INCLUSIONARY RENTAL OPPORTUNITY

Mayor Joseph A. Curtatone & Block Properties, LLC are pleased to announce two (2) income-restricted apartments located at: 3 Ward Street, Somerville

Application & Information Packets will \underline{only} be available between August 1st at 11 AM to September 30th, 2019 at 2PM

Starting on Monday, August 5^{th} applications and info. packets will be available at somervillema.gov, City Hall, the Somerville Public Libraries and the Housing Division Office.

Please read the Information Packet for further details about the unit, application process and eligibility requirements.

Address	Unit Type	Tier	# of Units available	Rent*	No. of Bathrooms	Approx. Size	Floor	No. of People in Household
3 Ward	Studio (Unit 303)	1	1	\$917	1	679 sq. ft.	3 rd	1-2 Persons
Street	3BR (Unit 204)	2	1	\$1,728	2	1,260 sq. ft.	2 nd	3-6 Persons

Gross Annual Income Range Requirements** Adjusted by Household Size						
Household Size***	Unit 303 (Studio) Tier 1 (<50% AMI)	Unit 204 (3BR) Tier 2 (51%-80% AMI)				
1	\$24,888 -\$41,500	N/A				
2	\$24,888-\$47,400	N/A				
3	N/A	\$53,351-\$80,300				
4	N/A	\$59,251-\$89,200				
5	N/A	\$64,001-\$96,350				
6	N/A	\$68,751-\$103,500				

^{*}Tenants pay electric heating, gas cooking and hot water. Applicable pet fees (\$25) and parking fees (\$75) are deducted from rent

**Minimum income requirement waived for households with MRVP, Section 8, PASS or other mobile rental voucher

*** Head of household cannot be full-time student; other eligibility requirements apply.

Applicants should attend an information session and read the information packet before submitting an application.

Late or incomplete applications will not be entered into the lottery.

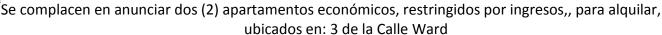
Applications sent to other emails or faxes will not be accepted.

	IMPORTANT DATES						
	Date & Time	Location					
Information Sessions	Thursday, August 1 st , 2019 at 11AM	Visiting Nurse Association of Eastern Massachusetts (VNA) 259 Lowell Street, Somerville, MA 02144					
	Thursday, September 12 th , 2019 at 6PM	The Armory 191 Highland Ave. #1C, Somerville, MA 02143					
Application Deadline	Monday, September 30 th , 2019 at 2PM	Applications must be completed and delivered before 2PM to the Housing Division at 50 Evergreen Ave., Somerville, MA 02145 Faxed to: 617-591-3235 or Emailed to: inclusionary@somervillema.gov					
Lottery	Tuesday, October 22 nd , 2019 at 11AM	City Hall Councilor Chambers located @ 93 Highland Ave., Somerville or viewed on Youtube.com/SomervilleCityTV					

Individuals with disabilities who need auxiliary aids and services for effective communication, written materials in alternative formats, or reasonable modifications in policies and procedures, in order to access the programs and activities of the City of Somerville or to attend meetings, should contact the City's Manager of Diversity, Equity and Inclusion, Nency Salamoun, at 617-625-6600 x2323 or nsalamoun@somervillema.gov

OPORTUNIDAD DE ALQUILER POR EL PROGRAMA DE VIVIENDAS INCLUSIVAS

Alcalde Joseph A. Curtatone y Block Properties, LLC



Las solicitudes solo estarán disponibles desde 11AM el 1 de Agosto, 2019 hasta las 2pm, el 30 de Septiembre, 2019

Comenzando el <u>5 de Agosto,</u> se podrá a encontrar la aplicación en la página de Somervillema.gov, la Alcaldia Municipal de Somerville, las bibliotecas públicas de Somerville y la Oficina del Departmento de Vivienda

Lea el Paquete de Información para más detalles sobre las unidades, el proceso de solicitar y los requísitos de elegibilidad.

Dirección	Tipa de Unidad	Grado	No. de Unidades Disponibles	Alquiler*	No. de Baños	Area	Piso	Tamaño del Hogar
3 de la	Estudio (No. 303)	1	1	\$917	1	679 p2	3ra	1-2 Personas
Calle Ward	3 Cuartos (No. 204)	2	1	\$1,728	2	1,260 p2.	2do	3-6 Personas

Requísito de Rango de Ingreso Bruto Anual Adjustado por el tamaño del hogar						
Tamaño del Hogar	Unidad no. 303 (Estudio) Grado 1 (<50% AMI)	Unidad no. 204 (3 Cuartos) Grado 2 (51%-80% AMI)				
1	\$24,888 -\$41,500	N/A				
2	\$24,888-\$47,400	N/A				
3	N/A	\$53,351-\$80,300				
4	N/A	\$59,251-\$89,200				
5	N/A	\$64,001-\$96,350				
6	N/A	\$68,751-\$103,500				

^{*}Inquilinos pagarán por la calefacción eléctrica, gas para cocinar y agua para calentar. Sí tiene mascot la tarifa de \$25 o sí necista estacionamiento la tarifa de \$75 será rebajada del alquiler.

Solicitantes deben ir a una sesión informativa y leer el paquete de información ante de entregar la solicitud.

No se consideránn solicitudes incompletas o entregadas después de la fecha límite.

No se aceptarán aplicaciones enviados en partes o a otros correos electrónicos o números de fax.

FECHAS IMPORTANTES					
	Fecha y Hora	Dirección			
Sesiones Informativas	Jueves, 1 de Agosto, 2019 a las 11AM	Visiting Nurse Association of Eastern Massachusetts (VNA) 259 Lowell Street, Somerville, MA 02144			
	Jueves, 12 de Septiembre, 2019 a las 6 PM	The Armory 191 Highland Ave. Somerville, MA 02143			
Fecha Límite	Lunes, 30 de Septiembre, 2019 a las 2PM	Solicitudes deben estar completas y entregas antes de las 2PM a la División de Viviendas a: 50 Evergreen Ave. Somerville, MA 02145; FAX: 617-591-3235; o Correo electrónico: inclusionary@somervillema.gov			
Lotería	Mártes, 22 de Octubre, 2019 a las 11AM	Alcaldia Municipal @ 93 Highland Ave., Somerville o se puede ver por Youtube.com/SomervilleCityTV			

^{**}El ingreso mínimo no existe para Sección 8 o subsidio parecido

^{***}La cabeza de familia no pueude ser estudiante a tiempo completo; Se aplique otros requísitos de elegibilidad

OPÒTINITE POU LOJMAN KI ABÒDAB



Majistra Joseph A. Curtatone ak Block Properties, LLC vle fè nou konnen ak kè kontan gen de (2) apatman ki genyen revni anyèl limite ki sitye nan: 3 Ward Street nan Somerville

> Pake ki genyen aplikasyon ak enfòmasyon yo pral sèlman disponib apati de 1 Out a 11 AM jiska 30 Septanm 2019 a 2 PM.

Kòmanse <u>5 Out</u> tout aplikasyon ak pake enfòmasyon yo pral disponib nan somervillema.gov, nan Meri a, nan Bibliyotèk Piblik yo, epi tou nan Biwo Divizyon Lojman an.

Tanpri, li pake ki genyen enfòmasyon yo pou jwen plis detay sou apatman yo, pwosesis aplikasyon an ak kondisyon pou kalifye.

Adrès	Tip Apatman	Nivo	Kantite apatman disponib	Lwaye*	Kantite twalèt	gwosè apwoksimatif (Sq. Ft.)	Etaj	Kantite moun ki ka nan kay la
2 Mond	Apatman Estidyo (#303)	1	1	\$917	1	679 sq. ft.	dezyèm	1-2 Moun
3 Ward Street	Apatman 3 Chanm a kouche (# 204)	2	1	\$1,728	2	1,260 sq. ft.	twazyèm	3-6 Moun

Anyèl revni brit** Ajiste pa kantite lajan nan fanmi an					
Kantite moun kap viv nan kay la***	Apatman 303 (Estidyo)	Apatman 204 (3 Chanm)			
Kantite moun kap viv nam kay ia	Nivo 1 (50% AMI)	Nivo 2 (51%-80% AMI)			
1	\$24,888 -\$41,500	N/A			
2	\$24,888-\$47,400	N/A			
3	N/A	\$53,351-\$80,300			
4	N/A	\$59,251-\$89,200			
5	N/A	\$64,001-\$96,350			
6	N/A	\$68,751-\$103,500			

^{*} Lokatè ap peye pou chofaj elektrik, gaz pou kwit ak dlo cho. Frè pou bet domestik se (25 dola) pou paking se (75 dola) ap redwi nan lwaye a

Tout aplikan yo dwe ale nan yon sesyon enfòmasyon epi li pake enfòmasyon an anvan yo soumèt yon aplikasyon.

Nou pap aksepte aplikasyon ki anreta oswa enkonplè.

Nou pap resevwa aplikasyon ke yo voye nan lòt imèl oswa nimewo faks ki diferan.

Dat enpòtan					
	Dat & Lè	Lokasyon			
Sesyon enfòmasyon	Jedi 1 Out 2019 a 11 AM	Nan ofis Visiting Nurse Association of Eastern Massachusetts (VNA) 259 Lowell Street, Somerville, MA 02144			
yo	Jedi 12 Septanm 2019 a 6 PM	Nan sant atis The Armory 191 Highland Ave. Somerville, MA 02143			
Dat limit aplikasyon	Lendi 30 Setpanm 2019 a 2PM	Ranpli aplikasyon an epi remèt li anvan 2PM nan ofis Housing Division nan 50 Evergreen Ave., Somerville, MA 02145; Fax li bay: 617-591-3235 oswa voye li pa; Imèl: inclusionary@somervillema.gov			
Lotri	Madi 22 Oktob 2019 nan 11AM	City Hall Councilor Chambers sitye nan 93 Highland Ave., Somerville oswa ou ka gade li sou Youtube.com/SomervilleCityTV			

Moun andikape ki bezwen èd ak sèvis pou yon kominikasyon ki efikas, dokiman ekri nan lòt fòma, oswa modifikasyon rezonab pou politik ak pwosedi, yon fason pou jwenn aksè nan pwogram ak aktivite kap fèt nan vil la oswa pou ka patisipe nan reyinyon yo tou. Ou dwe kontakte Manadjè Divèsite a, Ekite ak Enklisyon an, Nency Salamoun, nan 617-625-6600 x2323 oswa nsalamoun@somervillema.gov

^{**}Tou de mèt kay la pa kapab elèv a plen tan, <u>lòt kondisyon elijiblite ka aplike tou</u>
***Yon revni minimòm pa nesesè si ou gen yon sibvansyon seksyon 8 oswa lòt sibvansyon lwaye

OPORTUNIDADE DE MORADIA ACESSÍVEL PARA ALUGAR

O Prefeito Joseph A. Curtatone e Block Properties, LLC têm o prazer de anunciar 2 unidades para alugar através do programa de moradias acessíveis localizadas na:

3 Ward Street, Somerville

As inscrições e o pacote informativo estarão disponíveis do dia 1 de agosto às 11h até o dia 30 de setembro, 2019 às 14h.

A partir de segunda-feira, 5 <u>de agosto,</u> as fichas de inscrição estarão disponíveis no site Somervillema.gov, na Prefeitura, nas Bibliotecas Públicas de Somerville e no Escritório da Divisão de Habitação.

Por favor, leia o Pacote Informativo para mais detalhes sobre as unidades, processo de inscrição e requisitos de elegibilidade.

Endereço	Tipo de Unidade	Grado	No. de Unidades Disponíveis	Alugel Mensal*	N º de Baños	Tamanho Apox. (Sq. Ft.)	Piso	Tamanho do familiar
3 Ward	Estúdio (No. 303)	1	1	\$978	1	679 p2	3ra	1-2 Pessoas
Street	3 Quartos (No. 204)	2	1	\$1,728	2	1,260 p2.	2do	3-6 Pessoas

Renda bruta annual requerida** Ajustado pelo tamanho do núcleo familiar						
Tamaño do agregado familiar***	Unidade nº . 303 (Estúdio) Grado 1 (50% AMI)	Unidad no. 204 (3 Quartos) Grado 2 (51%-80% AMI)				
1	\$24.888 -\$41.500	N/A				
2	\$24.888-\$47.400	N/A				
3	N/A	\$53.351-\$80.300				
4	N/A	\$59.251-\$89.200				
5	N/A	\$64.001-\$96.350				
6	N/A	\$68.751-\$103.500				

^{*}Inquilinos são responsáveis pelo pagamento da eletricidade, gás e água quente. Taxas aplicáveis a animais de estimação (\$25) e estacionamento (\$75) serão descontadas do valor do aluguel.

Os candidatos são <u>encorajados</u> a participar de uma sessão informativa e ler o pacote de informações antes de preencher a ficha de inscrição.

Inscrições incompletas ou entregues após o prazo não serão aceitas. Fichas de inscrição enviadas para outro email não serão aceitas.

	DATAS IMPORTANTES						
	Data e Hora	Local					
Sessões de Isnformação	Quinta-feira, 1 de agosto de 2019 às 11h	Visiting Nurse Association of Eastern Massachusetts (VNA) 259 Lowell Street, Somerville, MA 02144					
ioimormação	Quinta-feira, 12 de setembro de 2019 às 18h	The Armory 191 Highland Ave. Somerville, MA 02143					
Prazo de Inscrição	Segunda-Feira, 30 de setembro de 2019 às 14h	Ficha de inscrição deve estar completa e ser entregue antes das 14h no Departamento de Moradias da Prefeitura, na 50 Evergreen Ave., Somerville, MA 02145; Por Fax: 617-591-3235; Por Email: inclusionary@somervillema.gov					
Loteria	Terca-feira, 22 de Outubro 2019, às 11h	City Hall Councilor's Chambers na 93 Highland Ave., Somerville ou via Youtube.com/SomervilleCityTV					

Pessoas que tenham necessidades especiais ou que precisam de ajuda auxiliar para uma comunicação mais eficaz, material escrito em outro tipo de formatação, ou razoáveis modificações na política e procedimento, a fim de acessar os programas e as atividades da Prefeitura de Somerville ou para participar das reuniões, devem entrar em contato com o Gerente de Diversidade, Equidade e inclusão, Nency Salamoun, pelo telefone 617-625-6600 x2323 ou nsalamoun@somervillema.gov

^{**}O requisito de renda mínima não é aplicado para quem tem algum título de voucher para aluguel.

^{***}Ambos os chefes de família <u>não podem ser estudantes em período integral; Outros requisitos de elegibilidade podem ser</u> aplicados

Two (2) Income-Restricted Rental Apartments Developed by

Block Properties, LLC



In Cooperation with

Mayor Joseph A. Curtatone and the City of Somerville





TABLE OF CONTENTS

Introduction	Page 3
3 Ward Street Building & Unit Descriptions	Pages 3-5
Household Eligibility Restrictions & Requirements	Page 6
What is Considered Income?	Page 7
Asset Limit	Page 7
Defining what is a "Household" & Owning Property	Page 8
Preferences	Pages 9-10
Complete Application Requirements	Page 11
Application Deadline & Submission Instructions	Page 11
Lottery & Income Certification	Pages 12-13
Inclusionary Appeals Policy	Pages 14-15
Proceed Letter	Page 15
Affordable Housing Restrictions & Timeline	Page 15-16
Pre-Lottery Application	Pages 17-27

Introduction

The Mayor's Office of Strategic Planning and Community Development (OSPCD) and Block Properties LLC, are pleased to announce two (2) income-restricted rental opportunities at 3 Ward Street in Somerville available through the City of Somerville's Inclusionary Housing Program. There is a studio and a three-bedroom apartment available for rent to income eligible households at below market rent through an application, lottery and income certification process. Both apartments will be offered to households with incomes within Tier 1 and Tier 2 (see eligibility table on page 6).

These apartments are restricted in perpetuity to eligible households and subject to annual income certifications. Tenants must sign a lease and lease rider agreeing to the restrictions and provide the City with a copy on an annual basis. More information on the lease rider and restrictions can be found on pages 15.

Building Description, Amenities & Pet Policies

3 Ward St. is a mixed-use four (4)-story wood frame, building with commercial space on the ground floor. This building contains an elevator and consists of twelve (12) residential units on three (3) floors above ground floor, twelve (12) parking spaces (9 within the building and 3 across the street) and twelve bicycle spaces. There is free on-site parking for one (1) bike per unit. Additionally, one (1) parking space will be available per unit at a price of \$75. Street parking in this neighborhood is limited. There is no extra storage space outside of the unit. One pet per household is allowed; dog up to 50 lbs. or a cat. A pet addendum is required.

Amenities for the inclusionary units include: in-unit laundry, PORCELANOSA tiled bathroom, CONSENTINO quartz countertop, PORCELANOSA backsplash, stainless steel kitchen sink, refrigerator, dishwasher and Range Microwave. Electric heating, gas hot water and cooking are not included in the rent and must be paid by the tenant. The owner will pay for water/sewer costs.

Unit Descriptions

Address	Unit Type	Tier	# of Units available	Rent*	No. of Bathrooms	Approx. Size (Sq. Ft.)	Floor	Available to household of
44	Studio (Unit 303)	1	1	\$917	1	679	3 rd	1-2 Persons
Medford	3BR (Unit 204)	. 2 .	1	\$1,728	2	1,260	2 nd	3-6 Persons

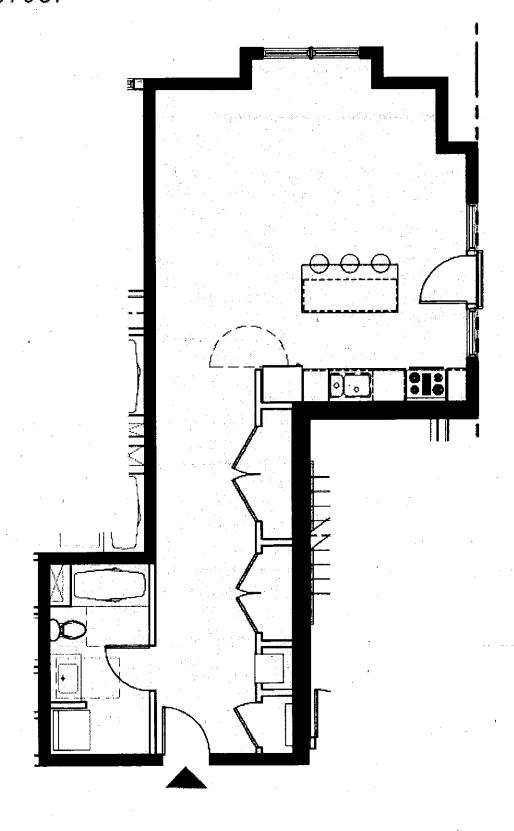
^{*}Tenants pay electric heating, gas cooking and hot water. Applicable pet fee (\$25) and parking fee (\$75) are deducted from rent

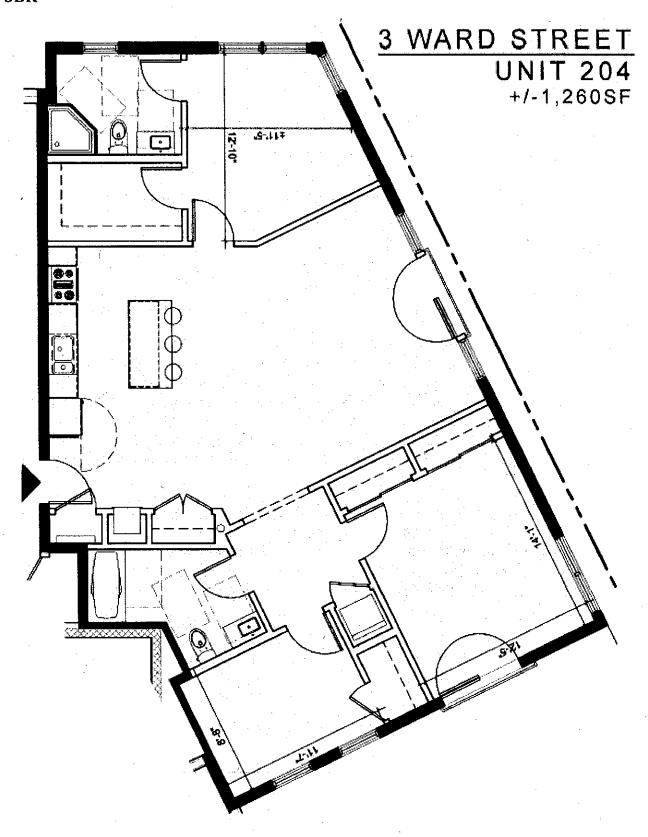
Unit 204 is a <u>3BR</u>, 2-bathroom apartment, approximately 1,260 sq. ft. located on the 2nd floor. It is available to an income eligible household with a yearly gross income between 51%-80% Area Median Income (AMI) and adjusted by household size (see Household Gross Annual Income Range Requirements table on page 6 more details). A minimum household size of 3 persons is required while the maximum household allowed is 6 persons. A household is defined on page 8.

Unit 303 is a <u>Studio</u>, 1-bathroom apartment approximately 679 sq. ft. located on the 3rd floor. It is available to an income eligible household with a yearly gross income between \$24,888-Tier 1 (50% AMI) adjusted by household size. A maximum household size of 2 persons is required. A household is defined on page 8.

Floor plans are available on the following page.

3 WARD STREET UNIT 303 +/-679SF





Block Properties Screening

If determined eligible by the OSPCD's Housing Division for this opportunity, prospective tenants must complete a rental application with Block Properties. A minimum FICO score requirement of 550 has been set. Block Properties will require Social Security numbers, landlord references, income verification and copies of photo IDs. Rent can be paid electronically or by check.

What Eligibility Restrictions Apply?

- Unrelated persons applying together must provide documentation of having a history of living together at the time of an income certification;
- No households or incomes of convenience;
- Cannot own a home or interest in a home, unless eligible for one of five exceptions (see page 8 for more details);
- Minimum and maximum household members;
- · Minimum and maximum gross annual income limits;
- Maximum asset limits; AND
- Heads of household cannot be a full-time student (status must be verified directly by institution).

What are the Income Eligibility Requirements?

In order to be income-eligible to rent an apartment through the Inclusionary Housing Program, a household's gross annual income must be within the guidelines listed below in the Household Gross Annual Income Range table, adjusted for household size. A minimum income eligibility requirement of \$24,888 for Unit 303 has been established to ensure households can afford housing expenses (rent and utilities). This minimum income requirement is waived for households receiving rental subsidies through programs such as Section 8, VASH, MRVP etc. <u>Current verification</u> of rental voucher assistance must be provided with your pre-lottery application, if applicable.

House		Income Range Requirements* for Household Size
Household Size**	Unit 303 (Studio) Tier 1 (50% AMI)	Unit 204 (3BR) Tier 2 (51%-80% AMI)
1	\$24,888 -\$41,500	N/A
2 :	\$24,888-\$47,400	IV/A
3		\$53,351-\$80,300
4	1	\$59,251-\$89,200
5	N/A	\$64,001-\$96,350
6	1	\$68,751-\$103,500

^{*}The combined annual income from all sources and all income-earning members of the household must not exceed the income limit for the appropriate household size, as indicated above.

^{**}Head of household cannot be a full-time student.

What is Considered Income?

Income is defined as all amounts, monetary or not, that goes to or is received on behalf of any household member, even if the family member is temporally absent. Income also includes <u>all amounts anticipated within the next 12 months</u> going forward from the time of an income certification. It is the applicant's responsibility to accurately divulge anticipated changes in income. Income includes interest accrued from assets to which any household member has access.

Examples of income include but are not limited to earnings from a job or self-employment including earnings from one-time events/gigs such as earnings from yard sales & art sales, child care; Fundraising Campaigns (Go Fund me, Crowd Source, etc.); Unemployment Benefits; Pensions/Social Security/Disability Benefits; informal or formal Child Support (received or owed); Assistance from family/friends; Starting or closing of businesses.

Examples of anticipated changes include but are not limited to seasonal work, changes in work hours, raises, bonuses, overtime pay, cost of living adjustments (COLAS), commissions, gain or loss of employment or income source, gain or loss of clients.

For self-employed household members: Self-employed household members (ride-share drivers, artists/musicians, business owners, etc.) must complete Profit/Loss Statements for each business at the time of an income certification. The Profit/Loss Statement must indicate month-by-month self-employment revenue and IRS allowable deducted business expenses for a 12 month period preceding the time of the income certification AND a Profit/Loss Statement for the 12 months following the date of the income certification showing month-by-month anticipated business revenue and IRS allowable deducted business expenses. For each claimed deductible business expense, back-up verification is required (contracts, receipts, payment verifications, paid invoices, etc.). Verifications must match the monthly deductions listed in the Profit/Loss Statements. The household member must explain or show how they arrived at their monthly deductions in writing.

What is the Asset Limit?

The maximum asset limit is set at \$250,000 in liquid assets, excluding restricted retirement, health and college savings plans. This asset limit applies to all household members and includes all assets or joint interests in assets held in the United States or abroad. All assets for all household members must be disclosed in the pre-lottery application and the most recent three (3) months of complete statements for all accounts must be provided at the time of an income certification. Assets which the applicant(s) hold but may not use or have access to are still considered assets and statements must be provided. In cases where an asset was recently closed, verification must be provided.

Examples of assets include but are not limited to: Saving/checking accounts; CDs; mutual funds; investment accounts; IRAs; 401Ks; 457B; 403Bs; bonds; digital currency (Bitcoin, etc.); payment apps (Venmo/Paypal, Square etc.); life insurance; community funds; fundraising campaign platforms (Go Fund Me etc.), cash on hand, real estate, any investments held abroad etc.

Failure to disclose all current or anticipated income and assets may result in a determination of ineligibility at the time of the income certification.

What is a Household?

A "household" includes all persons who will be residing in the apartment you are applying for. A household includes children, teenagers and adults, regardless of their ability to earn or receive income. Applicants may not submit multiple applications as a member of multiple household compositions. An unborn child is considered a household member if the mother is in her third (3rd) trimester of pregnancy at the time of the 2PM Monday, September 30th, 2019 lottery deadline. Minors are also considered household members if they live with the applicant at least 51% of the time or 183 days in a year. Adults who are away for college as full-time students are also considered household members.

Legally married couples shall both be considered part of the household, even if separated. In the event of divorce, a divorce decree must be provided at the time of the income certification, otherwise the ex-spouse will be considered part of the household and their income and assets will be counted in determining income eligibility, even if they do not plan on residing there. In situations where a household member is legally married to a spouse absent from the household (whether not officially divorced or separated) and the absent spouse will not be moving into the inclusionary unit, the applicant is to provide current verification of residing in separate addresses. Additionally, a notarized affidavit must be provided at the time of the submitted application stating that the household member and their spouse reside at different addresses. The household member must disclose all joint accounts held with this absent spouse in the application.

Verification from a treating physician of being in the third (3rd) trimester, verification of full-time student status, custody arrangements or divorce decrees will be required at the time of income certifying.

Can I Apply if I Own a Home?

Applicants who currently own homes are not eligible for an income-restricted apartment unless they meet one of the following exceptions. Only households meeting one of the following exceptions may be entered into the lottery, but they will not be allowed to still own the home and move into an income-restricted apartment. Exceptions for current homeownership can only be made in the following instances:

- 1. A displaced homemaker: A displaced homemaker is an adult individual who meets ALL the following criteria:
 - Has not worked full-time full year in the labor force for a number of years but has, during such years, worked primarily without remuneration to care for the home and family;
 - Owned a home with his or her partner or resided in a home owned by the partner;
 - Does not own a home with his or her partner or resided in a home owned by the partner;
 - Does not own the home previously owned with a partner; AND
 - Is unmarried to or legally separated from the house.
- 2. <u>A single parent</u>, where the individual owned a home with his or her partner or resided in a home owned by the partner and is a single parent (us unmarried or legally separated from a spouse and either has 1 or more children of whom they have custody or joint custody, or is pregnant).
- 3. <u>An age-qualified household</u> (in which at least one member is age 55 or over) which is selling a home in order to rent an income-restricted unit.
- 4. A household that owned a property that was not in compliance with State, local or model building codes and which cannot be brought into compliance for less than the cost of constructing a permanent structure;
- 5. A household that owned a principal residence not permanently affixed to a permanent foundation in accordance with applicable regulations.

What Is The Significance of a Preference?

If you are eligible for a preference and provide current and complete verification of it with a complete application before the deadline, you will have a greater chance of being selected no. 1 for a unit in the lottery or be closer to the top of the lottery wait-list for a unit. If you are not eligible for a preference, the Housing Division cannot determine your odds of moving into an apartment as the ratio of applicants applying with a preference is only known after the deadline. However, according to data gathered from our most recent rental opportunities overall, nineteen percent (19%) of applicants apply with a local preference.

If you are not eligible for a preference, you can still apply and you will be placed on the lottery wait-list. In the future, you may have the opportunity to income certify for an apartment. You may want to explore income-restricted housing opportunities in the city which you currently live or work to learn if they offer preferences within their programs to increase your odds in acquiring an affordable unit.

How Do I Qualify for a Preference?

Households who either <u>currently reside</u> or required to physically <u>work full-time (32 hours or more)</u> within the boundaries of the City of Somerville may receive a preference. Both live or work in Somerville preferences are co-equal. Applicants do not receive a greater preference if they both live and work in Somerville.

To receive a residency preference, a household member must verify their residency by providing one (1) of the following documents with their name and Somerville address and dated within 30 days from the date a completed application is submitted: a current, complete utility bill with a "Statement Date" (not bill due date) within the thirty (30) days of submitting complete application; current voter registration; a current credit card or bank statement; a current copy of a lease where the applicant is specifically identified; signed and dated letter by the landlord identifying the applicant, Somerville address of applicant and proof of ownership.

To receive a work preference, applicants physically working 32 hours or more per week within the boundaries of the city of Somerville must provide a paystub dated within thirty (30) days of the completed application submission date OR a letter of employment signed by the Human Resources Director/ Payroll Director on letterhead with contact information. The letter must indicate the employee's name, employment location, the number of hours working in Somerville per week and must be dated within 30 days from the date a complete application is submitted. If providing a paystub ensure the employment address in Somerville is included in the paystub and the number or hours worked is included.

Ownership of a business in Somerville does not mean you work there. Business owners must provide verification of ownership, a current bill connecting the owner's name with the address of the Somerville business AND either current paystub showing the number of hours worked per week and address OR a signed, notarized affidavit confirming the number of hours worked at the Somerville business.

EVERS<u></u>

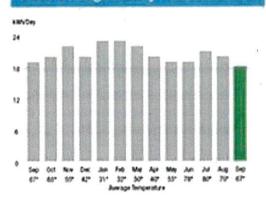
Account Number: 1234 567 8900

Statement Date: 09/30/16

John J Customer

123 Any St Any Town, CT 00000

Electric Usage History - Xiloventi Hours (KWhi



Electric Usage Summary

This month your average daily electric use was

This month you used 4% less than at the same time last year



Total Amount Due by 10/28/16

Total Current Charges

\$151.00

Amount Due On 09/26/16 Last Payment Received On 09/23/16 **Balance Forward**

\$168.00 -S168.00 \$0.00 \$151.00

Current Charges for Electricity

Supply \$69.93

Cost of electricity from Any Energy Co.

Delivery \$81.07

Cost to deliver electricity

by Eversource \$100

Supply Information

Supplier Rate 9.990¢/kWh Fixed

Term: 13 cycles

Expiration: Dec 2016 meter read

Next Cycle Rate: 9.990¢/kWh

Cancellation Fee: \$0

Standard Service Rate: 6.606c AWh

Term/Expiration: 6 mos until Dec 31, 2016

Your Supplier Charge; \$69.93

Standard Service Comparison: \$46.24

Your electric supplier is

Any Energy Company

Any Street

Any Town, Any State 00000

1-100-000-0000

To return to Standard Service, visit CT's official Rate Board at www.EnergizeCT.com,

Eversource.com or call 1-800-286-2000

News For You

Welcome to your newly designed bill! This new design provides a clear view of your energy use and charges to help you manage your energy costs.

EVERSURCE

Account Number: 1234 567 8900

The "Total Amount Due" must be received by Oct 28, 2016 to avoid a 1.00% late payment charge.

Seg Code

Remit Payment To: Eversource, PO Box 660032, Dallas, TX 75265-0032 Make your check payable to Eversource. Please consider adding \$1 for Operational Fuel. To add more, visit Eversource.com

Total Amount Due by 10/28/16

\$151.00

Amount Enclosed



Պլոկիալ-ության հրիակայի Գորհի հրան Թիլիի III-III հր

John J Customer 123 Any St Any Town, CT 00000 Eversource PO Box 660032 Dallas, TX 75265-0032

What Is a Complete Application?

ONLY complete and eligible applications are included in the lottery. It is the applicant's responsibility to provide a complete application that includes the following:

- 1. All questions on the application are answered. Applicants must write "N/A" or cross out questions that are not applicable. No part of the application should be left blank. Correspondence will be via email if the household has an email address or via regular mail if the household does not have an email address. Applicants will be notified in writing in advance of the lottery if their applications are incomplete or otherwise ineligible;
- 2. Disclosed all assets and anticipated changes in income for the next 12 months on the application;
- 3. Each page of the application must be initialed by all household members age 18 and over;
- 4. The application must be signed on the last page by all adult household members age 18 and over;
- 5. The applicant's name, email and phone number must be printed and legible;
- 6. To receive a preference, current verification of Somerville residency or physical employment in Somerville 32+ hours per week must be provided, if applicable;
- 7. If applicable, a copy of your rental voucher must be provided.

When is the Application Deadline?

The deadline to submit a complete, eligible application in order to participate in the lottery is **2PM on Monday**, **September 30**th, **2019**.

How Are Applications Submitted?

Applications may be submitted before the deadline through the following methods:

- Email: inclusionary@somervillema.gov; OR
- Faxed: 617-591-3235; OR
- Personally delivered or mailed to the Housing Division located at 50 Evergreen Ave., Somerville, MA 02145. If you are mailing an application, allow at least one (1) week in the mail to ensure the application will be received before the deadline (not post-marked)

Applications submitted to other emails, faxes or addresses or submitted through other methods will not be accepted. <u>Incomplete applications or applications sent in piece-meal will no bet accepted.</u> Applications submitted one page at a time by fax or email will not be accepted. Application submitted in screen shots will not be accepted.

How Will I Know My Application is Received?

The Housing Division will provide notification of received application by email or regular mail within two (2) weeks of the date an application is received. If it has been less than two (2) weeks of your application submission date, do not contact the Housing Division asking if an application has been received; such questions will not be responded to because there is not enough time to do so. Only contact inclusionary@somervillema.gov or call 617-625-6600 ext. 2584 if more than two (2) weeks have passed and you have not received confirmation of your received application.

When is the Lottery?

The lottery will occur on Tuesday, October 22nd, 2019 at 11AM in the City Hall Councilor Chambers located on the 2nd floor at 93 Highland Ave., Somerville. Participating applicants will receive unique identifiers between the application deadline and the lottery date to keep applicant names confidential. Unique identifiers will be provided via email to applicant's providing emails and with a phone call to those without access to an email. Do not contact the Housing Division requesting your Unique Identifier. Each request will delay the time it takes to provide you your Unique Identifier. Attendance to the lottery is not required and is viewable on Youtube.com/SomervilleCityTV. Unique identifiers will be called in the order in which they are drawn and placed on a wait-list.

How & When Will I Be Notified of My Position on the Lottery Wait-List?

Participating applicants with unique identifiers will be notified of their standing on the wait-list via email or regular mail if requested or did not provide an email. The results will be posted on the City's website. Do not call asking your for your Unique Identifier in the lottery prior to Monday, October 21, 2019.

What Happens If I Am Selected No. 1 in the Lottery?

The applicant whose unique identifier is number one (1) in the lottery for each unit will be contacted immediately by phone and email or regular mail. Households have until Tuesday October 29th, 2019 (5 business days from the date of notification) to submit all required income, asset and Federal Tax documentation to the Housing Division needed to verify a household's eligibility status (more details on required documents under, What does an Income Certification Require). This household must submit the income documentation listed below, including 2018 Federal Tax Returns, W2s as well as complete income and asset documentation to the Housing Division. The Housing Division reserves the right to request additional income and asset documentation as may be necessary to complete the income certification.

Upon reviewing initial information provided, Housing Division staff will contact the applicant with a first (1st) request for complete documentation which discloses and verifies all household income sources, assets and 2018 Federal Tax Returns. This request will outline specific items needed to determine eligibility. The household will have five (5) business days from this notification date to submit the requested documentation. The Housing Division will provide applicants with three (3) such requests thereafter. If the household is unable to provide requested documentation after three (3) additional requests are made and all required documentation to determine eligibility is not received, Housing Division staff may conclude that the requested information is not provided in a timely manner or in good faith effort. The Housing Division reserves the right to discontinue the income certification and offer this opportunity for the next household on the lottery waitlist

Household no. 2 will be notified if the household No. 1 is determined ineligible or unable to lease-up. They will have five (5) business days from notification to submit initial income documents to the Housing Division. Households participating in the lottery should set these documents aside prior to the lottery to facilitate timely submission to the Housing Division after the lottery.

What Does an Income Certification Require?

Income documents include but are not limited to:

- 1. 2018 Federal Tax Returns, all pages and schedules, including W2s and any 1099s or a letter from the IRS confirming that you did not file taxes. If your Federal Tax Return includes W2s from employer(s) you are no longer working for, termination of employment must be verified directly from the former employer. This letter must be on company letterhead, signed, dated, state your last date of employment, whether there are any pending payments and their intent to rehire you within the next 12 months. Do not provide State Tax Returns.
- 2. Most recent three (3), consecutive months of paystubs and/or other income documentation (child support, pensions, Social Security benefits etc.). Households selected no. 1 will need to provide statements for the months of July August, August-September and September-October 2019. See Page 7 for more on income;
- 3. Employer Verification forms signed by the employee(s) with the employer's contact information (the form will be sent directly by the City to employers);
- 4. Most recent three (3), consecutive months of all asset statements for all household members including but not limited to all account types listed in the Asset Section of this Info. Packet. Households selected no. 1 will need to provide asset statements for the months of July August, August-September and September-October 2019;
- 5. Explanation of deposits into all asset accounts including receipts for all unexplained deposits*;
- 6. Signed and notarized affidavit disclosing the amount of cash on hand;
- 7. No Income Statements for any adults in the household who do not receive any income, signed and notarized by both the adult not receiving income and the head of household. The Housing Division will provide you with this Statement;
- 8. Verification of student status directly from learning institutions for household members who are 18+ and full or part-time students;
- 9. Verification of business ownership;
- 10. Verification of having a history of living together if household members are unrelated;
- 11. Verification of custody of a minor;
- 12. Verification of divorce decree;
- 13. Verification of real estate under sales agreement;
- 14. Other documents may also be requested by the City at the time of the income certification.

*Please note, if deposits into bank or asset statements are unclear (such as cash deposits, transfers into account from persons outside of the household) the household member is required to explain the source and nature of each unexplained deposit and provide back-up verification of each unexplained deposit (receipts, statements from sources, copies of paid invoices, credit card statements etc.). Please review and familiarize yourself with unspecified or cash deposits and start collecting receipts. The Housing Division will provide you with an Explanation of Deposits Form after reviewing your asset statements.

DO NOT SUBMIT INCOME & ASSET DOCUMENTATION WITH YOUR PRE-LOTTERY APPLICATION. Income assets and tax returns are only required if a household is selected in the lottery.

What is the Inclusionary Housing Appeals Policy for Pre-Lottery Applications & Eligibility Determinations?

Pre-lottery determination of eligibility by OSPCD's Housing Division is based upon the following: 1) having a complete application; 2) having the appropriate household size for the particular Unit; 3) having the appropriate income that falls within the Unit's stated eligibility range, based on what households self-report for income in the application. The Housing Division has adopted the U.S. Department of Housing and Urban Development (HUD) 24 CFR 5.609 Part 5 definition of "Annual Income" which anticipates gross income, including income from assets, over the next 12 months. Staff annualize what households self-report as their monthly income, and compare that against the income eligibility range the Unit is in. It is the applicant's responsibility to disclose accurate information and to complete the entire application before the deadline. If any errors were made which affected the applicant's eligibility to participate in the lottery, the applicant has five (5) business days from the date of an email/eight (8) business days from the date of a letter regarding ineligibility to correct the error/discrepancy with the Housing Division by replying to the email/letter. The correction must include specific terms (for example, inclusion of income sources no longer received, forgotten household members, questions left blank or assumptions made in the calculation). Households can also make the correction by providing an updated application with the changes initialed and dated.

Post lottery/income certification determination: A household deemed ineligible upon the completion of the income certification process has the right to appeal the income determination. To initiate the appeals process, the *applicant must send a written Appeal Request to the Director of the Housing Division within one week of receipt of the ineligibility determination.* A written request includes one sent by email. In this written request to the Director of the Housing Division, the household must identify in specific terms (for example, inclusion of an income source no longer received or assumptions made in the calculation) what about the determination is being appealed. If a household needs more time to identify in specific terms what about the determination is being appealed, the household must identify good cause for additional time, and still must send a notice of intent to submit a written appeal request within one week of the receipt of the ineligibility determination.

While it is the responsibility of the household to provide the Housing Division with all of their current income documents and to disclose all reasonably anticipated income within the next 12 months upfront during the initial certification process, if there are other documents the household wishes to supply that are new, that provide clarifying information, or are unanticipated/unexpected, the household should state such in its written appeal, and either include the additional documents in the appeal request, or provide a timeline within which such documents can be provided. It is within the discretion of the Housing Director whether to accept/wait for additional documents; however, the documents should be provided without any unreasonable delay, with time being of the essence. The Housing Division Director will consider the appeal request and any new information or documentation provided and make a determination.

The household will be notified in writing by the Housing Director regarding the outcome of the appeals determination, including the reasons and supporting facts and documents relied upon. Such determination shall be made within 10 business days of receipt of complete appeal documents, and if such determination cannot be made within 10 business days, the Housing Director will provide a reason why additional time is needed, along with an estimate as to how much additional time is needed.

¹/ The City has adopted the Part 5 definition of "Annual Income" under 24 CFR 5.609 for the Inclusionary Zoning Program.

While an appeal is pending, the Housing Division may proceed with income certifications of the next person(s) on the wait list but not to the point where the appealing applicant would be denied the opportunity to rent or purchase the subject unit (if the appeal were to be decided in his/her favor).

The following agencies may be able to provide (free) assistance with the applicant's appeal:

<u>Cambridge and Somerville Legal Services</u> 60 Gore Street, Suite 203, Cambridge, MA 02141 (617) 603-2700

Community Action Agency of Somerville, Inc. 66-70 Union Square, Suite 104, Somerville, MA 02143 (617) 623-7370

City of Somerville Office of Housing Stability, Director Ellen Shachter 50 Evergreen Avenue, 1st floor, Somerville MA 02145 617-625-6600 x2580

A copy of this appeal process, including the name, mailing address, and email address of the Director of the Housing Division, shall be provided to the applicant with the OSPCD's Housing Division's written communication of its initial denial of income eligibility.

Proceed Letter

When a household is found income eligible, the Housing Division issues a Proceed Letter outlining next steps. Once certified and after having received a Proceed Letter, the household will contact the property management which will then conduct their own credit and background screening. If approved by the property management a lease will be offered. Only after a lease is offered and a move in date is agreed upon in a lease and lease rider should the tenant give their current landlord notice. The Proceed Letter will provide further information regarding agencies that may to provide start-up costs assistance if needed (up to \$3,000 in startup costs for security deposits, first and last month's rent, movers).

What Restrictions Apply to These Units?

This opportunity to rent an affordable apartment at below market rent being offered through the City of Somerville's Inclusionary Housing Program. As an inclusionary (affordable) apartment, certain eligibility requirements and restrictions apply. You will sign a "Lease Rider" which describes the restrictions on the apartment and your responsibilities. These restrictions will remain with the apartment permanently and will apply to you and all subsequent renters. The following is an overview of the most important aspects of the Lease Rider and is meant for informational purposes only.

- Principal Residence: The unit must be used as your primary principal residence;
- Student Status: Both heads of households cannot be full-time students;
- > <u>Income Eligibility</u>: Income certifications are good for one (1) year. Annual income re-certifications are required in order to continue to lease an affordable unit. You must remain income eligible in order to occupy one of the affordable rental units.
 - o If your household occupies a 50% Area Median Income unit, your household can increase its income up to 140% of 50% of Area Median Income. If your household income increases to 80% of Area Median Income and you wish to remain in the affordable unit, the rent will increase to HUD's High Home Rent.
- <u>Renting</u>: Households may not sublet, rent out or AirBnB the affordable unit or space in a unit under any circumstance.

Application & Lottery Timeline

INFORMATION SESSION NO. 1: 11AM on Thursday August 1, 2019 @ the VNA 3rd Floor Community Room located at 259 Lowell Street, Somerville, MA 02144

INFORMATION SESSION NO. 2: 6:00PM on Thursday September 12, 2019 @ Armory Performance Hall located at 191 Highland Ave., Somerville, MA 02143

APPLICATION DEADLINE: 2PM on Monday September 30, 2019. Complete applications must be delivered to the Housing Division at 50 Evergreen Ave., Somerville, MA 02145; Faxed to: 617-591-3235 or emailed to inclusionary@somervillema.gov. Applications submitted to other emails, faxes or addresses will not be accepted. Applications submitted in piecemeal will not be accepted.

LOTTERY DATE & NOTIFICATIONS to WINNERS: 11AM on Tuesday October 22, 2019 @ City Hall Council Chambers located at 93 Highland Ave., Somerville, MA 02143 or viewed on Youtube.com/SomervilleCityTV



APPLICANT NAME:

City of Somerville Inclusionary Housing Program Pre-Lottery Rental Application

Studio, and Three (3) Bedroom Apartments Available for Income Eligible Families and Individuals Check Income Eligibility Range Requirements Below:

Maximum Gross Annual Income Eligibility Ranges & Limits

(Adjusted by household size)

Initial Inclusionary Rent* for Income-Eligible Households, Adjusted by Unit Type and Number of Units

Househol	d Gross Annual Income Range	e Requirements Adjusted for Household Size
Household Size*	Tier 1 (50% AMI) Unit 303 (Studio)	Tier 2 (51%-80% AMI) Unit 204 (3BR)
1	\$24,888 -\$41,500	
2	\$24,888-\$47,400	N/A
3		\$53,351-\$80,300
4	NI/A	\$59,251-\$89,200
5	N/A	\$64,001-\$96,350
6		\$68,751-\$103,500

Address	Unit Type	Tier	# of Units available	Rent*	No. of Bathrooms	Approx. Size (Sq. Ft.)	Floor	Available to household of
44	Studio No. 303	Tier 1	1	\$917	1	679	3 rd	1-2 Persons
Medford	3BR No. 204	Tier 2	1	\$1,728	2	1,260	2 nd	3-6 Persons

^{*}If a household has a housing choice voucher or other voucher, rent is the payment standard by unit type of the issuing agency minus applicable tenant paid rent using the Somerville Housing Authority Utility Allowance.

Lottery Preference: Current Somerville residents or persons currently employed 32 hours or more per week at a business in Somerville who provide verification dated within 30 days of submitting a **complete application**.

Pre-lottery applications & documentation of preference must be submitted to the Housing Division through one of the following methods:

- Dropped off in person or mailed to 50 Evergreen Ave., Somerville MA 02145 (must be received, <u>not postmarked</u> by below deadline);
- Emailed to: inclusionary@somervillema.gov; OR
- Faxed to: 617-591-3235



APPLICATION DEADLINE: 2PM, MONDAY SEPTEMBER 30, 2019

Individuals with disabilities who need auxiliary aids and services for effective communication, written materials in alternative formats, or reasonable modifications in policies and procedures, in order to access the programs and activities of the City of Somerville or to attend meetings, should contact the City's Manager of Equity, Diversity, and Inclusion, Nency Salamoun, at 617-625-6600 x2323 or nsalamoun@somervillema.gov.

This application must be received by the City of Somerville Housing Division through one of the methods listed on Page 1 by 2PM on Monday September 30th 2019. If you mail the application and it is received after the deadline, it will not be accepted. If mailing in your application, please put it in the mail at least 1 week before the application deadline to ensure that it is received in time. Households selected in the lottery will complete an income certification packet and will submit necessary income, asset and tax documentation to verify income eligibility.

Keep the Information Packet so that you may refer to it throughout the application, lottery and income certification process.

DO NOT give the Housing Division the Information Packet when you submit your application.

It is strongly recommended you submit your application at least one week before the deadline.

APPLICATION DEADLINE: 2PM, MONDAY SEPTEMBER 30, 2019

Instructions:

- 1) If a question is not applicable, please write N/A. Do not leave any questions blank;
- 2) Make sure all adults initial each page and sign the last page;
- 3) If you need additional space to provide an answer, please attach additional sheet(s).

Incomplete and or ineligible applications will not be included in the lottery. If preference documentation is not provided with your complete application or is not current, applicants will not receive preference in the lottery.

Head of Household Initials:	Other Adult Initials:	Other Adults Initials:

	SECTION A: GENERAL INFORMATION
1.	What language would you like the Housing Division to communicate with you in?
	Interpretation services can be offered in Portuguese, Spanish and Haitian Creole.
2.	Do you require a reasonable accommodation?: Yes No
	If yes, submit verification of need from your health care provider with this application before the application deadline.
	Please describe reasonable accommodation need:
3.	Does a household member currently have a Section 8 Voucher or any other type of mobile rental voucher (MRVP,
٠,	VASH, etc.)? Yes No
	Which Housing Authority or Agency issued your voucher?:
	Provide the name, email and phone number of your Leasing Officer:
	Trovide the name, email and priorie name of your zeasing officer.
	Please attached a copy of your voucher to this application
4.	Does a household member currently live or work full-time (32hrs+/week) in Somerville? Yes No
1.	If yes, submit current documentation to receive the preference.
5.	Is any member of your household a City of Somerville employee? Yes No
	There is no preference given in the lottery if you or a household member works for the City of Somerville. This is simply a disclosure.
6.	Are both heads of household full-time students or registered to be full-time students the following semester?
	□Yes □No
	Please note: Both heads of household cannot be full-time students; Applicants must provide verification directly from institution.
7.	How did you hear about this opportunity? ☐ Inclusionary Housing Listserv ☐ City Website ☐ Flyer ☐ Newspaper ☐
	Family/friend □Social media □Web search □Other
8.	Would you like your email to be included in the Inclusionary Housing Listserv to receive notifications of upcoming
•	affordable rental and homeownership opportunities available through the City of Somerville's Inclusionary Housing
	Program? Tyes No
	Please check "No" to the above question if you already receive email alerts
	The following questions are optional and not required to participate in the lottery:
	Do you own a motor vehicle? Yes No If so, do you need a parking space in the garage? Yes No
	If you do not need parking in the garage, do you need a residential parking permit? Yes No
	What is the head of household's ethnicity? Hispanic/Latino Non-Hispanic/Latino
	What is the head of household's race? Please check all boxes that apply:
	African-American/Black American Indian/Alaskan Native Asian Caucasian
	☐ Native Hawaiian/ Other Pacific Islander ☐ Middle Eastern/North African ☐ Other
	What is the head of household's national origin?
	Bangladesh Brazil Canada Cape Verde China Colombia Cuba Dominican Republic
	El Salvador Ghana Guatemala Haiti Honduras India Ireland Jamaica Mexico
	Nepal Nicaragua Nigeria Portugal Puerto Rico South Korea Other:

Other Adult Initials:_____

Other Adults Initials:____

Head of Household Initials:_____

SECTION B: HOUSEHOLD. INFORMATION

pplica	nt's Name:		:		
urrent	Address:	<u> </u>			
			<u> </u>		
ailing	Address:	<u> </u>		· · · · · · · · · · · · · · · · · · ·	
•		<u> </u>			
imary	Phone: ()	Alter	nate Phone	·()	
nail A	ddress:	·			
omple		•	•	d member intending to occupy the unit	
	Name of Household Member	Relationship to the Head of Household	Age	Is this person a full-time student or will be a full-time student in the next 12 months? Y/N	
		Head of			
,		Household			
			-		
				·	
∐Y€ ease n	es 🗌 No	nust be included as a h	ousehold me	er or give birth by the application deadline mber in the above table and verification from tre tifying.	
∐Y€		me, address and expla	in your curre.	nebody not included on the application? Int marital status below. Depending on the respondent this application:	
SA or e asse	abroad) with somebody v	vho is not a househ	old membe ected in the l	erty or joint interest in Real Estate (whether? Yes No If "Yes", please include these ottery. List all names on joint asset & describe th	assets in
ertif	y that the total number o	f people in my hous	sehold is: _	· 	
	f Household Initials:	Other A	dult Initials:	Other Adults Initia	ılsı

SECTION C: INCOME & ASSETS

Income Information - List all income such as Wages, Salaries, Tips, Self-Employment income, Welfare, Social Security, TANF, SSI, Pensions, Disability Compensation, Unemployment Compensation, Alimony, Child Support, Military Pay, Pensions, Death Benefits, Season/One-time Jobs and Gigs, etc.

Consider & indicate all changes in income your household anticipates over the next 12 months as this may impact your income eligibility. If you are uncertain, you should speak with your HR/Office Manager/Union Rep. about anticipated raises, bonuses, OT, changes in work hours, Cost of Living Adjustments (COLAS) etc.

Household Member	Income Source (Include name)	Pay Frequency (Circle)	Average gross earnings/pay period
	Employer	Weekly / Bi-weekly	<u> </u>
		Bi-Monthly / Monthly	
	Employer	Weekly / Bi-weekly	
		Bi-Monthly / Monthly	
	Employer	Weekly / Bi-weekly	
		Bi-Monthly / Monthly	
	Employer	Weekly / Bi-weekly	
•		Bi-Monthly / Monthly	
	Employer	Weekly / Bi-weekly	
		Bi-Monthly / Monthly	
<u> </u>	Employer	Weekly / Bi-weekly	
•	1 . 7	Bi-Monthly / Monthly	
<u> </u>	Employer	Weekly / Bi-weekly	
		Bi-Monthly / Monthly	
	Self-Employment	Weekly / Bi-weekly	
	(Name/Contract)	Bi-Monthly / Monthly	
	Self-Employment	Weekly / Bi-weekly	
	(Name/Contract)	Bi-Monthly / Monthly	
	Self-Employment	Weekly / Bi-weekly	
	(Name/Contract)	Bi-Monthly / Monthly	
	Self-Employment	Weekly / Bi-weekly	
	(Name/Contract)	Bi-Monthly / Monthly	
····	Self-Employment	Weekly / Bi-weekly	
	(Name/Contract)	Bi-Monthly / Monthly	
	Self-Employment	Weekly / Bi-weekly	
	(Name/Contract)	Bi-Monthly / Monthly	
	Child Support	Weekly / Bi-weekly	
	, , , , , , , , , , , , , , , , , , , ,	Bi-Monthly / Monthly	
· · · · · · · · · · · · · · · · · · ·	Child Support	Weekly / Bi-weekly	
		Bi-Monthly / Monthly	
	SS(DI)/TAFDC	Weekly / Bi-weekly	
:		Bi-Monthly / Monthly	

Head of Household Initials:		Other Adult	Initials:	Other Adults Initials:
:	SS(DI)/TAFDC		Weekly / Bi-weekly Bi-Monthly / Monthly	
<u> </u>			Bi-Monthly / Monthly	
	Child Support		Weekly / Bi-weekly	·

	SS(D)I/TAFDC	Weekly / Bi-weekly
	<u> </u>	Bi-Monthly / Monthly
	SS(D)I/TAFDC	Weekly / Bi-weekly
		Bi-Monthly / Monthly
	SS(D)I/TAFDC	Weekly / Bi-weekly
· · · · · · · · · · · · · · · · · · ·		Bi-Monthly / Monthly
	Unemployment	Weekly / Bi-weekly
	·	Bi-Monthly / Monthly
	Unemployment	Weekly / Bi-weekly
	·	Bi-Monthly / Monthly
	Unemployment	Weekly / Bi-weekly
	· .	Bi-Monthly / Monthly
	Pension	Weekly / Bi-weekly
	·	Bi-Monthly / Monthly
	Pension	Weekly / Bi-weekly
		Bi-Monthly / Monthly
	Pension	Weekly / Bi-weekly
		Bi-Monthly / Monthly
	Pension	Weekly / Bi-weekly
		Bi-Monthly / Monthly
	Other	Weekly / Bi-weekly
`		Bi-Monthly / Monthly
	Other	Weekly / Bi-weekly
		Bi-Monthly / Monthly
	Other	Weekly / Bi-weekly
		Bi-Monthly / Monthly
	Interest from Assets	Weekly / Bi-weekly
	·	Bi-Monthly / Monthly
	Interest from Assets	Weekly / Bi-weekly
		Bi-Monthly / Monthly
	Interest from Assets	Weekly / Bi-weekly
e e e e e e e e e e e e e e e e e e e		Bi-Monthly / Monthly
	Interest from Assets	Weekly / Bi-weekly
•		Bi-Monthly / Monthly
	Interest from Assets	Weekly / Bi-weekly
•		Bi-Monthly / Monthly

•	 	.		
	 1.1		·	

Directions: For each income source listed on Pages 19 and 20, please calculate your yearly and monthly income using the space below. Attach additional pages as necessary. Based on the information provided bel, the Housing Division will verify that households have annual gross incomes that fall within the income range requirements.

To Calculate Weekly Gross Income: (Income Source) * 52 Weeks = ____(Yearly Gross) Yearly Gross / 12 months = Average Monthly Gross (Income Source)_____: Avg. Weekly Gross Pay______* 52 Weeks = _____(Yearly Gross) Yearly Gross_____ / 12 months = _____ Avg. Monthly Gross (Income Source)______:_Avg. Weekly Gross Pay_______* 52 Weeks = _____(Yearly Gross) Yearly Gross ______ / 12 months = _____ Avg. Monthly Gross Total yearly gross from all weekly income sources: To Calculate Bi-Weekly Gross Income: (Income Source) * 26 Pay Periods = _____(Yearly Gross) Yearly Gross _____ / 12 months = _____ Avg. Monthly Gross (Income Source)_____: Avg. Bi-Weekly Gross Pay______* 26 Pay Periods = _____(Yearly Gross) Yearly Gross _____ / 12 months = ____ Avg. Monthly Gross (Income Source)_____: Avg. Bi-Weekly Gross Pay_____* 26 Pay Periods = _____(Yearly Gross) Yearly Gross _____ / 12 months = _____ Avg. Monthly Gross Total yearly gross from all bi-weekly income sources: To Calculate Monthly Gross Income: (Income Source) * 12 Pay Periods = _____(Yearly Gross) (Income Source) : Avg. Monthly Gross Pay: * 12 Pay Periods = _____(Yearly Gross) (Income Source) : Avg. Monthly Gross Pay: * 12 Pay Periods = (Yearly Gross) Total yearly gross from all monthly income sources: To Calculate Self Employment Gross Income: Average gross monthly income _____ - average gross monthly expenses ____ = ____(Net Income) * 12 = _____(Yearly Net Income) Average gross monthly income _____ - average gross monthly expenses ____ = ____ (Net Income) *

12 = _____ (Yearly-Net Income) Average gross monthly income _____ - average gross monthly expenses ____ = ___ (Net Income) * 12 = _____(Yearly Net Income) Total yearly net from all self-employment income:

Total income

Head of Household Initials:_____ Other Adult-Initials:____ Other Adults Initials:____

Household Member	Asset Type (checking, retirement) & Account Number	Asset Value or Current Balance	Name of Financial Institution	Monthly Interest Ra or Dividends Earne
		,		
		` 		
· .				·
		· .		
Total	Household's Monthl	y Interest/Dividends	Earned On Assets:	
<u> </u>	l member have asset	s or accounts in any o	ther country?	<u> </u>
Yes No [:] yes, please disclose t	these assets in the ab	ove table.		
Yes No Yes, provide address	:		rest in property abroad, in an	
broad?			assets in the last three (3) ye	
		<u> </u>		

Other Adult Initials:_____

Head of Household Initials:_____

Other Adults Initials:____

SECTION E: PREFERENCES

If you are a current Somerville resident or you currently work at a business located in Somerville 32+ hours/week, you may be eligible to receive a preference in the lottery. You will receive a preference if you <u>submit documentation of Somerville residency or employment that is dated within 30 days of the date your *completed* application was <u>submitted</u>. Please attach your verification to this letter. Below includes acceptable documentation to receive a Somerville preference.</u>

Proof of residency may include:

- Current signed lease; OR
- Letter from the property owner with your address and that is signed, dated by the owner with their contact information; **OR**
- Utility bill with <u>current statement date</u>. Do not use your bill due date; OR
- Bank/credit card/cable bill statement with Somerville address with a <u>current statement date</u>; OR
- Current voter registration, showing registration date within the last 30 days

Proof of employment in Somerville may include:

- Signed and dated letter from employer on company letter head that includes the <u>Somerville address</u> where you work AND the number of hours you work per week in Somerville; OR
- A current paystub that shows the <u>Somerville address of where you work AND</u> the <u>number of hours you work per week/pay period</u>; OR
- Ownership of a business in Somerville does not mean that you work there. Business owners must provide
 verification of ownership, a current bill connecting the owner's name with the address of the Somerville
 business AND either current paystub showing the number of hours worked OR if paystubs are not available, a
 signed, notarized affidavit confirming the number of hours you work at the Somerville business.

lead of Household Initials:	Other Adult Initials:	Other Adults Initials:

SECTION F: PRE-LOTTERY APPLICATION	N CHECKLIST	
 Leave any questions bland if you answer "Yes", write a sure all adult house Yes No Include all income & assert if you answer "No", include a lincome with the sure of the su	te "N/A" for all questions that do not ehold members signed & initialed easet sources in the USA & abroad? \(\text{\tex	ch page of the application? Tes No No Tes No No Tes Tes No Tes Tes No
the lottery. Answering "No" to que your income certification. If you an	questions No. 1-3, your application is in estion 4 may result in your household be aswer "No" to question 5, the minimum stion 6 you will not receive a preference	ring ineligible upon the completion of income requirement will not be
complete application; 2) having the appropriate income that falls with for income in the application. The Development (HUD) 24 CFR 5.609 including income from assets, over	ility by OSPCD's Housing Division is base e appropriate household size for the pa in the Unit's stated eligibility range, bas Housing Division has adopted the U.S. D Part 5 definition of "Annual Income" wh In the next 12 months. Staff annualizes we the against the income eligibility range the	rticular Unit; 3) having the ed on what households self-report Department of Housing and Urban hich anticipates gross income, what households self-report as their
before the deadline. If any errors of lottery, the applicant has five (5) be of a letter regarding ineligibility to email/letter. The correction must in received, forgotten household me	o disclose accurate information and to owere made which affected the applicant ousiness days from the date of an email/correct the error/discrepancy with the include specific terms (for example, includers, questions left blank or assumptinection by providing an updated application.	t's eligibility to participate in the 'eight (8) business days from the date Housing Division by replying to the usion of income sources no longer ons made in the calculation).
Head of Household Initials:	Other Adult Initials:	Other Adults Initials:

SECTION H: NOTIFICATION

All information you provide here will be treated as confidential and used by our office to determine eligibility in this affordable rental opportunity through the City's Inclusionary Housing Program. Applicants understand that, if selected, OSPCD's Housing Division will require complete income and asset verification. This means that applicants, if selected, must provide the OSPCD with documentation and further verification of all information related to income, assets, and household members. The applicant certifies all information in this application is true and accurate to the best of his or her knowledge and belief. I acknowledge and consent to the sharing of my household's information with the Office of Housing Stability, the Health and Human Services Department and other City of Somerville Departments as/if needed.

I have read and understand the application requirements and the deadlines as described above. I certify under penalty of perjury that the information I have provided is true and accurate. I understand that the provision of false information and statements are grounds for ineligibility under the City of Somerville's Inclusionary Housing Program.

•		
Print Head of Household's Name	Head of Household's Signature	Date
Print Co-Head of Household's Name	Co-Head of Household's Signature	Date
	T .	
Print Other Adult's Name	Other Adult's Signature	Date
Print Other Adult's Name	Other Adult's Signature	Date

lead of Household Initials:	 Other Adult Initials:		Other Adults Initials:_	
		-	-	

FOR OFFICE USE ONLY—DO NOT FILL IN

HOH:					
Date App. Received:	Date App. Completed: Date entered into tracker :				
Reviewed By:					
Income:					
Household Yearly Gross Income:	50% AMI	51%-80% AMI	∐ 81%-110% AMI		
Eligible to Apply for Units:					
Unit Unit					
Unit Unit					
Unit			•		
Somerville Preference: Yes No	•		•		
TI (100 /)					
Unique Identifier(s):	•				
Unit Unit					
Unit Unit			,		
C			,		
Communications Log:			in the second se		
					
	 	·			
		·			
	· ·				
	 -	.			
		· · · · · · · · · · · · · · · · · · ·			
		<u></u>			
· · · · · · · · · · · · · · · · · · ·	·				
	<u> </u>				
	·	·	<u> </u>		
		<u> </u>	· · · · · · · · · · · · · · · · · · ·		
	·		· · · · · · · · · · · · · · · · · · ·		
		· · · · · · · · · · · · · · · · · · ·			
	<u>. </u>		 .		
		·			
	· ·		<u></u>		
need action shall be with	و المالية والمالية المالية المالية	· ^-	er Adults Initials:		
Head of Household Initials: Other	r Adult Initials:	Otr	iei Auulis IIIIllais:		