



your resource for Affordable Housing



**Nexus Apartments
105 Hopkins Street
Wakefield, MA**

***You must contact the Leasing Office to complete their screening BEFORE submitting this application.
Contact the Leasing Office: 781-486-1195 or ndilorenzo@metprop.com***

Attached is the application to apply for a one or two bedroom affordable unit at Nexus Apartments.

The rents are:

One bedroom - \$1,904

Two bedroom - \$2,261

Tenants are responsible for all utilities.

The rents are NOT subsidized or income based. Section 8 or other housing vouchers are accepted. You are responsible for the full rent as stated.

The minimum income to lease, if you do not have a Section 8 or other housing voucher, is as follows:

One Bedroom - \$57,120

Two Bedroom - \$67,830

Applicants are not able to spend more than 40% of their income on rent. Rents subject to change when HUD releases new income limits.

Additional Information:

1. Applicants cannot exceed the maximum allowable income limits as stated on the application.
2. Interest/dividends of assets, \$5,000 or less, will be added to income in determining eligibility or for assets over \$5,000, the greater of interest/dividends or .06% of assets will be added to income in determining eligibility.
3. You can not own a home and lease an affordable unit. The home needs to be sold before you can move in.
4. Applicants will be recertified annually to determine continued eligibility. At recertification applicants can earn up to 140% of median income vs. the 80% at initial occupancy.
5. Applicants must be determined eligible through MCO Housing Services and the Leasing Office before they will be offered a unit. The Leasing Office conducts credit, past landlord, CORI screenings etc.

If you are interested in applying return the following application and all required financial documentation to:

MCO Housing Services

P.O. Box 372

Harvard, MA 01451

Phone: (978) 456-8388/Email: lotteryinfo@mcohousingservices.com

Nexus Apartments

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? _____ If so, when did you sell it? _____

Do you have a Section 8 Voucher? _____ Yes _____ No

Do you require a handicapped accessible unit? _____ Yes _____ No

Bedroom Size: _____ One _____ Two

of People Living in the Unit _____

Household Composition:

Name _____ Relationship _____ Age _____

Name _____ Relationship _____ Age _____

Name _____ Relationship _____ Age _____

Name _____ Relationship _____ Age _____

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.)

Tenants Monthly Base Income (Gross) _____

Other Income, specify _____

Tenants Monthly Base Income (Gross) _____

Other Income, specify _____

TOTAL MONTHLY INCOME: _____

Potential tenants will not be discriminated against on the basis of race, color, religious creed, marital status, military status, disability, national origin, sex, age, ancestry, sexual preference, source of income, presence of children, or any other basis prohibited by local, state or federal law.

(Please complete reverse side)

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

Checking (avg balance for 3 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	_____

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	_____	_____	_____

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 to have an opportunity to lease an affordable unit at Nexus Apartments. I (we) understand if selected all information provided shall be verified for accuracy at the time of lease.

Signature _____ Applicant(s)	Date: _____
Signature _____ Co-Applicant(s)	Date: _____

Nexus Apartments
Affidavit & Disclosure Form

I/We understand and agree to the following conditions and guidelines regarding the distribution of the affordable units at Nexus Apartments in Wakefield, 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	\$82,950	\$94,800	\$106,650	\$118,450

Income from all family members must be included.

2. 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 \$5,000 or less will add actual interest/dividends earned to income for final eligibility.
3. The household size listed on the application form includes only and all the people that will be living in the residence.
4. 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.
5. I/We understand that by submitting an application 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.
6. I/We further authorize MCO Housing Services 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 and consequently the Projects Administrator, for the purpose of determining income eligibility for Americana Apartments.
7. 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 Americana Apartments.
8. Program requirements are established by DHCD and MassHousing and are enforced by MassHousing. 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 MassHousing is final.
9. I/We certify that no member of our family has a financial interest in Nexus Apartments.
10. I/We understand there may be differences between the market and affordable units and accept those differences.
11. 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.

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

Applicant

Co-Applicant

Date

Return application and ALL required financial documentation to:

MCO Housing Services

P.O. Box 372

Harvard, MA 01451

Drop Off: 206 Ayer Road, Harvard, MA

Email: lotteryinfo@mcohousingservices.com

Phone: (978) 456-8388/Fax: 978-456-8986

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

Provide **one copy** of all applicable information. Complete financial documentation is required for your application to be reviewed for eligibility. A unit will not be held without complete documentation. Call should you have any questions at 978-456-8388.

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. _____ 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 the last 12 months, 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.
5. _____ 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.
6. _____ 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.
7. _____ 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.
8. _____ Federal Tax Returns –2021, 2022 (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 2021 and 2022 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](https://www.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](https://www.irs.gov).

9. _____ W2 and/or 1099-R Forms: 2021, 2022
10. _____ Interest, dividends and other net income of any kind from real or personal property.
11. 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

12. _____ 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.

13. _____ 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.

14. _____ 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.

We understand if we do not provide all applicable financial documentation our application will not be reviewed and we may lose the opportunity for a unit.

Print Applicants Name(s): _____

Applicants Signature DATE Co-Applicants Signature DATE

Return application and ALL required financial documentation to:

MCO Housing Services

P.O. Box 372

Harvard, MA 01451

Drop Off: 206 Ayer Road, Harvard, MA

Email: lotteryinfo@mcohousingservices.com

Phone: (978) 456-8388/Fax: 978-456-8986

Release of Information Authorization Form
Nexus Wakefield, MA

Date: _____

I/We hereby authorize MCO Housing Services, Nexus Leasing Office 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, Nexus Leasing Office or any of its assignees and consequently the Projects Administrator, for the purpose of determining income eligibility for Nexus in Wakefield, MA.

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

