



your resource for Affordable Housing



***Cohasset Place
Lottery Information and Application
Cohasset, MA***

Attached is the information regarding the affordable rental units at Cohasset Place in Cohasset, 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.

Located at 390 Chief Justice Cushing Highway in Cohasset, MA, Cohasset Place has 3 apartments available, by lottery, for eligible applicants. Two one-bedroom apartments and 1 two-bedroom apartment are available. Each unit includes one full bath in 1,041 – 1,120 sq. ft. of living space based on bedroom size. This is a smoke-free property. One cat or dog per unit is allowed. Breed restrictions do apply. Monthly pet rent is \$60 for a dog or a cat. Washer and dryer are included. Surface parking is available at no charge.

The monthly rents are: \$2,150 for a one-bedroom apartment and \$2,350 for a two-bedroom apartment. Tenants are responsible for electricity, gas heat, hot water, water and sewer. A utility allowance has been deducted from the maximum allowable rent. These affordable units will be distributed by lottery 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 other Housing vouchers 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 income, without a Section 8 or Housing Voucher, are: One Bedroom - \$64,500; Two Bedroom - \$70,500.

Please note: Complete financial documentation is required and must be sent with your application to participate in the lottery. Included in this package is the list of required documentation and additional forms, if applicable, to be sent in with your application. Applications will be logged in at time of receipt and will be reviewed after the application deadline. Incomplete applications will not be included in the lottery and the applicant will be notified after the application deadline.

Applicants who submitted an incomplete application can submit the missing documentation you will be added to the waiting list. The waiting list will be used if units remain after the lottery. Your application will be reviewed for eligibility if you have the opportunity to lease.

Applicants who submitted a complete application but are determined ineligible based on eligibility criteria will have the opportunity to appeal the decision.

Key Meeting Dates

Public Information Meeting via Zoom.com

6:30 p.m., Monday April 21, 2025

Go to Zoom.com and provide following, when prompted:

Meeting ID: 885 2360 7131

Passcode: 240897

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Application Deadline

May 12, 2025

Lottery via Zoom.com

3:00 p.m., Monday, June 2, 2025

Go to Zoom.com and provide the following, when prompted:

Meeting ID: 836 6975 7754

Passcode: 992468

Translation Assistance available at no charge, upon request.

The Public Information Meeting will be recorded and posted on our website, mcohousingservices.com, within 48 hours after the meeting for your listening pleasure.

Thank you for your interest in affordable housing at **Cohasset 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



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 ដើម្បីទទួលបានជំនួយផ្នែកភាសាដោយឥតគិតថ្លៃ។ [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)



Cohasset Place

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:

Household Size	1	2	3	4
Max Allowable Income	\$91,200	\$104,200	\$117,250	\$130,250

LOTTERY APPLICANT QUALIFICATIONS:

1. Household income cannot exceed the above maximum gross allowable income limits. Income is included for all household members 18 years of age or older.
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 amount 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 and determined eligible based on that basis.
4. Households cannot own a home, including homes in a trust, and lease an affordable unit.

Are there accessible/adaptable units?

Yes, 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. All units are adaptable. Applicants must request special accommodation at time of application and provide documentation, if needed, i.e. letter from doctor.

Are there preferences for Household Size?

In all cases, the preference for the two-bedroom units will be for households that require two bedrooms. The preference for the one-bedroom unit will be for a household requiring one bedroom. Unit 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.

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.



Lottery Process

Due to the nature of the affordable units' availability, it is important for everyone to understand the procedure. Please understand the allowable income guidelines are adjusted based upon your household size. Also, be advised that the program and its requirements are subject to changes in local, state or federal regulations.

Lottery Pools

Three one and two apartments are available by lottery at Cohasset Place. The units will be distributed through the Open Pool. The units' breakdown are as follows:

Unit Size	# of Units
One Bedroom	2
Two Bedroom	1

All applicants determined eligible to participate in the lottery will receive a lottery code. This code is what will be announced during the lottery.

All eligible applicants will be pulled at the time of the lottery. This will establish the rankings for the distribution of units. The highest ranked applicants that meet the Household Size Preference (see page 4) for a one-bedroom unit and two-bedroom unit will have the initial opportunity to lease.

Please note: Household size shall not exceed, nor may the maximum allowable household size be more restrictive than State Sanitary Code requirements for occupancy of a unit (See 105 CMR 400). Applicants will not be approved for units larger than their household size allows.

Once the lottery rankings have been determined your information will be forwarded to the Leasing Office for credit and background checks. If the Leasing Office determines you are eligible then you will be offered a unit.

You need to be determined eligible by MCO Housing Services and the Leasing Office and if you have a Section 8 or other housing voucher, your Public Housing Authority (PHA). If the PHA determines you or the project does not meet the eligibility criteria then you will not be able to lease a unit. If anyone determines you do not meet their eligibility criteria, then you will not be able to lease a unit.

If there are lottery applicants remaining once the affordable units are leased, then they will be the beginning of the waiting list for future vacancies.

Acceptance of Units

It is important for all applicants to understand that applicants may have an opportunity to select their unit if they meet all the deadlines, to be provided post lottery, to all that have the initial opportunity to lease. Unit selection will be done in the ranking order post lottery for the initial 3 applicants that have the opportunity to lease based on the lottery results only. Unit selection will happen after the Leasing Office application has been completed and approved. If the Leasing Office denies your application, then you will not be able to lease. Applicants with a Section 8 or other Housing Voucher, the project and rents need to be approved by your voucher holder. If they do not accept the rents or project, you will not be able to lease, even if you were approved by the Leasing Office. Applicants that miss the deadlines provided will lose the opportunity to lease as we will move to the next applicant on the lottery list.

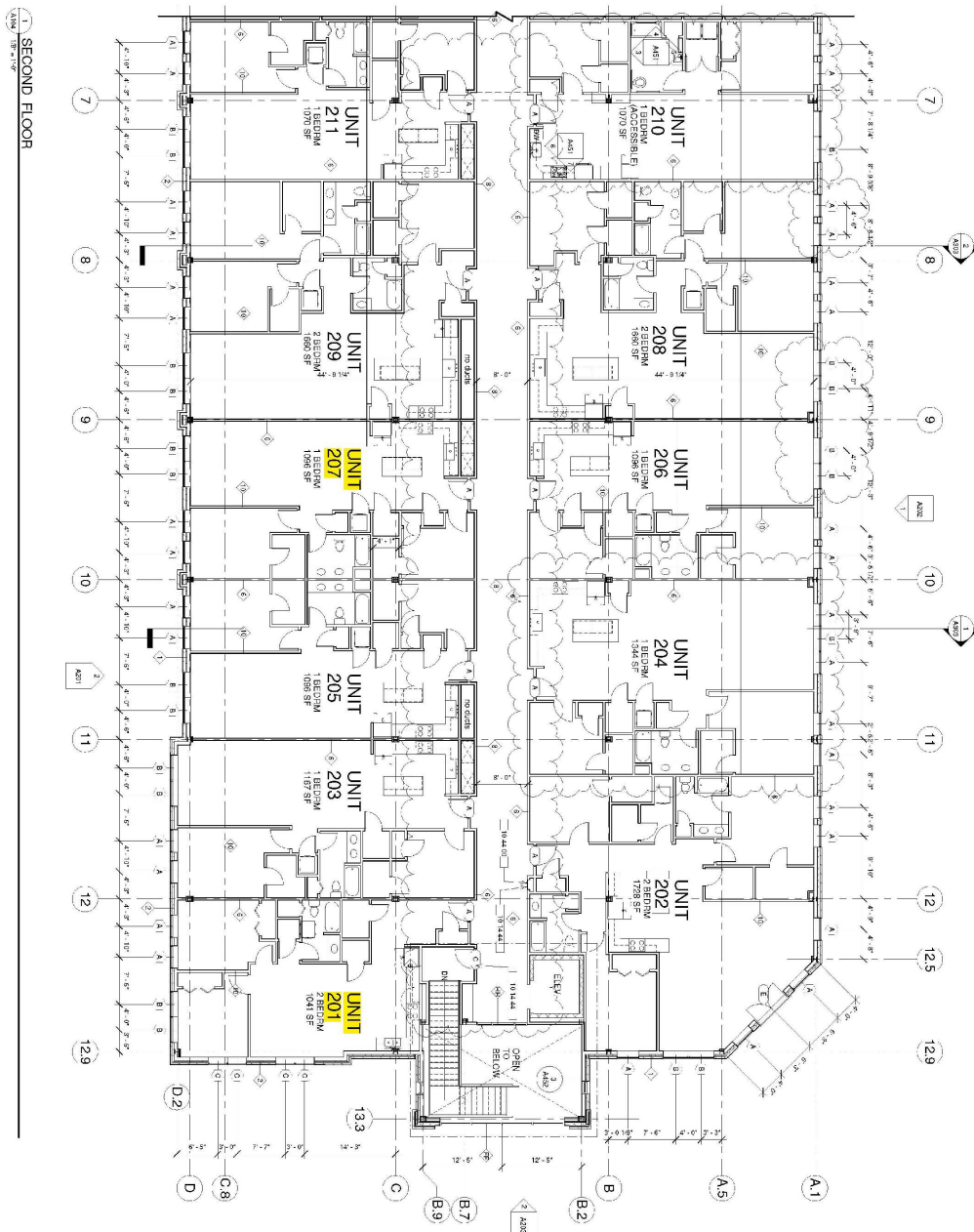
Summary

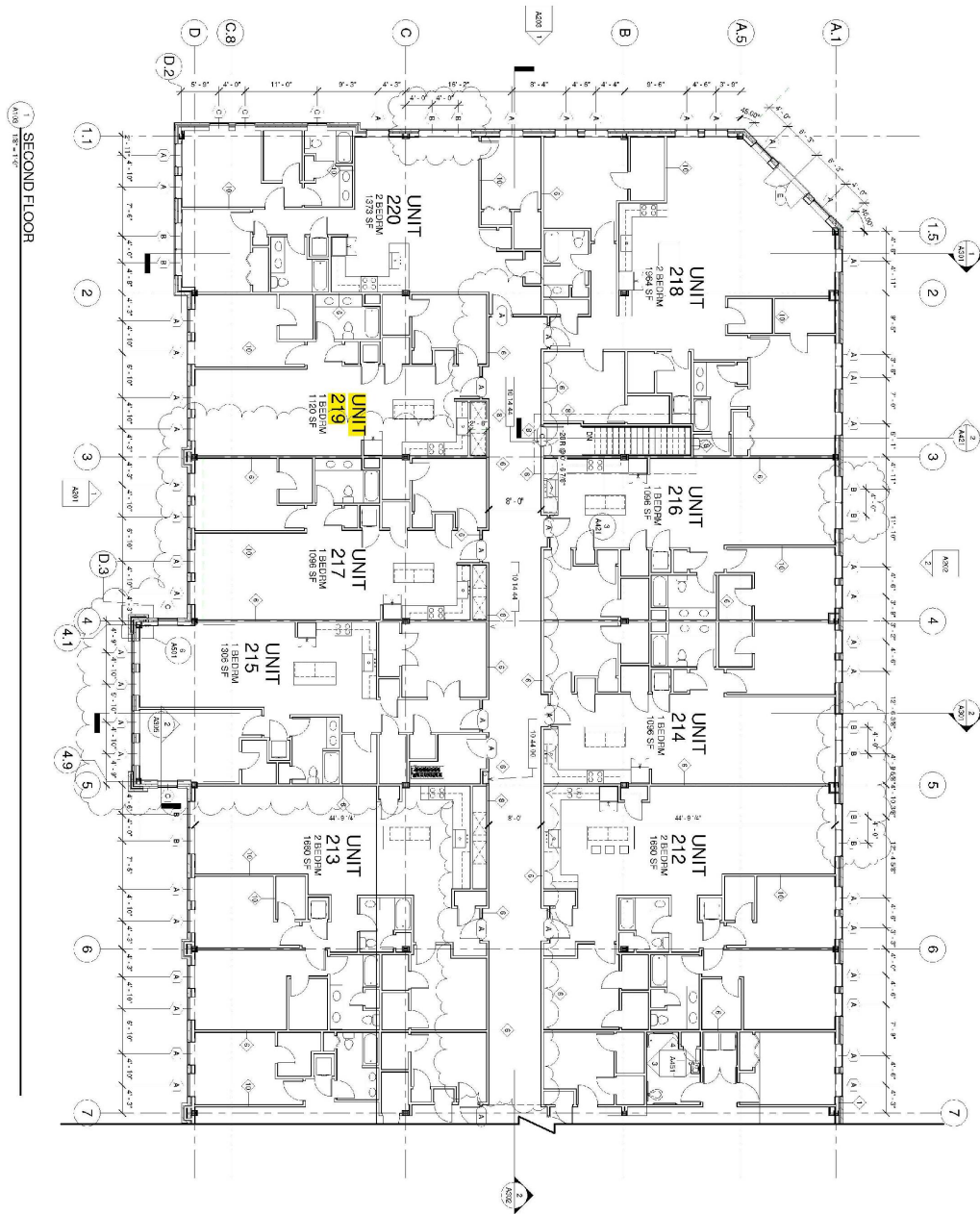
We hope this helps explain the process by which the units will be distributed. It can be a lengthy and sometimes complicated process. We greatly appreciate your participation and wish you the best of luck in the lottery process.



UNIT AVAILABILITY

Unit #	Bedroom Size	Sq. Ft.
201	2	1,041
207	1	1,096
219	1	1,120





Cohasset Place

LOTTERY APPLICATION

Application Deadline: May 12, 2025

For Office Use Only:

Date Appl. Rcvd: _____

Household Size: _____

Lottery Code: _____

PERSONAL INFORMATION: Print Legibly

Date: _____

Name: _____

Address: _____ Town: _____ Zip: _____

Cell Phone Number: _____ Work Telephone: _____

Email: _____

Have you ever owned or currently own a home? _____ If so, when did you /will you sell the home? _____

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

Check bedroom size: _____ One _____ Two

Are you disabled? _____ Yes _____ No

Do you require special accommodation? _____ Yes _____ No

If yes, please state what is needed: _____

Household Composition – include ALL that will be living in the unit

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 _____

Co-Tenants 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 _____
 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: _____
 Town/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
White/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 for placement into a lottery to have an opportunity to lease an affordable unit at Cohasset 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)

Refer to page 18 for submission information



Cohasset Place

Affidavit & Disclosure Form

I/We understand and agree to the following conditions and guidelines regarding the distribution of the affordable units at Cohasset Place through EOHLC in Cohasset, 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	\$91,200	\$104,200	\$117,250	\$130,250

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. The interest /dividends earned for assets \$5,000 or under will be added to 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.
3. The household size listed on the application form includes only 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 being selected in the lottery 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 Cohasset Place.
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 Cohasset Place.
9. I/We understand there may be differences between the market and affordable units and accept those differences.
10. 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.
11. I/We understand that MCO Housing Services (MCO) is not responsible for incomplete applications if received by mail, email, or fax. It is understood that MCO will not notify tenants if their application is incomplete until after the deadline.



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

Applicant

Co-Applicant

Date

Refer to page 18 for submission information



Cohasset Place
Cohasset, MA

Release of Information Authorization Form

Date: _____

I/We hereby authorize MCO Housing Services, Cohasset Place Leasing Office, Cohasset Associates, 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, Cohasset Place Leasing Office, Cohasset Associates, or any of its assignees and consequently the Projects Administrator, for the purpose of determining income eligibility for Cohasset 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

Refer to page 18 for submission information



APPLICATION TIPS

PLEASE READ THE FOLLOWING CAREFULLY

1. 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 and assets, 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 tells us you have a retirement account only. You must provide the last statement from whoever is managing the account in order 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 included in the lottery, 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.

I/We have read the above Application Tips.

Applicant Signature

Date

Co-Applicant Signature

Date



**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.

Initial each item that are applicable AND provide the document. 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. _____ Proof of Local Preference, if applicable. i.e. lease, utility bill, voter registration, etc.
4. _____ 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.
5. _____ 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.
6. _____ 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.
7. _____ 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 the attached form.
8. _____ 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.



9. _____ Federal Tax Returns –2023 or 2024, if 2024 has been filed with the IRS (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 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 irs.gov and print out the Tax Transcript.
- **NOTE:** 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.

10. _____ W2 and/or 1099-R Forms: 2023 and 2024

- **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.

11. _____ Interest, dividends and other net income of any kind from real or personal property.

12. 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, **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 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

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
- _____ Equity in rental property or other capital investments
- _____ Investment accounts, including stocks, bonds, Treasury Bills, Certificates of Deposit, Mutual Funds, Money Market, Robinhood and all online accounts, etc.
- _____ Retirement accounts, IRA, Roth IRA, 401K, 403B, etc for all current and past jobs
- _____ Cash value of Whole Life or Universal Life Insurance Policy.
- _____ Personal Property held as an investment
- _____ Lump-sum receipts or one-time receipts

13. _____ Proof of student status for dependent household members over age of 18 and full-time or part-time students. Letter from High School or College providing student status, full time or part time for current or next semester.

14. _____ 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.

15. _____ If the applicant is in the process of a divorce or separation, the applicant must provide legal documentation that 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 we will not be included in the lottery. We also understand we will be notified after the application deadline that our application is incomplete.

Print Applicants Name(s): _____

Applicants Signature

DATE

Co-Applicants Signature

DATE

See page 18 for submission information



COMPLETE ONE FORM PER CHILD

Custody & Child Support Affidavit

Applicant/Tenant: _____ **Unit #:** _____

Please complete a separate form for each minor in this unit not living with both biological or adoptive parents:

Child Name/SSN(last four digits)/DOB : _____ / _____ / _____

Name of Absent Parent: _____

Will this child live with you in the tax credit apartment at least 50% of the time?

YES NO

Was there a legal marriage to the other parent? YES NO STILL LEGALLY MARRIED

- If **YES**, please submit a copy of the divorce decree, separation agreement, or other document outlining custody arrangements.
- If **NO**, please submit documents such as court order, tax return, school records, or DHS records showing placement of child

Who claimed the child as a dependant on their most recent tax return?

I did The absent parent Other: _____ No one

Do you receive support (monetary or not) for this child? YES NO

(Note: "Support" may be legally ordered or an informal agreement)

If **YES** list amount \$ _____ per _____

Have you ever been awarded an amount of child support for this child through the courts?

YES NO

If awarded but not paid, have you taken legal action to collect child support?

YES NO

If so, please describe efforts and proof: _____

Do you expect to receive child support for this child in the next 12 months?

YES NO

Under penalty of perjury, I certify that the information presented in this certification is true and accurate to the best of my knowledge. The undersigned further understand that providing false representation herein constitutes an act of fraud. False, misleading or incomplete information may result in the termination of a lease agreement.

(Signature of Household Member)

Date

(Signature of Manager)

Date

Custody & Child Support Affidavit

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Page 1 of 1



Return the following to MCO Housing Services:

1. Completed, signed and dated application
2. Read, signed and dated Affidavit and Disclosure Form
3. Read, signed and dated Application Tip Information 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 needed
8. Identification for all household members

RETURN ALL via email, fax or by mail postmarked on or before the May 12, 2025 application deadline to:

MCO Housing Services, LLC

P.O. Box 372

Harvard, MA 01451

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

Phone: 978-456-8388

FAX: 978-456-8986

Email: lotteryinfo@mcohousingservices.com

TTY: 711, when asked 978-456-8388

All mailed applications must be postmarked on or before the May 12, 2025 application deadline and must be in MCO's office on or before May 27, 2025 to be reviewed for eligibility and potentially be included in the lottery. You may want to send the application by certified mail, that way you will be able to track the process. Any mailed applications postmarked on or before the application deadline and received after May 27, 2025 will be added to the waiting list.

