

Name: First Last:

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:

I'm requesting an application for the following waitlist:

Fold on this line ———

My household size is \_\_\_\_\_ and my gross annual income is \$ \_\_\_\_\_ .00

I am \_\_\_\_\_ years of age. ☐ I have a permanent mobile rental voucher.

- ☐ **I understand you REQUIRE a stamped envelope; I have included one.** Please send the app to HousingWorks they can get it to me fast!
- ☐ I am requesting a reasonable accommodation – I need to have the application emailed or mailed to me.  
I 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 BELOW FOR WAITLIST ADMINISTRATOR:

**Landlords: save money and time - email, mail, or fax your applicant (or response below) to HousingWorks instead.** We will forward the application to the applicant. Kindly include this page so we know who your response is for! Communicating with HousingWorks will reach up to 200,000 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 \_\_\_\_\_