REQUESTING AN APPLICATION



Email:

Applicant: Type your full name and address, including the apartment #. On the bottom line, put your email address, so we can email the application.



Mail this form to the address you see at left. Once HousingWorks receives the application, we will send it to you so that you can be the first to use it!

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APPLICANT: PLEASE COMPLETE THIS SECTION	Fold on this line
Dear Waitlist Administrator: I request an application for the following waitlist:	
Please email the application to: support@housingworks.net else	<u> </u>
Please mail the application to: HousingWorks * P.O. Box 231104 *	Boston, MA 02123
O My household size is and my gross annual income is \$00	Complete all th
O I am years of age. O I have a permanent mobile rental voucher.	annranriata —
O I have enclosed a self-addressed, stamped envelope to make it easier for you to mail the ap	itoms at loft
O I am requesting a reasonable accommodation – I need to have the application emailed or me because of a disability. I have included written verification of my disability.	mailed to
O My signature below affirms that I am truly interested in living in your development.	
Thank you, Signature of Applicant:	
IF REJECTING THE APPLICATION, please fax this page to HousingWorks at 617-536-8561. the list immediatel on our website, and you will avoid getting more requests from the nearly website! We are not giving you an application because:	
O this waitlist is closed. The only waitlists open at present are:	
O you do not appear to qualify for this property, because:	
O we require you to pick up the application in person unless you sent verificat	ion of disability.
To pick up application in person, come during these office hours:	
How to get here: O onsite parking O bus or subway:	
O commuter rail stop:	
O other transportation options available:	
Name of Waitlist Administrator	

Phone of Waitlist Administrator