



your resource for Affordable Housing



**Wellesley Place
978 Worcester Street
Wellesley, MA**

Attached is the information regarding the affordable rental units at Wellesley Place in Wellesley, Massachusetts. Potential Tenants will not be discriminated against on the basis of race, color, national origin, disability, age, ancestry, children, familial status, genetic information, marital status, public assistance reciprocity, religion, sex, sexual orientation, gender identity, veteran/military status, or any other basis prohibited by law.

The current vacancies are available on a first come first serve basis. One assigned garage parking space is provided to each unit. Each unit includes a washer and dryer. Pets are allowed, per the pet policy. This is a smoke free building.

The monthly rents are: One Bedroom - \$1,591-; Two Bedroom - \$1,780, heat, hot water and water/sewer are included in the rent. A utility allowance has been deducted for electricity. Please review the enclosed information packet in detail and complete the application and disclosure statement at the rear of the packet.

The rents are NOT subsidized or income based. You are responsible for the full rent. Section 8 or other housing vouchers will be accepted but it is your responsibility to find out if your Section 8 provider accepts the rent and project. The minimum income, without a Section 8 Voucher, is: One Bed – \$47,730; Two Bed: \$53,400.

Thank you for your interest in affordable housing at **Wellesley Place**. We wish you the best of luck. Please contact MCO Housing Services at 978-456-8388 or email us at lotteryinfo@mcohousingservices.com if you have any questions. We encourage you to advise other people or organizations that may be interested in this program and make copies of the relevant information as needed.

Sincerely,
Maureen O'Hagan for Wellesley Place LLC



This is an important document. Please contact [AGENCY NAME] at [PHONE #] for free language assistance.

Este documento es muy importante. Favor de comunicarse con el MCO Housing en 978-456-8388 para ayuda gratis con el idioma. (Spanish)

Este é um documento importante. Entre em contato com o MCO Housing Serv no número 978-456-8388 para obter assistência gratuita com o idioma. (Portuguese)

Dokiman sila a enpòtan. Tanpri kontakte MCO Housing la nan 978-456-8388 pou asistans gratis nan lang. (Haitian Creole)

此文件為重要文件。如果您需要免費的語言翻譯幫助，請聯絡 MCO Housing 聯絡方式：978-456-8388。(Chinese, Traditional)

此文件为重要文件。如果您需要免费的语言翻译帮助，请联络 MCO Housing 联络方式：978-456-8388。(Chinese, Simplified)

Это весьма важный документ. Свяжитесь с сотрудником MCO Housing на предмет оказания бесплатной помощи по переводу на иностранный язык (978-456-8388). (Russian)
(Phone #)

នេះគឺជាឯកសារសំខាន់។ សូមទំនាក់ទំនង MCO Housing តាមរយៈ 978-456-8388 ដើម្បីទទួលបានជំនួយ ផ្នែកភាសាដោយឥតគិតថ្លៃ។ [Mon-Khmer, Cambodian]

Đây là một tài liệu quan trọng. Vui lòng liên hệ MCO Housing tại 978-456-8388 để được hỗ trợ ngôn ngữ miễn phí. (Vietnamese)

Kani waa dukumentiyu muhiim ah. Fadlan MCO Housing kala soo xiriir 978-456-8388 si aad u hesho gargaar xagga luqadda oo bilaash ah. (Somali)

هذه وثيقة مهمة. يرجى الاتصال بـ MCO Housing بـ 978-456-8388 للمساعدة اللغوية المجانية.
[Phone #] [Agency Name] (Arabic)

Ce document est très important. Veuillez contacter le MCO Housing au 978-456-8388 afin d'obtenir une assistance linguistique gratuite. (French)

Il presente è un documento importante. Si prega di contattare il MCO Housing al 978-456-8388 per avere assistenza gratuita per la traduzione. (Italian)



Wellesley Place

Question & Answer

The units will be leased in accordance with policies and guidelines established by the Commonwealth of Massachusetts Department of Housing and Community Development (DHCD).

What are the qualifications required for Prospective Tenants?

- Qualify based on the following maximum income table, which is adjusted for household size:

Household Size	1	2	3	4
Max Allowable Income	\$56,800	\$64,900	\$73,000	\$81,100

LOTTERY APPLICANT QUALIFICATIONS:

- Household income can not exceed the above maximum gross allowable income limits.
- When assets total \$5,000 or less, the actual income received is included in the annual income as income from assets OR when assets exceed \$5,000, annual income includes the greater of actual income from assets or a .06% imputed income calculation. Assets divested at less than full market value within two years of application will be counted a full market value when determining eligibility.
- In addition to income and asset eligibility you will also be subject to a screening by the project and determined eligible based on that basis.
- Households can not own a home, including homes in a trust, and lease an affordable unit.

Are there preferences for Household Size?

In all cases, preference for the one-bedroom unit will be for households that require one bedroom. Preference for the two bedrooms will be for households requiring two bedrooms. Unit size preferences are based on the following:

- There is a least one occupant per bedroom.
- A husband and wife, or those in a similar living arrangement, shall be required to share a bedroom. Other household members may share but shall not be required to share a bedroom.
- A person described in the first sentence of (2) shall not be required to share a bedroom if a consequence of sharing would be a severe adverse impact on his or her mental or physical health and the lottery agent receives reliable medical documentation as to such impact of sharing.
- A household may count an unborn child as a household member. The household must submit proof of pregnancy with the application.
- If the applicant is in the process of a divorce or separation, the applicant must provide proof that the divorces or separation has begun or has been finalized, as set forth in the application.

What happens if my household income exceeds the income limit?

Annually you will be recertified for eligibility. Once your household income exceeds 140% of the maximum allowable income adjusted for household size, then after the end of your current lease you will have the option of staying in your unit and paying the market rent or not renewing your lease.



**Required Personal Identification and Income Verification Documents
TO BE RETURNED WITH APPLICATION**

Provide one copy of all applicable information. Complete financial documentation is required and must be sent with your application to participate in the lottery. Incomplete applications will not be included in the lottery and the applicant will be notified after the application deadline. You may drop off your application at MCO Housing Services Harvard Office. If you drop off and wait while we review your application, you would have the opportunity to provide the missing documents prior to the deadline.

Initial each that are applicable, and provide the documents, or write N/A if not applicable and return this sheet with your application.

1. _____ Identification for each household member, i.e. Social Security Card, Birth Certificate etc.
2. _____ If you have a Section 8 Voucher or other Housing Voucher, you MUST provide a valid copy with your application.
3. _____ If you require a Special Accommodation you must request as part of your application and if documentation is required, i.e. doctors letter, it MUST be included with the application.
4. _____ Federal Tax Returns –2016, 2017 (NO STATE TAX RETURNS)
 - **NOTE:** Provide all pages that are submitted to the IRS. For example, if a Schedule C is submitted to the IRS and not part of your application, your application will be considered incomplete.
 - **NOTE:** If you did not submit a tax return for the 2016 and 2017 then you must provide a Verification letter of non-filing from the IRS. The form to request is 4506-T and can be found on irs.gov.
 - **NOTE:** If you filed your taxes and are unable to locate you can request the transcript of your Federal taxes by submitting form 4506-T to the IRS. The form can be found on irs.gov.
5. _____ W2 and/or 1099-R Forms: 2016, 2017
6. _____ The most recent last five (5) **consecutive** pay stubs for all jobs (check/direct deposit stubs). For unemployment, copies of unemployment checks or DOR verification stating benefits received. Same for disability compensation, worker’s compensation and/or severance pay.
 - **NOTE:** If you have obtained a new job within the last 12 months you must provide a copy of the Employment Offer Letter.
 - **NOTE:** If you are no longer working for an employer you worked for in 2017, you must provide a letter from the employer with your separation date.
 - **NOTE:** You need to provide 5 pay stubs whether you are paid weekly, bi-weekly or monthly.
7. _____ Benefit letter providing full amount of periodic amounts received from Social Security, annuities, insurance policies, retirement funds, pensions, disability or death benefits and other similar types of periodic receipts.

continued



8. ____ Child support and alimony: court document indicating the payment amount, DOR statement. If you do not receive child support provide a letter stating, that you are not receiving child support. See attached form.
9. ____ Interest, dividends and other net income of any kind from real or personal property.
10. Asset Statement(s): provide **current** statements of all that apply, unless otherwise noted:
- ____ Checking accounts – Last **three (3)** months of statements – EVERY PAGE – FRONT AND BACK.
NOTE: If you have cash deposits or non payroll or income deposits you MUST identify where the funds have come from. If you fail to explain they will be counted as income, which may put you over the income limit.
NOTE: Do NOT provide a running transaction list of activity. You must provide the individual statements.
 - ____ Pre-paid debit card statements – current month.
NOTE: This is NOT your ATM/Debit card. This is usually a separate debit card statement showing income deposited directing onto the debit card, i.e. Social Security or other regular income.
NOTE: If Social Security payments are deposited on a Direct Express card it is your responsibility to provide proof. You can print a statement from the Direct Express website at <https://www.usdirectexpress.com/>.
 - ____ Saving accounts – last three months of full statements
 - ____ Revocable trusts
 - ____ Equity in rental property or other capital investments
 - ____ Investment accounts, including stocks, bonds, Treasury Bills, Certificates of Deposit, Mutual Funds and Money Market Accounts including all individual retirement accounts, 401K, Keogh accounts and Retirement and Pension funds.
 - ____ Cash value of Whole Life or Universal Life Insurance Policy.
 - ____ Personal Property held as an investment
 - ____ Lump-sum receipts or one-time receipts
11. ____ Proof of student status for dependent household members over age of 18 and full-time students. Letter from High School or College providing student status, full time or part time for current or next semester.
12. ____ A household may count an unborn child as a household member. The household must submit proof of pregnancy with the application, i.e. letter from doctor.
13. ____ If the applicant is in the process of a divorce or separation, the applicant must provide legal documentation the divorce or separation has begun or has been finalized. Information must be provided regarding the distribution of family assets.

continued



14. _____ If you are self-employed you MUST provide a detail expense and income statement for the last 12 months and three months of business checking and savings accounts along with last three Federal Income Tax Returns.

We understand if we do not provide all applicable financial documentation we will not be included in the lottery. We also understand we will be notified after the application deadline that our application is incomplete. We also acknowledge that MCO Housing Services will not make any changes to our application, before the deadline date, unless we came to the Harvard office to make the necessary changes.

Print Applicants Name(s): _____

Applicants Signature

DATE

Co-Applicants Signature

DATE



Wellesley Place

First Come First Serve Application

For Office Use Only:

Date Appl. Rcvd: _____

Household Size: _____

PERSONAL INFORMATION:

Date: _____

Name: _____

Address: _____ Town: _____ Zip: _____

Home Telephone: _____ Work Telephone: _____ Cell: _____

Email: _____ Have you ever owned a home? Yes No If so, when did you sell it? _____

Do you have a Section 8 voucher (the units are NOT subsidized or income based): Yes No

Bedroom Size: One Bedroom; Two Bedroom

Do you require a wheelchair accessible unit? Yes No

FINANCIAL WORKSHEET: (Include all Household Income, which includes gross wages, retirement income (if drawing on it for income), business income, veterans' benefits, alimony/child support, unemployment compensation, social security, pension/disability income, supplemental second income and dividend income.)

Applicants Monthly Base Income (Gross) _____

Other Income, specify _____

Co-Applicants Monthly Base Income (Gross) _____

Other Income, specify _____

TOTAL MONTHLY INCOME: _____

Household Assets: (This is a partial list of required assets. Complete all that apply with current account balances)

Checking (avg balance for 6 months) _____

Savings _____

Stocks, Bonds, Treasury Bills, CD or _____

Money Market Accounts and Mutual Funds _____

Individual Retirement, 401K and Keogh accounts _____

Retirement or Pension Funds (amt you can w/d w/o penalty) _____

Revocable trusts _____

Equity in rental property or other capital investments _____

Cash value of whole life or universal life insurance policies _____

TOTAL ASSETS _____

(Please complete reverse side)

Language assistance will be available by appointment at no charge. Call 978-456-8388 to schedule.



EMPLOYMENT STATUS: (include for all working household members. Attach separate sheet, if necessary.)

Employer: _____
Street Address: _____
City/State/Zip: _____
Date of Hire (Approximate): _____
Annual Wage - Base: _____
Additional: _____ (Bonus, Commission, Overtime, etc.)

ABOUT YOUR HOUSEHOLD: (OPTIONAL)

You are requested to fill out the following section in order to assist us in fulfilling affirmative action requirements. Please be advised that you should fill this out based upon family members that will be living in the apartment/unit. Please check the appropriate categories:

	Applicant	Co-Applicant	(#) of Dependents
Non-Minority	_____	_____	_____
Black or African American	_____	_____	_____
Hispanic or Latino	_____	_____	_____
Asian	_____	_____	_____
Native American or Alaskan Native	_____	_____	_____
Native Hawaiian or Pacific Islander	_____	_____	_____

The total household size is _____ (This is very important to determine the maximum allowable income for your household.)

Household Composition (including applicant(s))

Name _____ Relationship _____ Age _____ Name _____ Relationship _____ Age _____
Name _____ Relationship _____ Age _____ Name _____ Relationship _____ Age _____

SIGNATURES:

The undersigned warrants and represents that all statements herein are true. It is understood that the sole use of this application is to establish the preliminary requirements for placement into a lottery to have an opportunity to lease an affordable unit at Wellesley Place. I (we) understand if selected all information provided shall be verified for accuracy at the time of lease.

Signature _____ Date: _____
Applicant(s)

Signature _____ Date: _____
Co-Applicant(s)

Return with signed Affidavit & Disclosure Form, complete financial documentation and Release of Information by mail, fax or email to:

MCO Housing Services
P.O. Box 372
Harvard, MA 01451

Drop off: 206 Ayer Road, Harvard, email: lotteryinfo@mcohousingservices.com



Wellesley Place

Affidavit & Disclosure Form

I/We understand and agree to the following conditions and guidelines regarding the distribution of the affordable units at Wellesley Place through DHCD in Wellesley, MA:

1. The gross annual household income for my family does not exceed the allowable limits as follows:

Household Size	1	2	3	4
Max Allowable Income	\$56,800	\$64,900	\$73,000	\$81,100

Income from all family members must be included.

- I/We understand the calculation of income will include the higher of actual income from assets (if over \$5,000) or an imputation of .06% of the value of total household assets which is added to a household's income in determining eligibility. Assets divested at less than full market value within two years of application will be counted at full market value in determining eligibility.
- The household size listed on the application form includes only and all the people that will be living in the residence.
- I/We certify all data supplied on the application is true and accurate to the best of my/our knowledge and belief under full penalty of perjury. I/We understand that providing false information will result in disqualification from further consideration.
- I/We understand that by being selected for a unit does not guarantee that I/we will be able to lease a unit. I/We understand that all application data will be verified and additional financial information may be required, verified and reviewed in detail prior to leasing a unit. I/We also understand that the Project's Owner will also perform its own screening to determine our eligibility to lease.
- I/We understand that if selected I/we will be offered a specific unit. I/We will have the option to accept the available unit, or to reject the available unit. If I/we reject the available unit I/we will move to the bottom of the waiting list and will likely not have another opportunity to lease an affordable unit at Wellesley Place.
- Program requirements are established by DHCD and are enforced by DHCD. I/We agree to be bound by whatever program changes that may be imposed at any time throughout the process. If any program conflicts arise, I/we agree that any determination made by DHCD is final.
- I/We certify that no member of our family has a financial interest in Wellesley Place.
- I/We understand there may be differences between the market and affordable units and accept those differences.
- I/We understand that if my/our total income exceeds 140% of the maximum allowable income at the time of annual eligibility determination, after the end of my then current lease term I will no longer be eligible for the affordable rent and have the option of moving out or paying market rent.

I/We have completed an application and have reviewed and understand the process that will be utilized to distribute the available units at Wellesley Place. I/We am qualified based upon the program guidelines and agree to comply with applicable regulations.

Applicant

Co-Applicant

Date

Return with completed application, complete financial documentation and Release of Information Form by mail, fax or email to:

MCO Housing Services
P.O. Box 372
Harvard, MA 01451

Drop off: 206 Ayer Road, Harvard, email: lotteryinfo@mcohousingservices.com



Wellesley Place
Wellesley, MA

Release of Information Authorization Form

Date: _____

I/We hereby authorize MCO Housing Services, Wellesley Place Leasing Office, Wellesley Place LLC, or any of its assignees to verify any and all income, assets and other financial information, to verify any and all household, resident location and workplace information and directs any employer, landlord or financial institution to release any information to MCO Housing Services, Wellesley Place Leasing Office, Wellesley Place LLC, or any of its assignees and consequently the Projects Administrator, for the purpose of determining income eligibility for Wellesley Place.

A photocopy of this authorization with my signature may be deemed to be used as a duplicate original.

Applicant Name (Please Print)

Applicant Name (Please Print)

Applicant Signature

Applicant Signature

Mailing Address

Return with completed application and Affidavit and Disclosure Form by mail, fax or email to:

MCO Housing Services, P.O. Box 372, Harvard, MA 01451
Drop off: 206 Ayer Road, Harvard, email: lotteryinfo@mcohousingservices.com

