

# Maxwell 102 Mill Road Everett, MA 02149

## Affordable Rental Pre-Lottery Application

Mailed applications must be Postmarked no later than Friday, September 6<sup>th</sup>, 2024 and mailed to:

Maloney Properties, Inc. Attention: Maxwell Lottery 27 Mica Lane, Wellesley MA 02481

Supporting Documentation (Income, Assets, Taxes, etc) are <u>NOT</u> required to be submitted with the application.

Free language assistance and reasonable accommodations available. For assistance and more information, please call Maloney Properties, Inc (617) 531-7123 Extension 709 | US Relay 711 or email: <a href="mailto:TheMaxwell@MaloneyProperties.com">TheMaxwell@MaloneyProperties.com</a>



### **IMPORTANT:**

You may only submit one application per household. Duplicate applications will be discarded and only one application per household will be accepted.

#### Maxwell 102 Mill Road Everett, MA 02149

**Affordable Rental Pre-Lottery Application** 

## **Head of Household:**

**Street Address:** 

Name:

City:

State:		
Zip Code:		
Email Address:		
Phone #:		
Head of Household (2):		
Name:		
Street Address:		
City:		
State:		
Zip Code:		
Email Address:		
Phone #:		

Maloney Properties will contact applicants by email and phone only. If an email address is not provided, we will send notifications through postal mail and follow up by phone.

Full Name	Age	Head of Household or Occupant	Relationship to Head of Household (i.e. Daughter Son, Mother, Father, etc.)
		Head of Household	
Race & Ethnicity (Optional	Disclosure):		
Alaskan Native and Na   Asian   Black or African Amer   Hispanic or Latino   Native Hawaiian or Pa   White (not of Hispanic   Other (please specify):	ntive American rican (not of His cific Islander corigin)	spanic origin)	
2. What is the total numbe	r of people in t	he household applyin	g for the unit?
My Household Size is	<b>::</b>	_	
3. Does your household red Other:	ceive housing a	ssistance such as Sect	ion 8 / MRVP / VASH /
☐ Yes, household receiv☐ No	es housing assis	stance.	

1. Please complete the below chart for all household members that would be residing in the

If y	yes, please list the type of housing assistance/housing authority that issues your assistance:
4.	Which Unit Size are you Applying For? (You may apply for more than one option)
	☐ Studio ☐ 1-Bedroom ☐ 2 Bedroom
5.	Does your household need a fully accessible unit for someone with a mobility impairment? (Please note − 1 Studio Unit, 4, 1-Bedroom Units, & 2, 2-Bedroom Units are ADA-M)  ☐ Yes ☐ No
6.	Does any member of the household have any accessibility or reasonable accommodation requests or alternative ways we need to communicate with you?
	☐ Yes ☐ No
If y	ves, please Explain:

## **Local Preference:**

Defined as a household that, at the time of application for an affordable housing unit, falls into the following category:

- 1. Current residents of Everett: A household in which one or more members is living in the city or town at the time of application. Documentation of residency should be provided, such as rent receipts, utility bills, street listing or voter registration listings.
- 2. Municipal Employees of Everett: Employees of the municipality, such as teachers, janitors, firefighters, police officers, librarians, or town hall employees.
- 3. Employees of Local Businesses: Employees of businesses located in the municipality.
- 4. Households with children attending the locality's schools, such as METCO students.

7.	. Do any household members meet the criteria for the local preference?		
	☐ Yes ☐ No		

The affordable units will all be in the 80% AMI income category.

**Income Information:** 

<b>Household Size</b>	80% AMI Low Income
1	\$91,200
2	\$104,200
3	\$117,250
4	\$130,250
5	\$140,700
6	\$151,100

<sup>\* 2024</sup> Area Median Incomes for the Boston, Cambridge, Quincy, MA-NH MSA

8. Please list all source of gross income anticipated to be received by any/all household members in the next 12 months, including but not limited to: Employment, Self-employment (net business income), unemployment, Social Security, SSI, SSP, Public Assistance, Pension payments, child support, alimony, regular gift/contributions, etc.

Full Household Member Name	Source of Income	Estimated Current Annualized Gross Income
		\$
		\$
		\$
		\$
		\$
		\$
		\$

#### **Asset Information:**

9. Please list household members' assets, including but not limited to: Checking accounts, Savings accounts, trust accounts, certificate of deposits (CDs), credit unions, saving bonds, life insurance policies, 401K, SSA Direct Express Debit cards, etc.

Full Name	Type of Account	Current Account Balance
		\$
		\$
		\$
		\$
		\$
		\$
		\$
		\$
		\$
		\$

Please note that Maloney Properties reserves the right to request additional documentation after reviewing the application. Failure to provide any additional documentation requested by Maloney Properties by the given deadline will result in your application not being entered into the lottery.

In carrying out this marketing program and buyer selection process, neither the Owner nor its Lottery Agent, will discriminate based on race, color, creed, religion, sex, familial status, sexual orientation, national or ethnic origin, handicap, citizenship, ancestry or marital status, public assistance, gender identity or any other basis prohibited by law.

Disabled persons are entitled to request a reasonable accommodation in rules, policies, practices, or services, or to request a reasonable modification in the housing, when such accommodations or modifications may be necessary to affordable person with disabilities an equal opportunity to use and enjoy the housing.

#### **Application Deadline**:

The deadline for completed applications by mail, postmarked no later than **Friday, September 6**<sup>th</sup>, **2024**Applications must be mailed to:

Maloney Properties, Inc. Attention: Maxwell Lottery 27 Mica Lane, Wellesley MA 02481

#### **Questions**:

Maloney Properties' staff are available to answer any questions during the process.

Please feel free to contact us:

Email: TheMaxwell@MaloneyProperties.com

**Phone**: (617) 531-7123 Extension 709 | US Relay 711

Website: www.TheMaxwellAffordables.com

#### **Signature Clause:**

I understand that the Lottery Agent is relying on this information to prove my household's eligibility for Maxwell, 102 Mill Road, Everett, MA. I certify that all information and answers to the above questions are true and complete to the best of my knowledge. I consent to release the necessary information to determine my eligibility. I understand that providing false information or making false statements may be grounds for denial of my application.

I authorize my consent to have the Lottery Agent verify the information contained in this application for purposes of proving my eligibility for occupancy. I will provide all necessary information and expedite this process in any way possible. I understand that my income must be eligible to be entered the lottery.

#### All ADULT household members must sign below:

Signature		Date
Signature		Date
Signature		Date
	Equal Housing Opportunity  Equal Housing Opportunity	