

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

THIS SECTION FOR APPLICANT:

- ← Mail this form to the address at left.
- ← Applicant, do not fax this application to HousingWorks.

Date Generated:

Fold on this line

Dear

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

THIS SECTION FOR WAITLIST ADMINISTRATOR:

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](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 Received. Application will be stamped to show when it was received:





## **RENTAL APPLICATION**

### **Primary Applicant:**

Name: \_\_\_\_\_

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

City/State/Zip: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ SS#: \_\_\_\_\_

Telephone #: \_\_\_\_\_ Work #: \_\_\_\_\_

Current Rent: \$ \_\_\_\_\_

Number of People to Occupy Apartment: \_\_\_\_\_

Any Pets? \_\_\_\_\_ Type of Pet: \_\_\_\_\_

*Co-Applicants: All persons 18 years and over must be listed on the application.*

	Name	D.O.B	SS#
1.	_____	_____	_____
2.	_____	_____	_____
3.	_____	_____	_____
4.	_____	_____	_____

### **Present Landlord:**

Name: \_\_\_\_\_

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

City/State/Zip: \_\_\_\_\_

### **Previous Landlord:**

Name: \_\_\_\_\_

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

City/State/Zip: \_\_\_\_\_

Applicant Email: \_\_\_\_\_

**Automobiles:**

No. of Automobiles: \_\_\_\_\_

Make/Year/Color: \_\_\_\_\_

Registration #: \_\_\_\_\_

**Income:** *Each Tenant MUST provide income verification documentation  
(pay stubs / W2 / tax return / social security notice)*

Current Employer

Name: \_\_\_\_\_

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

City/State/Zip: \_\_\_\_\_

Occupation: \_\_\_\_\_ Salary: \_\_\_\_\_

Length of Employment: \_\_\_\_\_

**Other Income:**

	Source	Monthly Amount
1.	_____	_____
2.	_____	_____

**Race:** *Please note this section is optional. The information will be used to monitor our Affirmative Fair Market Programs as required by State and Federal Laws.*

Hispanic \_\_\_\_\_

Black \_\_\_\_\_

Asian \_\_\_\_\_

Other (Specify) \_\_\_\_\_

American Indian \_\_\_\_\_

White \_\_\_\_\_

Cape Verdean \_\_\_\_\_

**Consent to Background Check and Certification of Information provided:**

*By signing below, I certify that the above information is completely true and accurate. Furthermore, I hereby consent to allow the Owner of the Property itself, or through its designated agents or employees, to obtain consumer credit report, criminal information, verification of income, and landlord references on each applicant that is applying for residency. I further consent to allow the Owner or its agents to obtain additional consumer credit reports and/or criminal record reports for myself in the future to update or review my account. Upon my request, the Owner will tell me when consumer or criminal reports were requested and the names and addresses of any consumer reporting agency that provided such reports.*

Applicants' Signatures: \_\_\_\_\_ Date: \_\_\_\_\_

\_\_\_\_\_ Date: \_\_\_\_\_

