



Sajda Gardens West Boylston, MA

WAIT LIST APPLICATION

All affordable units at Sajda Gardens are currently leased. If you would like to be added to the waiting list, please complete the application, and return to:

Sajda Gardens
92 North Main Street, Suite 120
West Boylston, MA 01583
Phone: (508) 726-9966

Email: leasing@equityproper.com

Maximum Allowable Income Limits per household size:

Household Size	1	2	3	4	5	6
Max Allowable Income	\$68,500	\$78,250	\$88,050	\$97,800	\$105,650	\$113,450

Section 8 or Other Housing Vouchers are Accepted

If you do not have a Section 8 housing voucher, there is minimum income limit that applies.





Sajda Gardens

WAITLIST APPLICATION

For Office Use Only:
Date Appl. Rcvd:
Household Size:

PERSONAL INFORMATION:			D	ate:		
Name:						
Address:		_ Town:	own: Zip:			
Home Telephone:	Telephone: Work Telephone: Cell:					
Email:						
Preferred Method of Contact:	Phone Email Ma	il				
Do you currently own a home:	YesNo					
Do you require a handicapped ada	ptable unit?Yes	No				
When would you be available to m	nove in?					
Bedroom Size:1 Bedrooi	m2 Bedroom	3 Bedroom				
Do you have a Section 8 or other h	ousing voucher? (These u	inits are NOT Subsidized	l):Yes	No		
The total household size is household.) Household Composition - include a		•	ne maximum all	owable income for	your	
Name				Age		
Name		Relationship		Age		
Name		Relationship		Age		
Name		Relationship		Age		
Name		Relationship		Age		
Name		Relationship		Age		
FINANCIAL WORKSHEET: (Include					n it for	
income), business income, veterar pension/disability income, suppler			t compensation	ı, social security,		
pension/disability income, suppler	nental second income and	<u>raiviaena income.)</u>				
Applicant Monthly Base Income (G	iross)					
Other Income, specify						
Co-Applicant Monthly Base Income	e (Gross)					
Other Income, specify						
TOTAL MONTHLY INCOME:						





Checking (avg balance for 3 months)				_
Savings				_
Stocks, Bonds, Treasury Bills, CD or				
Money Market Accounts and Mutu				_
Individual Retirement, 401K and Keogh				_
Retirement or Pension Funds (amt you	can w/d w/o penal	ty)		_
Revocable trusts				_
Equity in rental property or other capita				_
Cash value of whole life or universal life	e insurance policies			_
TOTAL ASSETS				_
<u>EMPLOYMENT STATUS:</u> (include for al	l working househo	ld members. Attac	ch separate sheet, if no	ecessary.)
Employer:				
Additional:		(Bonus,	Commission, Overtime	e, etc.)
ABOUT YOUR HOUSEHOLD: (OPTIONA You are requested to fill out the followi		to assist us in fulfil	ling affirmative action	requirements. Please he advised
that you should fill this out based upon	•		•	•
categories:	Applicant	Co-Applicant	(#) of Dependents	
Non-Minority	Applicant	CO-Applicant	(#) or Dependents	
Black or African American	·			
Hispanic or Latino				
Asian				
Native American or Alaskan Native				
Native Hawaiian or Pacific Islander				
SIGNATURES:				
We understand this application is for th	ne waiting list only.	If we have the opp	ortunity to lease we w	vill need to provide required
financial documentation before eligibili are true.				
Signaturo		Dato		
SignatureApplicant(s)		Date		
Signature		Date:		
Co-Applicant(s	5)			

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

Return to:

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Email: <u>jbernard@equityproper.com</u>



