continuous duration that substantially limits one or more major life activities. The physical or mental impairment must be verified by a medical professional. Priority will be given to individuals who are documented by a Massachusetts Rehabilitation Commission (MRC) Approved entity, secondly by individuals currently institutionalized or at risk of institutionalization and thirdly by any individual with a disability.	<input type="checkbox"/> Yes
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Are ALL household members full time students?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
<b>If yes, you <i>MUST</i> answer the following questions “a” through “e”.</b>		
a. Is any full-time student(s) a TANF or a title IV recipient?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
b. Is any student(s) enrolled in a job-training program receiving assistance under the Job Training Partnership Act or other similar federal, state or local law?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
c. Are all full-time student(s) married (not necessarily to one another) and filing a joint tax return?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
d. Are all of the full-time student(s) a single parent living with his/her minor child/children and not a Dependent on another individual’s tax return and the child/children aren’t a dependent of another person other than a parent of the child/children?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
e. Has any full-time student previously been under the care and placement of a foster care program (under Part B or E of Title IV of the Social Security Act)?	<input type="checkbox"/> Yes	<input type="checkbox"/> No

INCOME		
List ALL sources of <b>gross income anticipated to be received by any/all household members in the next 12 months</b> , including but not limited to: Employment, self-employment (net business income), unemployment, Social Security, SSI, SSP, Public Assistance, Pension payments, child support, alimony, regular gifts/contributions etc.		
Household Member Name	Source of Income	Gross Annual Amount
		\$
		\$
		\$
		\$



Assets		
List ALL household members' assets, including but not limited to: Checking accounts, savings accounts, trust accounts, certificates of deposit (CDs), credit unions, mutual funds, brokerage account, savings bonds, life insurance policies, 401(k)s/IRAs, SSA Direct Express Debit Cards, etc.		
Household Member Name	Type of Asset / Bank Name / Last 4 Digits of Acct #	Current Balance (Checking Accts – 6 mo Average Balance)
		\$
		\$
		\$
		\$

The following four questions are asked for the sole purpose of providing an equal opportunity to enjoy your housing. Answering them is voluntary, but if you don't let us know what you need to have an equal opportunity to enjoy your housing, we can't satisfy your needs.

- Do you need a fully accessible unit for someone with a mobility impairment? ☐ Yes ☐ No  
 \*Note: If you only need a unit on the first floor and it doesn't need to be fully accessible, please answer "no" here and respond to question 4 below with a "yes" and let us know your needs.
- Do you need only certain accessible features of a unit?  
☐ Yes ☐ No If yes, please list the features that you need to be accessible: \_\_\_\_\_  
 \_\_\_\_\_
- Do you need a unit with special features for someone with a hearing and/or visual impairment?  
☐ Yes ☐ No
- Does any member of the household have any accessibility or reasonable accommodation requests or alternate ways we need to communicate with you?  
☐ Yes ☐ No If yes, please explain: \_\_\_\_\_  
 \_\_\_\_\_

ADDITIONAL INFORMATION		
<b>Notice for the following question:</b> We do not discriminate based on voucher certificate holder status. The following question is asked for the sole purpose to determine an applicant household's ability to pay rent for a unit that does not have Project Based Subsidy.		
2. Do you currently have a mobile Voucher/Certificate?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
If yes, 2 (a) What agency issued the voucher?		
3. (b) What is the name and phone number of your case manager?		
4. Are you an owner, developer or sponsor of this project (or officer, employee, agent or consultant of the owner, developer or sponsor)?	<input type="checkbox"/> Yes	<input type="checkbox"/> No



# CERTIFICATION

I/We hereby certify that I/We do/will not maintain a separate subsidized rental unit in another location. I/We further certify that this will be my/our permanent residence. I/We understand I/We must pay a security deposit for this apartment prior to occupancy. I/We understand that my eligibility for housing will be based on applicable income limits and by management's selection criteria. I/We certify that all information in this application is accurate and complete to the best of my/our knowledge and I/We understand that intentional false statements or information are punishable by law and will lead to cancellation of this application or termination of tenancy after occupancy. I/We hereby authorize the release of information regarding a criminal background and credit check, and landlord authorization. All adult household members, 18 or older, must sign the application. Further, any head, co-head or spouse, who is an emancipated minor, must also sign below.

SIGNATURE(S):

_____	_____
(Signature of Tenant)	Date
_____	_____
(Signature of Co-Tenant)	Date
_____	_____
(Signature of Co-Tenant)	Date
_____	_____
(Signature of Co-Tenant)	Date

Maloney Properties Inc. does not discriminate on the basis of any protected status, including disability, in the admission of or access to, or treatment or employment in its programs and activities. Maloney Properties, Inc. provides persons with disabilities the opportunity to request a Reasonable Accommodation in order to apply to and participate in such programs and activities. Maloney Properties, Inc. also provides people whose primary language isn't English and as a result have limited English proficiency the opportunity to request free language assistance in order to apply to or participate in its programs and activities. Kathy Broderick coordinates Maloney Properties' compliance with all nondiscrimination requirements, including Section 504. Contact her with any questions or concerns relating to Maloney Properties' compliance with nondiscrimination requirements: Telephone (781) 943-0200 x255, Relay: 711 or at Maloney Properties, Inc., 27 Mica Lane, Wellesley, MA 02481.

