

Full Name:  
Address1:  
Apt # or c/o name:  
City State Zip:  
Email:  
Case Manager Email:

## THIS SECTION FOR APPLICANT:

Date Generated:

**Mail this form to the address at left.  
Be sure to complete and sign, below!**

### Dear Waitlist Administrator:

Fold on this line ———

I'm requesting an application for the following waitlist:

- ☐ My household size is \_\_\_\_\_ and my gross annual income is \$ \_\_\_\_\_ .00
- ☐ I am \_\_\_\_\_ years of age. ☐ I have a permanent mobile rental voucher.
- ☐ I have enclosed a self-addressed, stamped envelope to make it easier for you to mail the application.
- ☐ I am requesting a reasonable accommodation – I need to have the application emailed or mailed to me because of a disability. /  
*have included written verification of my disability.*
- ☐ My signature below affirms that I am truly interested in living in your development.

Thank you, **Signature of Applicant:** \_\_\_\_\_

## THIS SECTION FOR WAITLIST ADMINISTRATOR:



**Please email or mail your application or  
response to HousingWorks (info at right).**

**We will forward it to the applicant. Kindly include this page so we know  
who the response is for! Your response will reach thousands of other  
applicants/housing advocates and boost your ADA/Fair Housing  
compliance exponentially!**

**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:** \_\_\_\_\_
- ☐ **We require you to pick up the application in person unless you sent verification of disability.**

To pick up application in person, come during these office hours: \_\_\_\_\_

How to get here: ☐ onsite parking ☐ bus or subway: \_\_\_\_\_

☐ commuter rail stop: \_\_\_\_\_

☐ other transportation options available: \_\_\_\_\_

Name of Waitlist Administrator *optional*: \_\_\_\_\_

Phone of Waitlist Administrator *optional*: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ X \_\_\_\_\_