

Applicant: Write your full name and address,
including your apartment # and zipcode.

Mail this application to the address you
see at left.

Dear

I am applying to the following waitlist, which I believe is open:

App Generated:

 **ATTN: WAITLIST ADMINISTRATOR** 

Is this waitlist closed? Anything else you want to tell the 900 Housing Advocates and the nearly 200,000 applicants using our system?

USE BLOCK PRINT to fill in the appropriate information below. Save paper and ink by faxing only this one page to HousingWorks – we will immediately update your information! See fax number below.

☐ **This particular waitlist is closed: At present, our only open waitlists are:**

☐ **This is not the correct application. The correct application is available in this way:**

Your position or title at this housing program: _____

Your signature: _____

HousingWorks Fax: 617-536-8561

*If you direct applicants to try our free search to locate OTHER HOUSING OPTIONS,
you reduce frivolous applications and eliminate possibly hundreds of phone calls:*

www.HousingWorks.net



DO NOT LEAVE ANY QUESTION UNANSWERED!

- ☐ HEAD OF HOUSEHOLD'S FIRST NAME
- ☐ HEAD OF HOUSEHOLD'S COMPLETE MIDDLE NAME
- ☐ HEAD OF HOUSEHOLD'S LAST NAME (EX: BAEZ GONZALEZ) ☐ SUFFIX
- ☐ YOUR MOTHER'S LAST NAME WHEN SHE WAS A CHILD

ANSWER THIS: ☐ Yes ☐ No Does the HoH have a Social Security Number? *If "Yes" you must provide the full SSN!*

- ☐ HEAD OF HOUSEHOLD'S SOCIAL SECURITY NUMBER ☐ HEAD OF HOUSEHOLD'S DATE OF BIRTH ☐ GENDER

- ☐ ETHNICITY ☐ RACE: Asian , Black, White, Native American, Pacific Islander, Multi-racial

- ☐ REQUESTED ACCOMMODATIONS Fill in the circle for anything you need:
- | | | |
|--|---|---|
| <input type="radio"/> Fully Accessible Wheelchair Unit | <input type="radio"/> Blind Accessible Unit | <input type="radio"/> Need an Interpreter |
| <input type="radio"/> No-Steps unit (elevator to any floor) | <input type="radio"/> Deaf Accessible Unit | <input type="radio"/> Domestic Violence Victim |
| <input type="radio"/> First-Floor unit only | <input type="radio"/> Unit for Environmental Allergies | <input type="radio"/> Personal Care Attendant |

- ☐ HoH's CAREER STAGE ☐ ANY VETERANS in HH? ☐ Yes ☐ No
- ☐ Employed ☐ Unemployed ☐ Retired ☐ FT Student ☐ PT Student

- ☐ PERMANENT MOBILE RENTAL ASSISTANCE, if any
- ☐ I do not have mobile rental assistance ☐ Mobile Section 8 voucher ☐ MRVP ☐ AHVP ☐ VASH or similar

- ☐ CRIMINAL RECORD AND SEX OFFENDER
- Head of Household:** Any **Felony/Conviction?** ☐ Yes ☐ No Any **Misdemeanor Conviction?** ☐ Yes ☐ No
- Other Members:** Any **Felony Convictions?** ☐ Yes ☐ No Any **Misdemeanor Conviction?** ☐ Yes ☐ No
- Is anyone in HH subject to a **lifetime sex offender registration** in any state? ☐ Yes ☐ No

- ☐ ANY PETS? ☐ Yes ☐ No Describe: _____

- ☐ HOUSEHOLD SIZE AND COMPOSITION ☐ ANNUAL INCOME ☐ DOCUMENTED DISABILITY?
- _____ ← # Adults _____ ← # Children _____ ← Total # in Household \$ _____ ☐ Yes ☐ No

- ☐ CURRENT HOUSING STATUS ☐ Homeless ☐ Housing Loss in 14 days ☐ Homeless under other federal status
- ☐ Homeless because Fleeing domestic violence ☐ At risk of homelessness ☐ Stably Housed

- ☐ BEST TELEPHONE NUMBER TO USE ☐ SECOND TELEPHONE

- ☐ EMAIL ADDRESS

- ☐ WHERE YOU LIVE OR BACKUP ADDRESS

- ☐ BEST MAILING ADDRESS

- ☐ # BEDROOMS NEEDED? ☐ SPECIAL CIRCUMSTANCES? (*some programs may grant you priority status*)
- ☐ Disability ☐ Elder ☐ Veteran ☐ Fleeing Domestic Violence ☐ Rent-burdened
☐ Displaced by ☐ Public Action ☐ Sanitary Code ☐ Natural Forces ☐ Other

Presidential Gardens

140 Evergreen Drive * Bradford, MA 01835
Phone 978.373.2543 * Relay 711 * Fax 978.373.2830

Maloney Properties, Inc, Managing Agent

PRELIMINARY APPLICATION

Head of Household (HOH) Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Daytime Phone: _____ Evening Phone: _____

Do you own any real estate? _____ Yes _____ No

Apartment Size Required: _____ 1 bedroom _____ 2 bedroom _____ 3 bedroom

Do you require a handicap accessible apartment? _____ Yes _____ No

Please list all persons who will live in the apartment.

	Name	Relationship to Head of Household	Birth Date	Social Security Number	Full Time Student? YIN
1.		SELF			
2.					
3.					
4.					
5.					

Please list all sources of income for all household members. **NOTE: "Income" refers to all money received as a result of employment, Social Security benefits, Pension, Veteran's Benefits, Unemployment Compensation, Public Assistance, and interest earned from assets.** Under "Annual Amount" please indicate the total annual income from the named source, PRIOR to deductions (taxes, etc.) If none, write "none". This section cannot be left blank.

Household Member Name	Source of Income	Annual Amount

PLEASE PROVIDE DOCUMENTATION OF INCOME. Documentation (copy of paystub, statement from DOR or Social Security, etc.) must be attached to this application or it will be rejected.

Please complete BOTH sides of application.

Please list all household members' assets. **NOTE: "Assets" refers to money held in checking accounts, savings accounts, trust accounts, certificates of deposit, credit unions, savings bonds, life insurance policies, mutual funds, stocks, bonds, annuities, 401(K), Keogh, investment properties. If none, write "none", This section cannot be left blank.**

Household Member Name	Type of Asset	Amount	% Interest

Head of Household must initial the appropriate status: **Documentation of circumstances leading to displacement MUST be attached to this application in order to be considered for a preference on the waitlist.**

- ☐ Homeless due to Displacement by Natural Forces
☐ Homeless due to Displacement by Public Action (Urban Renewal)
☐ Homeless due to Displacement by Public Action (Sanitary Code Violations)
☐ Involuntary Displacement by Domestic Violence
☐ None of the above

I/We certify that all above information is true to the best of my/our knowledge. 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 understand that this is a preliminary application to determine my eligibility for available waitlists, and that I/We will be required to complete a full application once an apartment becomes available for me/us. I/We understand all changes to this application, including but not limited to address change, family composition change, and annual household income change must be made to the Presidential Gardens management office in writing, and that failure to do so may result in my application being cancelled. All household members aged 18 or older or who is an emancipated minor must sign below:

_____ Signature of Applicant/Head of Household	_____ Date
_____ Signature of Applicant/Household Member	_____ Date
_____ Signature of Applicant/Household Member	_____ Date
_____ Signature of Applicant/Household Member	_____ Date



Presidential Gardens and Maloney Properties, Inc. do 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, Relay #711, or at Maloney Properties, Inc., 27 Mica Lane, Wellesley, MA 02481.

Presidential Gardens
978-373-2543, Relay 711
Frequently Asked Questions

1) How many units does Presidential Gardens have?

Presidential Gardens has 200 apartments. 185 of the apartments are subsidized. This development has 10 accessible units.

2) Is Presidential Gardens low-income housing?

No, Presidential Gardens is mixed income housing. We are required to rent to households at different income levels, including people of moderate income. We have certain income targets or goals.

The specific income targets required for Presidential Gardens are as follows:

- a) 42%, or 84 apartments, of households between 0-50% of area median gross income. Presently we have many more than 84 households in this tier.
- b) 51%, or 101 apartments, of households between 51-80% of area median gross income. Presently we do not have enough households in this income tier.
- c) 7%, or 15 apartments, of households at 81% or more of area median gross income. (Further broken down as: 2 households occupying one-bedroom apartments; 5 households occupying two-bedroom, one bath apartments; 4 households occupying two-bedroom, one and a half bath apartments; and 4 households occupying three-bedroom apartments.) We currently have more than 5 households occupying this tier for two-bedroom with one bath apartments, and we meet this goal for two-bedroom with bath and a half and for three-bedroom units.

Any household whose income is at 81% or more of area median gross income is considered a moderate income household. Please see attachment 1 for income tier guidelines.

3. Are you accepting applications?

Just as we rent for different bedroom sizes based on the number of persons in each household, we also rent according to the income tiers based on the income of each applicant household's income.

- a) We are accepting applications for the 51 — 80% Income Tier and the 81%± tier for one and two bedroom apartments only.
- b) We have an income chart for you to see the income eligibility requirements for the subsidized apartments, those between 0-50% of area median income, 51-80% of area median income, and the income requirements for the market units. Anyone is welcome to apply for either our subsidized and/or market units.
- c) We are not taking applications for our one- and two-bedroom apartments where the applicant household's income is below 51% of the area median income. We are not accepting applications for three bedroom apartments at this time, regardless of income tier.
- d) If you apply and our review determines that you income-qualify for the apartment size and income tier that we are accepting applications for, we will place your name on the waiting list. If you do not income qualify or if you have applied for a three-bedroom list, we will contact you in writing and explain that you do not meet the qualifications for one of our open waiting lists. We encourage you to periodically check back with us to see if we have opened up our waiting list for other income tiers or apartment sizes.

4) Do you take Section 8 vouchers?

Anyone with a Section 8 voucher is welcome to apply to this development. However, if you live in one of our subsidized units in this development you must give up your section 8 voucher because the unit already receives a subsidy. Your household income still must satisfy the requirements of the applicable income tier. For example, if you have a voucher and apply to live in one of our moderate income units your income has to be above a certain amount for you to be eligible.

5) What are the requirements to get in?

To be eligible for subsidized housing at Presidential Gardens your household needs to satisfy the following:

- a) Have an annual income that meets the income requirements;
- b) Have at least one family member who is either a U.S. citizen or an eligible immigrant; and
- c) Provide Social Security numbers for every household or certify that they do not have a Social Security number.

In addition, an applicant household must pass our screening procedures which are designed to show that the household will comply with the terms of our lease before being qualified to receive a unit offer. These screening procedures require:

- a) a credit report for all household members age 18 or older;
- b) a criminal background report for all household members age 18 or older;
- c) landlord references for the past 5 years;
- d) a personal reference for all household members age 18 or older.

6) How much do I have to make to get an apartment?

This is a mixed income development, which means that you are eligible for a unit regardless of how much money you make. However, our waiting list is currently closed for our one and two bedroom subsidized units unless your income is between 51 and 80% of area median gross income. Our one — and two-bedroom waiting lists are also open if your income is above 81% of area median gross income. Our waiting list is closed for all three bedroom apartments.

7) I am relocating. Can I apply now for an apartment even though I live in another state?

Yes.

8) Do you have an emergency wait list?

No.

9) What do you consider priority?

In accordance with the Tenant Selection Plan for this development a priority is given to individuals based on involuntary displacement (please see the attached description). Having a priority does not guarantee admission. Rather, it establishes the order or placement on the waiting list.

10) How long is the wait list?

The current wait list is sorted by income tiers and has over 300 applicants.

11) How soon can I get an apartment and can I get one quickly if I bring my information right away?

If you are currently on our wait list, how quickly you will get an apartment depends on the number of current residents who move-out of apartments, internal transfers, which income tier you fall under and where you are on our waiting list. Currently, we are filling all vacant apartments with households whose gross income is between 51 and 80% of area median gross income. Also, we offer our vacant accessible units to eligible households in the order required by law, which means first to existing residents, then to the next eligible household on the waiting list within the 51-80% tier that needs the accessible features even if they are further down on the waiting list than another person within the same tier. If no one in the correct income tier needs the accessible unit, we would fill the accessible unit with the first person on the waiting list, regardless of income tier, who needed the accessible

features. Bringing in your information right away will not move you ahead of other applicants for the same unit size and in the same income tier.

12) How long does it take to get an apartment?

It is impossible to tell you how long it takes to get an apartment at Presidential Gardens. How long it takes to get an apartment depends on whether you are already on the waiting, and if you are on the waiting list, where you are on the list, the size and type of unit you need, your income tier, and the number of vacancies. What we can say for sure is that if you're not on our waiting list you can't get an apartment here because all of our vacancies are filled with people from our waiting list.

13) Can I add someone else's income to qualify and then remove them later?

No.

14) What verifications do I need to bring in?

At the time that you file your preliminary application, proof of income is required. Once you come to the top of the waiting list we will send out third party verifications to document your earned and unearned income, including asset information. A list of documents we need will be provided to you once your name reaches the top of the waiting list.

15) Can you tell me how much my rent would be?

No, not until we process your application. Rent in the subsidized units is based on 30% of your household's adjusted income. Depending on your apartment size, your rent will not exceed:

1 BR\$910
2 BR\$1130
3 BR\$1,330

All rents include heat, hot water and electricity with the exception of running air conditioners. Residents supply their own air conditioners (maximum of one in a one-bedroom apartment and two in a two- or three- bedroom apartment). To run the air conditioner(s), residents must first pay a seasonal fee in full. The seasonal fee is determined by the PGNA Board of Directors each season.

16) Do you have any available apartments?

All of our units are filled with people from the top of our waiting list. We are currently accepting applications for our affordable one and two bedroom units if your gross income is above 51% of area median gross income. You are welcome to apply.

17) When will the wait list open for lower incomes and for the three bedroom units?

We do not know when the waitlist will open for the lower income tiers. Right now our waiting list has a large number of applicants in the lower income tiers (below 51%) and on the three-bedroom list. When those numbers decrease, we will seek approval to re-open the waiting list(s).

18) How does Your wait list work?

Our waitlist is broken down by bedroom size and income tier. Individuals who need accessible units are included on these waitlists and we track the need for an accessible unit so that when an accessible unit becomes available, the unit is offered first to applicants who need the accessible features of the unit.

People are currently placed on the waiting list based on date of application and priority due to displacement (see attachment 2 for description). Each applicant household is assigned a wait list number and each household's wait list number may change based on changes to their or other applicants':

- household income,
- household size,

- priority due to displacement.

A change in wait list number results from changes in the number of applicants in any particular income tier.

19) Do you know anywhere else that I can apply and that is taking applications?

Where vacancies exist varies greatly and we do not want to steer you in the wrong direction. We suggest that you check the real estate ads in The Lawrence Eagle Tribune, Sampan and Rumbo.

We would also recommend that you check with the Haverhill Housing Authority at (978) 372-6761. If you are looking for an accessible unit, please contact the MassAccess Housing Registry through the MBHP website at www.mbhp.org or through the Citizens Housing and Planning Association website at www.chapa.org.

We would also be happy to provide you with a list of other properties managed by Maloney Properties, Inc. and you can contact them directly. Please call (781) 943-0200 x 300 for the list of our properties or get contact information through our website at <http://inside.maloneyproperties.com>. Information about other low income and mixed-income Massachusetts properties is available through the MassHousing website at www.masshousing.com and through the HUD website at www.hud.gov/massachusetts.

20) How many bedrooms would I be eligible for?

The number of bedrooms you are eligible for depends on your household size and composition. We generally use a two person per bedroom maximum occupancy standard. Under certain circumstances, your household might qualify for more than one unit size. Each unit size has its own waiting list. You may choose at application (and at update) to be on more than one waiting list. It is your choice. We will be happy to share with you the length of each of our waiting lists.

21) There will be only 2 people living in the apartment; can I apply for a 3-bedroom?

Generally speaking a 2-person household would not be eligible for a 3-bedroom affordable unit. The reason for this is that we need to make the best use of our units, and over-housing households will not enable us to serve households that need larger units. However, if you have a disability and need another bedroom as a direct result of your disability, we will consider a request for reasonable accommodation regarding bedroom size. A reasonable accommodation is a change in our rules, policies or procedures to enable a person with a disability to have an equal opportunity to apply to or enjoy his/her housing. Our Reasonable Accommodation policy and procedure is attached to this handout.

22) The other person that will live with me is not in this state/country. Can I still apply for apartment?

Yes.

23) I'm not a citizen of the U.S. and I do not have my temporary or permanent resident card. Can I apply and would I be allowed to live here?

If you are not a citizen and do not have your resident card, you can still apply to this development. However, housing assistance can only be provided to individuals who are citizens, nationals of the United States or eligible immigrants. If at least one family member is either a citizen or an eligible immigrant, the household will be eligible for pro-rated assistance (which means you would pay a higher rent than if all family members were either citizens or eligible immigrants).

People who are U.S. citizens or nationals may certify to their status and parents may certify to the status of their children. The law requires us to ask those who qualify as eligible immigrants for different documentation based on their age. Immigrants who are 62 years of age or older can sign a document called a declaration of eligible immigrant status and provide proof of age. Immigrants who are younger have to sign the declaration of immigrant status and provide us one of the documents accepted by the Immigration and Naturalization Service (INS) and a signed verification consent form.

24) Do I have to leave a deposit with my application?

No.

25) Do you have wheelchair accessible apartments? Is there a wait?

We have 10 accessible units and applicants in need of an accessible unit are placed on the waiting list for the unit size needed and the income tier for their household income.

When an accessible unit becomes vacant, we fill the unit in accordance with legal requirements. This means we first offer the unit to a current resident who needs the accessible unit, if any. If a current resident does not need the accessible unit then we offer it to the first person in the 51-80% income tier that needs the accessible features. If no one in that tier needs the accessible unit then we will offer it to the next person on the waiting list who needs an accessible unit.

26) How many apartments of each unit size do you have in the development?

- 1 BRs — 20 units
- 2 BRs — 140 units
- 3 BRs — 40 units

27) I have joint custody of my child. Can I put him/her on my lease if I live in an affordable unit?

- a. A child can be part of your household and on your lease if he/she lives in your unit at least 50% of the time.
- b. If your child only lives with you on the weekends, he/she is not considered part of your household size for determining income eligibility or bedroom size.
- c. If your child lives with you 50% of the time and someone else 50% of the time and both persons live in affordable housing, only one of you can get the benefit of the dependant allowance.

28) Sample question from an existing wait list applicant: I have been on the waitlist since 2003 for a 2 BR in the 0-30% income, why can't I get an apartment and why did my wait list # changed from #11 to #30 and none of my information changed?

Because this is a mixed income tier development, our developments are made up of residents with a wide range of income levels. Right now, our development does not have enough households with income between 51 and 80% of area median gross income and we have more families with between 0-50% of area median gross income than is our goal. So, when a vacancy occurs for a subsidized unit, households in the 51-80% tier are offered the vacant unit. Your household's wait list number can change because other applicants' household circumstances change. For example, if the income level, household size or priority status of another household changes that household could be moved up the waiting list in accordance with their date and time of application, thereby lowering (or raising) where you are on the waiting list. Also, if you do not qualify for a preference and someone who does qualify for a preference applies after you then your place on the wait list will change.

29) Can a friend or family member call for waitlist information on my behalf?

In order to protect confidentiality and respect everyone's privacy, we will not discuss the status of a waitlist application with anyone except the applicant(s). With your written permission, we can discuss your application with anyone you choose. Your written authorization must be on file in the office, and the person calling on your behalf must be able to provide identifying information (i.e. your mailing address, your date of birth, etc.). Written authorization can be revoked at any time by providing the management staff with a letter of revocation.

Presidential Gardens and Maloney Properties, Inc. do 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:



Priority Categories, Attachment 1

Presidential Gardens uses the following priority categories in descending order in determining the order of an applicant's placement on the waiting list. The applicant must indicate the priority on the preliminary application and supply supporting documentation to the application. Failure to provide supporting documentation will result in no priority being given on the waitlist.

Priority 1: Homelessness due to Displacement by Natural Forces: An applicant, otherwise eligible and qualified, who has been displaced by:

- fire not due to the negligence or intentional act of applicant or household member;
- earthquake, flood or other natural cause; or
- a disaster declared or otherwise formally recognized under disaster relief laws.

Priority 2: Homelessness due to Displacement by Public Action (Urban Renewal): An applicant, otherwise eligible and qualified, who will be displaced within 90 days, or has been displaced within the three years prior to application, by:

- any low rent housing project as defined in M.G.L.c.121B, s 1, or
- a public slum clearance or urban renewal project initiated after January 1, 1947, or
- other public improvement.

Priority 3: Homelessness due to Displacement by Public Action (Sanitary Code Violations): An applicant, otherwise eligible and qualified, who is being displaced, or has been displaced within 90 days prior to application, by enforcement of minimum standards of fitness for human habitation established by the State Sanitary Code or local ordinances, provided that:

- neither the applicant nor a household member has caused or substantially contributed to the cause of enforcement proceedings, and
 - the applicant has pursued available ways to remedy the situation by seeking assistance through the courts or appropriate administrative or enforcement agencies.
- {Note: "enforcement" is interpreted as a formal condemnation of the apartment.
Citation for code violations does not, without more, constitute a condemnation.}

Priority 4: Involuntary Displacement by Domestic Violence: "Domestic Violence" means actual or threatened physical violence directed against one or more members of the applicant's family by a spouse or other member of the applicant's household. An applicant is involuntarily displaced by domestic violence if:

- The applicant has vacated a housing unit because of domestic violence; or
- the applicant lives in a housing unit with a person who engages in domestic violence.
- If the applicant is still living in the unit at the time of selection, the violence must have occurred within six months or be of a continuing nature.

This priority only applies to households with one or more children under the age of 18.

Presidential Gardens FAQ, Attachment 2

NOTICE OF NON-DISCRIMINATION, THE RIGHT TO REASONABLE ACCOMMODATION FOR PERSONS WITH DISABILITIES, AND THE RIGHT TO FREE LANGUAGE ASSISTANCE FOR PEOPLE WITH LIMITED ENGLISH PROFICIENCY

Non-Discrimination

Maloney Properties, Inc. does not discriminate on the basis of any status protected by federal, state, or local law, in the admission or access to, or treatment or employment in, its programs, services and activities including, but not limited to, the following: race, color, religion, sex, national origin, familial status, disability, sexual orientation, gender identity or expression, marital status, age, ancestry, genetic information, veteran status, receipt of public assistance, because someone is, has been or is threatened with being the victims of domestic abuse, or has obtained, or sought, or is seeking relief from any court in the form of a restraining order for protection from domestic abuse.

Maloney Properties, Inc. has designated Kathy Broderick to coordinate compliance with applicable federal and state nondiscrimination requirements and to address grievances applicants and residents may have. The following is her contact information:

Maloney Properties, Inc.
27 Mica Lane
Wellesley, MA 02481
Telephone: (781) 943-0200, extension 255; Relay: 711

Also, if you believe you have been discriminated against, you may file a formal complaint with the Department of Housing and Urban Development (HUD) and local Fair Housing Agency. The contact information for HUD's Fair Housing Office and the Fair Housing Agencies in the states where our sites are located is attached to this notice.

Reasonable Accommodation for People with Disabilities

If you or any member of your household have a disability and as a result need any of the following in order to have an equal opportunity to apply to or live in our development, or participate in services and programs we offer, please let us know:

- A change in a rule, policy, procedure or service;
- A physical change or modification in your apartment, such as grab bars or lowering the cabinets;
- A specific type of unit such as one that is accessible to individuals with mobility impairments, visual impairments or hearing impairments;
- A physical change or modification in some other part of the housing site; and
- A preferred way for us to communicate with you or give you information, such as Braille, large print or using a hearing interpreter;

These kinds of changes are called reasonable accommodations. We will provide a requested reasonable accommodation if:

- your disability is obvious or you can document that you have a disability;
- the nexus or connection between your disability and the need for the accommodation is obvious or you can document it; and
- your request does not pose an undue financial and administrative burden or fundamental change in the program, which means in simple language if it is not too expensive and too difficult to arrange or do, or does not require us to do something that the housing program is not designed to do or would prevent us from doing what we are required to do.

We will give you an answer as to whether we can provide the accommodation within ten (10) business days unless there is a problem getting the information we need, or unless you agree to a longer time. We will let you know if we need more information or documentation from you or if we would like to talk to you about other ways to meet your needs.

If we turn down your request, we will explain the reasons. If you want, you may then give us information that addresses the reason why we turned down your request.

A REASONABLE ACCOMMODATION REQUEST FORM is available at the management office listed below. Let us know if you need help filling out the form or if you want to give us your request in some other way. Please do not hesitate to contact the management office.

NOTE: All information you provide will be kept confidential and be used only to enable you to have an equal opportunity to apply to or enjoy your housing, including services and the common areas.

Free Language Assistance for People with Limited English Proficiency

If your primary language is not English and as a result you have difficulty reading, writing or understanding English, we will provide you free language assistance so you can apply to our housing program or communicate with us regarding a housing related matter. If your primary language is not English and as a result you have Limited English proficiency, please put a checkmark next to your primary language on the attached "I SPEAK" form and return the form to the management office as listed below. We will do our best to try to accommodate your request in a timely manner. Please contact the management office if you have any suggestions regarding how we can best meet your language needs or if you have any questions about our free language assistance.

Property Contact Information:
Presidential Gardens
140 Evergreen Drive
Bradford, MA 01835
Phone: 978.373.2543 Relay: 711



Presidential Gardens and Maloney Properties, Inc. do 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, Relay #711, or at Maloney Properties, Inc., 27 Mica Lane, Wellesley, MA 02481

REASONABLE ACCOMMODATION REQUEST FORM

Any applicant or resident with a disability, his/her guardian, or any person legally authorized by an applicant or resident with the disability may fill out this form. Please know that there must be a nexus (connection) between the applicant or resident's disability and the requested change. Please let us know if you need assistance completing the form.

Head of Household: _____ Phone: _____

Address: _____

Person completing this form (Circle as applicable: Applicant / Resident / Guardian / Person Legally Authorized by

Applicant or Resident to Contract on his/her Behalf): _____ Phone: _____

Address: _____

Name of applicant or resident who has a disability and for whom this accommodation is being requested:

Name: _____

Relation to Head of Household: _____

Relation to the Person Completing this Form: _____

I request the following change or changes because I, or the person on behalf I am making this request, needs this change as a result of a disability in order to have an equal opportunity to apply to or live at the site as the other applicants or residents. Check the kind of change(s) needed.

☐ a. A unit designed for individuals with vision impairments.

☐ b. A unit designed for individuals with hearing impairments.

☐ c. A fully accessible unit.

☐ d. A unit with the following specific physical modification(s) or design feature(s):

☐ e. A specific type or location of a parking space. Please specify what is needed:

☐ f. An assistance animal (an animal that works, provides assistance or performs tasks for the benefit of a person with a disability or an animal that provides emotional support that alleviates one or more identified symptoms or effects of a person's disability)

☐ g. A change in how we communicate with you or provision of an auxiliary aid(s) to ensure effective communication with you (these include, tactile signs, visual doorbell, reader, interpreter, communication in large print or Braille, and recordings of information. Appropriate auxiliary aids don't include individually prescribed devices). The specific auxiliary aid(s) needed are described below:

☐ h. A change in a rule, policy, procedure or services as described below:

☐ i. Other, as described below:

3. Please provide the name, address, telephone/TTY number and relationship of at least one person that you know professionally who can verify that you (or the person on whose behalf you are requesting the accommodation) have a disability and as a result need the accommodation in order to have an equal opportunity to apply to or enjoy your (his/her) housing or fully participate in a program or service this development offers.

Name: _____

Address: _____

Telephone #: _____ Relationship: _____

Name: _____

Address: _____

Telephone #: _____ Relationship: _____

4. If you asked for a change to your apartment or to the housing complex, please use this space to list any company or organization that might help us locate or build anything specific to your needs. (If you do not know of any, we will try to get this information ourselves.)

Name: _____ Phone: _____

Fax: _____ Email: _____

Signature of person with the disability or his/her legal guardian:

Signature: _____

Date: _____



Presidential Gardens and Maloney Properties, Inc. do 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, Relay #711, or at Maloney Properties, Inc., 27 Mica Lane, Wellesley, MA 02481

RELEASE OF INFORMATION BY APPLICANT/RESIDENT FOR PROFESSIONAL 3RD PARTY VERIFICATION OF NEED FOR A REASONABLE ACCOMMODATION

1) I, _____ hereby authorize
Maloney Properties, Inc. to obtain information to substantiate my request for:

- ☐ a. A unit designed for individuals with vision impairments.
- ☐ b. A unit designed for individuals with hearing impairments.
- ☐ c. A fully accessible unit.
- ☐ d. A unit with the following special physical modification(s) or design feature(s):

- ☐ e. A specific type or location of a parking space. Please specify what is needed:

- ☐ f. An assistance animal (an animal that works, provides assistance or performs tasks for the benefit of a person with a disability or an animal that provides emotional support that alleviates one or more identified symptoms or effects of a person's disability)
- ☐ g. A change in how we communicate with you or provision of an auxiliary aid(s) to ensure effective communication with you (these include, tactile signs, visual doorbell, reader, interpreter, communication in large print or Braille, and recordings of information. Appropriate auxiliary aids don't include individually prescribed devices). The specific auxiliary aid(s) needed are described below:

- ☐ h. A change in a rule, policy, procedure or services as described below:

- i. ☐ Other, as described below:

2) I, _____ DO _____ DON'T _____
give permission for my designated 3rd party professional to describe any alternative accommodation that adequately addresses my disability related need prior to Maloney Properties, Inc. determining if my requested accommodation is reasonable. I understand that Maloney Properties, Inc. may need information regarding alternative acceptable accommodations because even if Maloney Properties, Inc. verifies that I have a disability and the accommodation I requested is necessary, Maloney Properties, Inc. may determine the specific accommodation I requested will pose an undue financial and administrative burden or fundamentally alter the nature of the program. The sole purpose of me providing permission now for the release of alternative accommodations is to enable Maloney Properties, Inc.

to provide as expeditiously as possible an alternative accommodation if it determines the specific accommodation I requested will pose an undue financial and administrative burden or fundamentally alter the nature of the program.

I understand that Maloney Properties, Inc. has the right to verify that I have a disability (not the nature or severity of my disability if my disability isn't obvious) and whether or not as a result of my disability I need the reasonable accommodation I request in order to have an equal opportunity to apply to or enjoy my housing or participate fully in a program or service offered by this Development if the need isn't obvious. This verification is solely for the purpose of determining this, and if permission has been granted in number 2 above, if there are any alternative acceptable accommodations.

I hereby authorize the release of the requested information. Information contained under this consent is limited to information that is no older than 12 months. There are circumstances that would require the owner to verify information that is up to 5 years old, which would be authorized by me on a separate consent. Please complete this form in full and return it to the management office as soon as possible.

Applicant/Tenant's Signature or his/her Legal Guardian

Date

Title 18, Section 1001 of the U.S. Code states that a person is guilty of a felony for knowingly and willingly making false or fraudulent statements to any department of the United States Government. HUD and any owner (or any employee of HUD or the owner) may be subject to penalties for unauthorized disclosures or improper use of information collected based on the consent form. Use of the information collected based on this verification form is restricted to the purposes cited above. Any person who knowingly or willingly requests, obtains or discloses any information under false pretenses concerning an applicant or participant may be subject to a misdemeanor and fined not more than \$5,000. Any applicant or participant affected by negligent disclosure of information may bring civil action for damages, and seek other relief, as may be appropriate, against the officer or employee of HUD or the owner responsible for the unauthorized disclosure or improper use. Penalty provisions for misusing the social security number are contained in the Social Security Act at 208 (a) (6), (7) and (8). Violation of these provisions are cited as violations of 42 U.S.C. 408 (a) (6), (7) and (8).



Presidential Gardens and Maloney Properties, Inc. do 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, Relay #711, or at Maloney Properties, Inc., 27 Mica Lane, Wellesley, MA 02481



PROFESSIONAL 3RD PARTY VERIFICATION OF NEED FOR A REASONABLE ACCOMMODATION

Reasonable Accommodation Request for: _____

Dear Maloney Properties:

Enclosed is a form signed by, or on behalf of, the above-named individual asking you to verify that: this individual has a disability; and as a result of such disability, he/she needs a reasonable accommodation in order to have an equal opportunity to apply to or live in this development, or fully participate in a program or service this development offers residents.

Maloney Properties, Inc. is required by federal and state laws to make reasonable changes in rules, policies, procedures and services, as well as physical changes to enable a person with a disability to have equal access to, and enjoyment of, his/her apartment and other facilities and programs at the site. Please note that such changes must be necessary as a result of the person's disability. There must be an identifiable relationship or nexus between the requested accommodation and the individual's disability.

The accommodation described on the enclosed form has been requested. If asked, please indicate on that form whether you believe the above-named individual has: 1) a disability within the definition provided; and 2) whether the accommodation is necessary as a result of his/her disability to enable him/her to have an equal opportunity to apply to or live in the property or fully participate in a program or service this development offers. If we don't ask you to verify that this individual has a disability it is because it is obvious that he/she does.

The verification form also asks about alternative acceptable accommodations. Please answer this question ONLY if the applicant/tenant (or his/her guardian) has given you permission to do so on the release form. We have asked this question because if Maloney Properties, Inc. verifies that the accommodation requested is necessary it may also determine the specific accommodation requested will pose an undue financial and administrative burden or fundamentally alter the nature of the program. In case this occurs, Maloney Properties, Inc. wants to know if there is an alternative accommodation that will address this individual's disability related need.

This form should not be used to discuss the nature or severity of the person's disability or any other information that isn't directly related to the request for an accommodation. Also, please do not supply any information relative to the nature or severity of this individual's disability.

Please note that the above-named individual, or another person on behalf of this individual, has signed the form requesting you to answer the questions. If you have any questions, please call

_____ (name) at
_____ (voice)/Relay # 711.

Thank you.
Please return the attached form to:

PROFESSIONAL 3RD PARTY VERIFICATION OF NEED FOR A REASONABLE ACCOMMODATION

Applicant/Tenant's Name: _____

Please fill out all questions as authorized on the attached Release of Information signed by the Applicant/Resident or his/her Guardian. Do not complete the question regarding alternative accommodations if it is not specifically authorized by the Applicant/Resident in Part 2 of the attached Release of Information signed by the Applicant/Resident. If you have any questions about filling out this form, please call the Property Manager at phone: _____ (voice)/ Relay 711. Thank you.

1. The individual named above has requested the following:

- ☐ a. A unit designed for individuals with vision impairments.
- ☐ b. A unit designed for individuals with hearing impairments.
- ☐ c. A fully accessible unit.
- ☐ d. A unit with the following special physical modification(s) or design feature(s):

- ☐ e. A specific type or location of a parking space. Please specify what is needed:

- ☐ f. An assistance animal (an animal that works, provides assistance or performs tasks for the benefit of a person with a disability or an animal that provides emotional support that alleviates one or more identified symptoms or effects of a person's disability)
- ☐ g. A change in how we communicate with you or provision of an auxiliary aid(s) to ensure effective communication with you (these include, tactile signs, visual doorbell, reader, interpreter, communication in large print or Braille, and recordings of information. Appropriate auxiliary aids don't include individually prescribed devices). The specific auxiliary aid(s) needed are described below:
- ☐ h. A change in a rule, policy, procedure or services as described below:

- ii. ☐ Other, as described below:

2. Please answer the following questions that are checked so we can determine if he/she has a disability in accordance with the definition below and needs the requested accommodation as a direct result of his/her disability in order to have an equal opportunity to apply to or enjoy his/her housing or fully participate in a program or service offered by this development. If the first box isn't checked it is because it is obvious to us that the person satisfies the definition of a person with a disability below and we don't need you to verify whether he/she has a disability.

☐ a. In my opinion, the individual named above is a person with a disability as defined below:

☐ Yes ☐ No ☐ No Knowledge

- Has a physical or mental impairment that substantially limits one or more major life activities;
- Has a record of having such an impairment; or
- Is regarded as having such impairment.

If no, or you do not have information to enable you to answer this question, please proceed to the signature section.

☐ b. In my opinion, as a result of this person's disability, he/she needs the requested accommodation in order to have an equal opportunity to apply to or enjoy his/her housing or fully participate in a program or service offered by this development

☐ Yes ☐ No ☐ No Knowledge

- **If no,** or you do not have information to enable you to answer this question please proceed to the signature section.
- **If yes,** to your knowledge, is there an alternative accommodation(s) that would adequately address the requester's disability related need? Please note that you may only answer this question if you have been given permission by the requester to do so in #2 of the attached Release of Information.

☐ Yes ☐ No ☐ No Knowledge

If yes, please provide any alternative accommodation(s) that will adequately address the applicant/tenant's disability related need:



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VERIFICATION STATEMENT

I certify the information above to be my best professional judgment and knowledge. Under the penalties of perjury, I swear or affirm that the information in this statement is true and correct.

Signature: _____ Date: _____

Name (type or print): _____ Title/Position: _____

Relationship to Applicant/Tenant: _____

Agency/Business Name: _____

Address: _____

Phone: _____ Email: _____

Title 18, Section 1001 of the U.S. Code states that a person is guilty of a felony for knowingly and willingly making false or fraudulent statements to any department of the United States Government. HUD and any owner (or any employee of HUD or the owner) may be subject to penalties for unauthorized disclosures or improper use of information collected based on the consent form. Use of the information collected based on this verification form is restricted to the purposes cited above. Any person who knowingly or willingly requests, obtains or discloses any information under false pretenses concerning an applicant or participant may be subject to a misdemeanor and fined not more than \$5,000. Any applicant or participant affected by negligent disclosure of information may bring civil action for damages, and seek other relief, as may be appropriate, against the officer or employee of HUD or the owner responsible for the unauthorized disclosure or improper use. Penalty provisions for misusing the social security number are contained in the Social Security Act at 208 (a) (6), (7) and (8). Violation of these provisions are cited as violations of 42 U.S.C. 408 (a) (6), (7) and (8).

**THIS AGREEMENT MUST BE SIGNED AND RETURNED
WITH THE PRELIMINARY APPLICATION**

Current income limits (as of 2016):

Number of Household Members	Minimum Annual Household Income
1 Person	34,350
2 Person	39,250
3 Person	44,150
4 Person	49,050
5 Person	53,000
6 Person	56,900

NOTE: These income guidelines are determined by the Department of Housing and Urban Development (HUD) and are subject to change without notice. This link leads to the current income limits: <https://www.huduser.gov/portal/datasets/il>

If annual household income is above these limits an original, completed preliminary application may be returned to the management office by mail or in person. Faxed copies will NOT be accepted. Within thirty (30) days of our receipt of the completed application, applicant will be notified in writing of status on the waitlist. Once applicant has been placed on the waitlist, it is the applicant's responsibility to provide the management office with written notification of any changes to the application, including but not limited to mailing address, household composition and annual household income. We do not accept verbal changes to the waitlist application.

A waitlist applicant may receive written requests (up to two requests per year) from the management office to confirm applicant's information and address. Applicant must provide a written reply to these requests by the deadline specified to maintain the applicant's status on the list. Applicant will receive written notification from the office when the application has reached the top five applicants on the list. Once you receive this notification, applicant will be required to complete an updated application.

Failure to respond to the update letter or to the top-of-list notification within the specified timeframe will result in applicant's name being permanently removed from the waitlist.

Applications must be filled out completely and signed by all household members aged 18 or over. Faxed copies are NOT accepted. Management will reject all incomplete applications and applications not meeting the above income requirements. Once a notice has been placed in the Lawrence Eagle-Tribune, Sampan and Rumbo newspapers that the waitlists are closed, we will immediately stop accepting additional applications. Management is not responsible for applications lost, damaged, or delayed in the mail.

All household members aged 18 or over must sign below:

I have read (or have had read to me) and understand the above waitlist policies. I further understand that failure to comply with the above policies could delay my application and may result in my application being rejected or my name being removed from the waitlist.

Applicant #1

Date

Applicant #2

Date

Applicant #3

Date

Applicant #4

Date

Language Identification Cards

Side 1 of 2

Instructions: Place a check by the language spoken. ☒

<input type="checkbox"/>	Mark this box if you read or speak English.	English
<input type="checkbox"/>	ضع علامة في هذا المربع إذا كنت تقرأ أو تتحدث العربية.	Arabic
<input type="checkbox"/>	Խնդրում ենք նշում կատարեք այս քառակուսում, եթե խոսում կամ կարդում եք հայերեն:	Armenian
<input type="checkbox"/>	যদি আপনি বাংলা পড়েন বা বলেন তা হলে এই বাক্সে দাগ দিন।	Bengali
<input type="checkbox"/>	ឈ្មួចញាក់ក្នុងប្រអប់នេះ បើអ្នកអាន ឬនិយាយភាសា ខ្មែរ ។	Cambodian
<input type="checkbox"/>	Motka i kakhon ya yangin ûntûngnu' manaitai pat ûntûngnu' kumentos Chamorro.	Chamorro
<input type="checkbox"/>	如果你能读中文或讲中文，请选择此框。	Simplified Chinese
<input type="checkbox"/>	如果你能讀中文或講中文，請選擇此框。	Traditional Chinese
<input type="checkbox"/>	Označite ovaj kvadratić ako čitate ili govorite hrvatski jezik.	Croatian
<input type="checkbox"/>	Zaškrtněte tuto kolonku, pokud čtete a hovoříte česky.	Czech
<input type="checkbox"/>	Kruis dit vakje aan als u Nederlands kunt lezen of spreken.	Dutch
<input type="checkbox"/>	اگر خواندن و نوشتن فارسی بلد هستید، این مربع را علامت بزنید.	Farsi
<input type="checkbox"/>	Cocher ici si vous lisez ou parlez le français.	French
<input type="checkbox"/>	Kreuzen Sie dieses Kästchen an, wenn Sie Deutsch lesen oder sprechen.	German
<input type="checkbox"/>	Σημειώστε αυτό το πλαίσιο αν διαβάζετε ή μιλάτε Ελληνικά.	Greek
<input type="checkbox"/>	Make kazyé sa a si ou li oswa ou pale kreyòl ayisyen.	Haitian Creole
<input type="checkbox"/>	अगर आप हिन्दी बोलते या पढ़ सकते हैं तो इस बक्स पर चिह्न लगाएँ।	Hindi
<input type="checkbox"/>	Kos lub voj no yog koj paub twm thiab hais lus Hmoob.	Hmong
<input type="checkbox"/>	Jelölje meg ezt a kockát, ha megérti vagy beszéli a magyar nyelvet.	Hungarian

Language Identification Cards

Side 2 of 2

Instructions: Place a check by the language spoken. ☒

<input type="checkbox"/> Marchi questa casella se legge o parla italiano.	<i>Italian</i>
<input type="checkbox"/> 日本語を読んだり、話せる場合はここに印を付けてください。	<i>Japanese</i>
<input type="checkbox"/> 한국어를 읽거나 말할 수 있으면 이 칸에 표시하십시오.	<i>Korean</i>
<input type="checkbox"/> ໃຫ້ໝາຍໃສ່ຊ່ອງນີ້ ຖ້າທ່ານອ່ານຫຼືປາກມາສາລາວ.	<i>Laotian</i>
<input type="checkbox"/> Kakōlleiki bōok (box) in elaññe kwōjela kajin im waakin (read) majōl.	<i>Marshallese</i>
<input type="checkbox"/> Prosimy o zaznaczenie tego kwadratu, jeżeli posługuje się Pan/Pani językiem polskim.	<i>Polish</i>
<input type="checkbox"/> Assinale este quadrado se você lê ou fala português.	<i>Portuguese</i>
<input type="checkbox"/> Însemnați această căsuță dacă citiți sau vorbiți românește.	<i>Romanian</i>
<input type="checkbox"/> Пометьте этот квадратик, если вы читаете или говорите по-русски.	<i>Russian</i>
<input type="checkbox"/> Обележите овај квадратик уколико читате или говорите српски језик.	<i>Serbian</i>
<input type="checkbox"/> Označte tento štvorček, ak viete čítať alebo hovoriť po slovensky.	<i>Slovak</i>
<input type="checkbox"/> Marque esta casilla si lee o habla español.	<i>Spanish</i>
<input type="checkbox"/> Markahan itong kuwadrado kung kayo ay marunong magbasa o magsalita ng Tagalog.	<i>Tagalog</i>
<input type="checkbox"/> ให้กาเครื่องหมายลงในช่องถ้าท่านอ่านหรือพูดภาษาไทย.	<i>Thai</i>
<input type="checkbox"/> Maaka 'i he puha ni kapau 'oku ke lau pe lea fakatonga.	<i>Tongan</i>
<input type="checkbox"/> Відмітьте цю клітинку, якщо ви читаете або говорите українською мовою.	<i>Ukrainian</i>
<input type="checkbox"/> اگر آپ اردو پڑھتے یا بولتے ہیں تو اس خانے میں نشان لگائیں۔	<i>Urdu</i>
<input type="checkbox"/> Xin đánh dấu vào ô này nếu quý vị biết đọc và nói được Việt Ngữ.	<i>Vietnamese</i>
<input type="checkbox"/> באצייכנט דעם קעסטל אויב איר לייענט אדער רעדט אידיש.	<i>Yiddish</i>