

your resource for Affordable Housing



Polar Views Information and FIRST COME FIRST SERVE Application Package Shrewsbury, MA

Attached is the information regarding the affordable rental units at Polar Views in Shrewsbury, 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 recipiency, religion, sex, sexual orientation, gender identity, veteran/military status, or any other basis prohibited by law.

Located at 34/36 Harrington Avenue in Shrewsbury, Polar Views is a new 14-unit rental development offering 2 affordable one- or three-bedroom apartments for eligible tenants earning up to 80% of median income. Unassigned surface parking is available for all at no charge. Each unit includes one or two baths, depending on bedroom size, and all kitchen appliances in 655 or 1,312 sq. ft. In-unit washer and dryer included. The building does not have an elevator. Pets are not allowed, although service animals will be accepted. This is a smoke-free building.

The one-bedroom unit is available for \$1,633 per month. Tenants are responsible for all utilities. A utility allowance has been deducted from the rents. This unit is available on a first come first serve bases as outlined in the attached package. 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 a Housing voucher will be accepted but it is your responsibility to find out if your Section 8 or Housing provider accepts the rent and project. The minimum incomes, without a Section 8 or Housing Voucher is \$48,990.

PLEASE NOTE: All applicants must include complete financial documentation with the application for their application to be reviewed for eligibility.

An application will be considered incomplete if all financial documentation is not received. The applicant will receive an email with the list of missing documentation. The application will not be reviewed for eligibility until all financial documentation is received. A unit will not be reserved until all documentation is received and eligibility determined.

Thank you for your interest in affordable housing at *Polar Views*. 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.





Polar Views

Question & Answer

The units will be leased in accordance with policies and guidelines established by the Commonwealth of Massachusetts Executive Office of Housing and Livable Communities (EOHLC).

What are the qualifications required for Prospective Tenants?

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

·							
lousehold S	ize	1	2	3	4	5	6
/lax Allowab	ole Income up to 80%	\$68,500	\$78,250	\$88,050	\$97,800	\$105,650	\$113,450

APPLICANT QUALIFICATIONS:

- 1. Household income cannot exceed the above maximum gross allowable income limits. Income from all household members 18 or older must be provided.
- 2. 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 at full market value when determining eligibility.
- 3. In addition to income and asset eligibility you will also be subject to a screening by the project, i.e. credit, past landlord, CORI etc. and determined eligible based on that basis.
- 4. Households cannot own a home, including homes in a trust, and lease an affordable unit. Your home must be sold before you will be allowed to move-in.

Are there accessible/adaptable units?

Yes, all the units are adaptable. Applicants with disabilities may request reasonable accommodations or modifications of the housing when such accommodations or modifications are necessary to afford the disabled person equal opportunity to use and enjoy the housing.

Are there preferences for Household Size?

Household size preferences are based on the following:

- 1. There is at least one occupant per bedroom.
- **2**. 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.
- **3.** 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.
- **4.** A household may count an unborn child as a household member. The household must submit proof of pregnancy with the application.
- **5.** 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.

Households must not exceed the Massachusetts State Sanitary Code: 105 CMR 410. Applicants will not be offered a unit larger than they are eligible for.

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.





Once you have been determined eligible have your information will be forwarded to the Leasing Office. You will need to complete a Leasing Office application and they may screen for credit, criminal, sex offender, judgement & summary processes, and landlord checks. If the Leasing Office determines you are eligible then you will be offered the unit. You need to be determined eligible by MCO Housing Services and the Leasing Office. If either determines you do not meet the eligibility criteria, then you will not be able to lease a unit. If you have a Section 8 voucher or other housing voucher, they will have their own approval process. If the PHA does not accept the property or rent then you will be unable to lease.

Summary

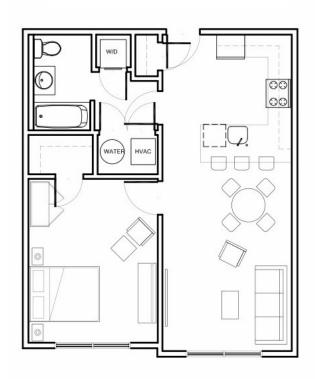
We hope this helps explain the process by which the units will be distributed. It can be a lengthy and sometimes complicated process. We greatly appreciate your participation and wish you the best of luck in the process.

Available Unit Numbers

Unit #	Bedroom Size	# of Bathrooms	Sq. ft.
102(H)	1	1	655

(H) – Group 2, handicap accessible.

SAMPLE ONE BEDROOM LAYOUT







Polar Views

FIRST COME FIRST SERVE APPLICATION

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

PERSONAL INFORMATION:			
Name:	Date:		
	Town:	Zip:	
Cell/Home Telephone:	Work Telephone:		
Email:			
	If yes, when did you or will you sell it?		
Do you have a Section 8 voucher (the	e units are NOT subsidized, or income based):	Yes	No
Bedroom Size:One Bedroom			
Are you disabled: Yes No_			
Do you require a wheelchair accessib	ole unit? Yes No		
Do you require any adaptations or sp	pecial accommodation? Yes No		
If yes, please explain:			
The total household size is	_		
Household Composition(including ap	plicant(s))		
Name	Relationship		Age
Name	Relationship		Age
it for income), business income, vete	Household Income, which includes gross wages, r rans' benefits, alimony/child support, unemploym ntal second income and dividend income.)		
Applicants Monthly Base Income (Gro Other Income, specify Co-Applicants Monthly Base Income Other Income, specify	(Gross)		
TOTAL MONTHLY INCOME:			
Household Assets: (This is a partial li	st of required assets. Complete all that apply with	current acco	unt balances)
Checking Savings Debit Card Stocks, Bonds, Treasury Bills, CD or			





Money Market Accounts and Mutual	Funds			_
Individual Retirement, 401K and Keogh ac	counts			
Retirement or Pension Funds (amt you ca		nalty)		_
Revocable trusts	,			
Equity in rental property or other capital i	investments			
Cash value of whole life or universal life ir		nio.		
Gift	iou. ui. oo poii.			_ _
TOTAL ASSETS				
<u>EMPLOYMENT STATUS:</u> (include for all w	vorking hous	ehold members.	Attach separate she	et, if necessary.)
Employer:				
Street Address:				
City/State/Zip:				
Date of Hire (Approximate):				
Annual Wage - Base:				
Additional:	(B	onus, Commissio	on, Overtime, etc.)	
ABOUT YOUR HOUSEHOLD: (OPTIONAL)				
You are requested to fill out the following	section in or	der to assist us i	n fulfilling affirmative	action requirements.
Please be advised that you should fill this	out based up	on family memb	ers that will be living	n the apartment/unit.
Please check the appropriate categories:				
A	pplicant	Co-Applicant	(#) of Dependents	
Non-Minority				
Black or African American				
Hispanic or Latino				
Λcian				
Nativa Amagrican an Alaskan Nativa				
Native Hawaiian or Pacific Islander				
_				
<u>SIGNATURES:</u>				
The undersigned warrants and represents	that all state	mants harain ar	a trua It is understoo	nd that the coloure of this
application is to establish the preliminary				
Views. I (we) understand if selected all in	•		•	
views. T (we) understand it selected all in	iorniation pro	ovided silali be v	erified for accuracy at	the time of lease.
Signature		Date:		
Applicant(s)				
,				
Signature		Date: _		
Co-Applicant(s)				





Polar Views Affidavit & Disclosure Form

I/We understand and agree to the following conditions and guidelines regarding the distribution of the affordable units at Polar Views in Shrewsbury, MA through the Mass Executive Office of Housing and Livable Communities:

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

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

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 the actual interest/dividends earned will be added to a household's income in determining eligibility.
- 3. The household size listed on the application form includes only 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 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 understand that if selected I/we may 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 Polar Views.
- 7. Program requirements are established by EOHLC and are enforced by EOHLC. 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 EOHLC is final.
- 8. I/We certify that no member of our family has a financial interest in Polar Views.
- 9. I/We understand there may be differences between the market and affordable units and accept those differences.
- 10. I/We understand 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 Polar Views. I/We am qualified based upon the program guidelines and agree to comply with
applicable regulations.

Applicant	Co-Applicant	Date

Refer to page 13 for submission information

APPLICATION TIPS

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READ THE FOLLOWING CAREFULLY

- More than 60% of applications submitted to MCO Housing Services for lotteries are incomplete and not included in lotteries. Please take the time to read the application and submit all required documentation. It is your responsibility to provide the correct documentation. It does not matter if you were the first application or the last application received, we will NOT review applications until AFTER the posted deadline.
- 2. Read the NOTES on the Required Personal Identification and Income Verification Documents. Failure to do so could mean the difference between a complete and incomplete application as well as eligibility for a unit.
- 3. All financial documentation, income, assets and tax returns, are required from all household adults aged 18 or older. No exceptions.
- 4. All Asset statements must include your name, account number and Institution name. Do not take photos or copy a statement from your phone. If you provide any asset statements without the above information your application is an automatic incomplete.
- 5. DO NOT ASSUME you do not need to provide a certain document. When in question call or email BEFORE you submit your application.
- 6. We will not use the amount listed on your paystubs or W2's regarding your retirement account i.e. 401K, 403B, IRA, Roth IRA etc. Your paycheck and W2's tell us you have a retirement account only. You must provide the last statement from whoever is managing the account for MCO to determine the account's value.
- 7. Do NOT forget to include statements from Robinhood or any other online investment accounts. They are considered part of your assets. If you have an open account, you must provide a statement whether there are any funds in the account or not.
- 8. If you are unable to provide specific information, then submit a note with your application explaining the circumstances. This will not guarantee your application will be reviewed for eligibility, but depending on the circumstances, we may be able to work with you.
- 9. Do not take photos with your cellphone of any documentation and email it to us. The photos are not legible, and we will not accept them.
- 10. You can fax your information, but it is not recommended. If all pages are not received your application would be considered incomplete.

Signature Date Signature Date

Required Personal Identification and Income Verification Documents

TO BE RETURNED WITH APPLICATION



I/We have read the above information.



Provide <u>one copy</u> of all applicable information. Complete financial documentation is required and must be sent with your application to be reviewed for eligibility. Incomplete applications will not be reviewed until all financial documentation is provided.

<u>Initial each item that are applicable AND provide the document. Write N/A if not applicable and return this sheet with your application.</u>

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 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) <u>consecutive</u> pay stubs for all jobs (check/direct deposit stubs). For unemployment, DOR verification stating benefits received and payment history. 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, semi-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 or see attached form.
7.	If you are self-employed you MUST provide a detailed 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 –2023 (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.

irs.gov and print out the Tax Transcript.

• **NOTE:** If you filed but do not have copies of your Federal Income Tax returns, you can obtain a copy of your Tax Transcript using form 4506-T that you can obtain at irs.gov or create an account at

	• <u>NOTE:</u> If you have not filed tax returns you must provide a letter from the IRS Verifying Non-filing of your tax return(s). Request Verification of Non-filing letter by using form 4506-T that you can obtain at irs.gov or create an account at irs.gov and print out the Verification of Non-filing letter.
9.	W2 and/or 1099-R Forms: 2023
	• NOTE: If you do not have copies of W2's and/or 1099's, you can obtain a copy of your Wage Transcript using form 4506-T that you can obtain at irs.gov or create an account at irs.gov and print out the Wage Transcript.
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:
	GENERAL NOTE: ALL ASSETS STATEMENTS MUST INCLUDED YOUR NAME, ACCOUNT NUMBER AND INSTITUTION NAME FOR ALL CHECKING, SAVINGS, INVESTMENT ACCOUNTS AND RETIREMENT ACCOUNTS. ANY ACCOUNTS PROVIDED WITHOUT THIS INFORMATION IS AN AUTOMATIC INCOMPLETE APPLICATION.
	•Checking accounts – Last three (3) months of statements – EVERY PAGE – FRONT AND BACK.
	NOTE: Direct deposits from Payroll, SS, tax refund, transfers between your accounts, DOR, DTA etc. we can identify. If you have cash deposits, payroll or non payroll or other income deposits you MUST identify where the funds have come from. For example only, VENMO, EBAY, POSHMARK, PAYPAL, CASH APP, ATM and MOBILE deposits, ZELLE and other transfers between any accounts but your accounts, etc. There is no way we can list all sources. 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 <u>NOT</u> 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 (3) months of full statements.
	NOTES: Direct deposits from Payroll, SS, tax refund, transfers between your accounts, DOR, DTA etc. we can identify. If you have cash deposits, payroll or non-payroll or other income deposits you MUST identify where the funds have come from. For example, VENMO , EBAY , POSHMARK , PAYPAL , CASH APP , ATM and MOBILE deposits , ZELLE and other transfers between any accounts but your accounts, etc. There is no way we can list all sources. If you fail to explain they will be counted as income, which may put you over the income limit.
	Revocable trusts





Applicants Signature	DATE	Co-Applicants Signature	DATE
Print Applicants Name(s):			
We understand if we do not provide reviewed for eligibility.	all applicable fina	ncial documentation our applicatio	on will not be
16 If you are receiving gift mor providing the funds and the monthly	_	asis you need to provide a letter sta	ating who is
15 If you have a home to sell y market analysis which provides the apartment.	•		
14If the applicant is in the production that the divorce or sprovided regarding the distribution	separation has beg		_
13A household may count a proof of pregnancy with the applica			old must submit
12Proof of student status for time students. Letter from High current or next semester.	•	hold members over age of 18 and providing student status, full time	•
Personal Property heLump-sum receipts o			
•Cash value of Whole		1K, 403B, etc for all current and pa fe Insurance Policy.	ist jobs
•		all online accounts, etc.	
		oonds, Treasury Bills, Certificates o	f Deposit, Mutua
 Equity in rental property 	erty or other canita	al investments	

Refer to page 13 for submission information





Polar Views Shrewsbury, MA

Release of Information Authorization Form

Date:		
I/We hereby authorize MCO Housing Service income, assets and other financial informate information and directs any employer, land Services, Polar Views Leasing Office, or any of determining income eligibility for Polar V	tion, to verify any and all household, reside lord or financial institution to release any of its assignees and consequently the Pro	ent location and workplace information to MCO Housing
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		

Refer to page 13 for submission information





Custody & Child Support Affidavit

Applicant/Tenant:		Unit #:	
Please comple	te a separate form for both biological o		this unit not living with ents:
Child Name/SSN(la	st four digits)/DOB :		
Name of Absent Pa	rent:		
Will this child live wi	th you in the tax credit apart	tment at least 50% o	of the time?
☐ YES	□ NO		
Was there a legal m	arriage to the other parent?	YES INO	□STILL LEGALLY MARRIED
document o If NO , pleas records sho	use submit a copy of the divo outlining custody arrangement se submit documents such a wing placement of child ild as a dependant on their i	nts. is court order, tax re	eturn, school records, or DHS
□ l did □	The absent parent □ C	Other:	□ No one
Do you receive supp	oort (monetary or not) for thi by be legally ordered or an ir	is child? □YES □	
If YES list amount \$	per		
Have you ever beer □YES	n awarded an amount of chil □NO	d support for this ch	nild through the courts?
If awarded but not p □YES	aid, have you taken legal ad	ction to collect child	support?
If so, please describ	e efforts and proof:		
Do you expect to re	ceive child support for this c	hild in the next 12 n	nonths?
accurate to the be representation he	est of my knowledge. The u	indersigned further i aud. False, mislead	n this certification is true and understand that providing false ing or incomplete information
(Signature of House	ehold Member)		Date
(Signature of Mana	ger)		Date





Return the following to MCO Housing Services:

- 1. Completed, signed and dated application.
- 2. Signed and dated Affidavit and Disclosure Form
- 3. Signed and dated Application Tip Sheet
- 4. Completed, signed and dated Required Personal Identification and Income Verification Documents Form
- 5. All required financial and other documentation.
- 6. Complete, signed and dated Release of Information Authorization Form
- 7. Documentation for Special Accommodations, if appropriate
- 8. Identification for all household members
- 9. Signed Custody and Child Support Affidavit, for each child, if applicable

RETURN TO:

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

Overnight mailing address: 206 Ayer Road, Suite 5, Harvard, MA 01451

Phone: 978-456-8388 FAX: 978-456-8986

Email: lotteryinfo@mcohousingservices.com
TTY: 711, when asked 978-456-8388



