

The name of the waitlist I’m applying for is: _____

Some waitlists are closed: *Before sending this application*, check <http://www.housingworks.net/> to see what is open

Office Only: Date/Time Stamp

You must answer every question on this application: respond to questions that are not applicable by writing “N/A”.
Incomplete applications may be returned or discarded.

Your Name: _____

Long-Term Mailing Address (an address that may work for the next 3-5 years):

City/State/Zip: _____

Phones: _____

Email: _____

MAIL TO:

Allow 3 wks for response

Do you have a **Social Security Number** (SSN)? ☐ Yes ☐ No *If “Yes” you must provide the SSN below.*

The **SSN** for the head of household is: _____

What is your **date of birth**? _____ What is your **gender**? _____

Race (white, black, asian, etc)? _____ **Also:** ☐ Hispanic or ☐ non-Hispanic?

What was your **mother’s last name** when she was born? *Protects your privacy*) _____

How many people will be living in the unit? _____ people. What **unit size** are you seeking? _____ BR

Describe your **Income Sources** (Employment, SSI, TAFDC etc.) _____

What is your family’s **ANNUAL** income? \$ _____ (do NOT write an hourly, weekly, or monthly amount!)

☐ YES ☐ NO Do you **have a rental voucher** or some other form of regular rental assistance?

Specify: ☐ Section 8 ☐ MRVP ☐ AHVP ☐ Flex Funds

☐ YES ☐ NO Do you need a **wheelchair accessible unit** (or a “no-steps” unit)?

☐ YES ☐ NO Do you need reasonable accommodations, either during the application period or tenancy?

☐ YES ☐ NO Are you or any member of your household subject to a lifetime registration requirement under a State Sex Offender Registration program?

Priority Status: We may or may not be able to take your priority need into consideration, but it is helpful for us to know what those priorities are: _____



30 Wallingford Road, Brighton, MA 02135-4753
Tel. 617/ 912-8421, TDD 617/789-4868



RENTAL APPLICATION

Thank you for your interest in JCHE. This application may be used for Ulin House and Leventhal House in Brighton, and Golda Meir House and Coleman House in Newton. Please complete and return this form as soon as possible. Upon receipt, your name will be placed on the appropriate waiting list for the apartment type and location(s) you have selected.

GENERAL INFORMATION

The following information is required for each person who will be living in your apartment at JCHE.

Note: Social Security Numbers and Immigration Status must be verified. **Please attach a copy of your Social Security card(s) and a copy of the evidence of your legal immigrant status (for non-citizens), such as a Green Card or form I-94.**

Head of Household	<input type="checkbox"/> M <input type="checkbox"/> F			
	<i>Last Name</i>	<i>First name</i>	<i>Sex</i>	<i>Social Security No.</i> <i>Date of Birth</i>
U.S. Citizen <input type="checkbox"/> Yes <input type="checkbox"/> No If not a US Citizen: Alien Registration or Admission Number _____				
2 nd Occupant	<input type="checkbox"/> M <input type="checkbox"/> F			
<input type="checkbox"/> Spouse/Partner	<i>Last Name</i>	<i>First name</i>	<i>Sex</i>	<i>Social Security No.</i> <i>Date of Birth</i>
<input type="checkbox"/> Relative				
<input type="checkbox"/> Unrelated	U.S. Citizen <input type="checkbox"/> Yes <input type="checkbox"/> No If not a US Citizen: Alien Registration or Admission Number _____			
3 rd Occupant	<input type="checkbox"/> M <input type="checkbox"/> F			
<input type="checkbox"/> Relative	<i>Last Name</i>	<i>First name</i>	<i>Sex</i>	<i>Social Security No.</i> <i>Date of Birth</i>
<input type="checkbox"/> Unrelated				
U.S. Citizen <input type="checkbox"/> Yes <input type="checkbox"/> No If not a US Citizen: Alien Registration or Admission Number _____				

What is your current address? (This must be the address where you are living now.)

Street _____
City _____ State _____ Zip _____
Telephone _____ E-mail _____

Whom may we contact if we are unable to reach you?

Name _____
☐ Child ☐ Sister or Brother ☐ Family or Friend ☐ Social Worker ☐ Attorney ☐ Other
Street _____
City _____ State _____ Zip _____
Telephone (Home) _____ (Office/cell) _____
E-mail _____

To whose address should we mail a reconfirmation form each year, so that you may indicate your continued interest in JCHE housing? ☐ Applicant ☐ Contact Person

Other: Name _____
Street _____
City _____ State _____ Zip _____

For Office
Use only

Application #

Date Received

INCOME ELIGIBILITY

HUD adjusts income limits for subsidized housing yearly. (Current annual maximums are listed below).

What is your current total annual GROSS income from pensions, Social Security benefits, wages and interest from assets?

\$ _____/Year

("Income from assets" includes income from stocks, bonds, real estate, checking and savings account balances, certificates of deposit, money market accounts, IRAs, and the surrender value of whole life insurance policies.)

APARTMENT SELECTION

At least one occupant of each apartment must be age 62 or older (contact office for any exceptions).

Check all housing for which you wish to apply. A separate waiting list is maintained for each choice.

Type of Housing	Location	Estimated Waiting Time	Income Limit (One Person)	Income Limit (Two Persons)
Studio (one person only)				
_____ Ulin-Leventhal Houses	Brighton	1 year +	\$45,500/41,100	_____
One Bedroom (two persons only)				
_____ Ulin-Leventhal Houses	Brighton	2 years +	_____	\$52,000/46,980
One Bedroom (one or two persons)				
_____ Golda Meir House	Newton	3 years +	\$45,500	\$52,000
_____ Coleman House	Newton	3 years +	\$34,250	\$39,150
Two Bedrooms (two or more persons, but couples are not eligible)				
_____ Golda Meir House	Newton	Unpredictable	_____	\$52,000
Wheelchair Accessible, One/Two Bedrooms (at least one handicapped person)				
_____ Ulin –Leventhal Houses	Brighton	Unpredictable	\$45,500/41,100	\$52,000/46,980
_____ Golda Meir House	Newton	Unpredictable	\$45,500	\$52,000
_____ Coleman House	Newton	Unpredictable	\$34,250	\$39,150

If you have a disability, you have the right to request a reasonable accommodation in connection with your application for housing.

Does any member of your household have a request for any accessibility or reasonable accommodation, require changes in a unit or development, or have alternative requirements for receiving communication from us?

Yes ____ No ____

If yes, please explain: _____

HOUSING INFORMATION

What is your current living situation (Please check all that apply)?

_____ I live with another person (s). Who? _____

_____ I live in a home that I own.

_____ I rent an apartment What is your current monthly rent? _____

_____ I live in Government-subsidized housing

_____ I have other living arrangements. **Please describe:** _____

Present Landlord _____

Address _____

Telephone _____

How long have you lived at your present address? From _____ To _____

Have you ever been evicted from a rental unit? Yes ____ No ____

If yes, please explain: _____

GOLDA MEIR HOUSE

MARKET RENT APARTMENTS

There are 23 non-subsidized apartments at Golda Meir House, with current monthly rents of \$1331 for one bedroom and \$1481 for two bedrooms (both subject to change). *The current wait list is approximately 3 years.*

Are you interested in a market rent apartment at Golda Meir House? Yes ____ No ____

A “yes” answer will not affect your application for a subsidized apartment.

MEALS SERVICE

Golda Meir House provides both housing and a mandatory meals program. A Kosher buffet lunch is offered weekdays, Monday-Friday, 11:30-1:00. Residents **must purchase**, at a minimum, a monthly \$87 meal ticket (price subject to change).

Do you understand that accepting a rental unit at Golda Meir House requires participation in this meal program? Yes ____ No ____

OPTIONAL INFORMATION

It would be helpful to us in performing our responsibilities under Fair Housing Laws if you identify yourself by one of the following designations (*check one in each category*):

Race

☐ White ☐ Black ☐ Asian ☐ Amer. Indian/Alaskan Native ☐ Other

Ethnicity

☐ Hispanic ☐ Non-Hispanic

Why do you want to move? _____

JCHE 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.

Section 214 of the Housing and Community Development Act of 1980 prohibits HUD from making housing financial assistance available to certain categories of noncitizens.

If this Section 214 review (of the Housing and Community Development Act of 1980 as amended) results in a determination of ineligibility, you will have an opportunity to appeal the decision.

If only certain members of your family are eligible for assistance, a reduced subsidy amount may be provided, based on the number of household members who are eligible

RELEASE

I understand that this application is not an offer of housing. I hereby certify that the information furnished on this application is true and complete, to the best of my knowledge and belief. I certify that I understand that false statements or information are punishable as applicable under State or Federal Law and may result in the cancellation of this application.

I hereby authorize JCHE to obtain a consumer report, and any other information it deems necessary, for the purpose of evaluating my application. I understand that such information may be included, but is not limited to, credit history, civil and criminal information, records of arrest, rental history, employment/salary details, vehicle records, licensing records, and/or any other necessary information.

I hereby expressly release JCHE, and any procurer or furnisher of information, from any liability whatsoever in the use, procurement, or furnishing of such information, and understand that my application information may be provided to various local, state and/or federal government agencies, including, without limitation, various law enforcement agencies.

I hereby certify that I have read the question on page 2 describing the right to reasonable accommodation for persons with disabilities.

Signed under the pains and penalties of perjury.

Head of Household/Applicant

Date

Co-Applicant

Date



JCHE is a non-smoking community

Housing History, Page 1

Note: you can often locate landlord information by using the Tax Assessor's website in each town (or by calling the Tax Assessor's phone number in most towns): To determine if there is an online Tax Assessor page for a town search the web like this: "Tax Assessor, Boston MA" or "Property Assessment, Dallas TX".

CURRENT RESIDENCE

DATES YOU LIVED THERE:

Name on the lease _____ to: _____ or present

Address you lived at: _____
Street and Apt# City State Zip

Landlord's Name and Address _____

Landlord Tel: _____

Did this landlord bring any court action against the leaseholder or you? ☐ Yes ☐ No

Did this landlord return your security deposit? (check one) ☐ Yes ☐ No ☐ N/A

PRIOR RESIDENCE

DATES YOU LIVED THERE:

Name on the lease _____ to _____

Address you lived at: _____
Street and Apt# City State Zip

Landlord's Name and Address _____

Landlord Tel: _____

Did this landlord bring any court action against the leaseholder or you? ☐ Yes ☐ No

Did this landlord return your security deposit? (check one) ☐ Yes ☐ No ☐ N/A

RESIDENCE BEFORE THAT

DATES YOU LIVED THERE:

Name on the lease _____ to _____

Address you lived at: _____
Street and Apt# City State Zip

Landlord's Name and Address _____

Landlord Tel: _____

Did this landlord bring any court action against the leaseholder or you? ☐ Yes ☐ No

Did this landlord return your security deposit? (check one) ☐ Yes ☐ No ☐ N/A

Housing History, Page 2

RESIDENCE BEFORE THAT

DATES YOU LIVED THERE:

Name on the lease _____ to _____

Address you lived at: _____
Street and Apt# City State Zip

Landlord's Name and Address _____

Landlord Tel: _____

Did this landlord bring any court action against the leaseholder or you? ☐ Yes ☐ No

Did this landlord return your security deposit? (check one) ☐ Yes ☐ No ☐ N/A

RESIDENCE BEFORE THAT

DATES YOU LIVED THERE:

Name on the lease _____ to _____

Address you lived at: _____
Street and Apt# City State Zip

Landlord's Name and Address _____

Landlord Tel: _____

Did this landlord bring any court action against the leaseholder or you? ☐ Yes ☐ No

Did this landlord return your security deposit? (check one) ☐ Yes ☐ No ☐ N/A

RESIDENCE BEFORE THAT

DATES YOU LIVED THERE:

Name on the lease _____ to _____

Address you lived at: _____
Street and Apt# City State Zip

Landlord's Name and Address _____

Landlord Tel: _____

Did this landlord bring any court action against the leaseholder or you? ☐ Yes ☐ No

Did this landlord return your security deposit? (check one) ☐ Yes ☐ No ☐ N/A

Housing History, Page 3

RESIDENCE BEFORE THAT

DATES YOU LIVED THERE:

Name on the lease _____ to _____

Address you lived at: _____
Street and Apt# City State Zip

Landlord's Name and Address _____

Landlord Tel: _____

Did this landlord bring any court action against the leaseholder or you? ☐ Yes ☐ No

Did this landlord return your security deposit? (check one) ☐ Yes ☐ No ☐ N/A

RESIDENCE BEFORE THAT

DATES YOU LIVED THERE:

Name on the lease _____ to _____

Address you lived at: _____
Street and Apt# City State Zip

Landlord's Name and Address _____

Landlord Tel: _____

Did this landlord bring any court action against the leaseholder or you? ☐ Yes ☐ No

Did this landlord return your security deposit? (check one) ☐ Yes ☐ No ☐ N/A

RESIDENCE BEFORE THAT

DATES YOU LIVED THERE:

Name on the lease _____ to _____

Address you lived at: _____
Street and Apt# City State Zip

Landlord's Name and Address _____

Landlord Tel: _____

Did this landlord bring any court action against the leaseholder or you? ☐ Yes ☐ No

Did this landlord return your security deposit? (check one) ☐ Yes ☐ No ☐ N/A