

## your resource for Affordable Housing



# Amara Information and Lottery Application Package Beverly, MA

Attached is the information regarding the affordable rental units at Amara in Beverly, 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 6 Rantoul Street, Amara is a new multi-family building offering 1 studio, 3 one bedroom- and 1 two-bedroom apartments to eligible application earning up to 60% of median income. All units will be distributed by lottery. The building has an elevator. Each unit includes a washer and dryer and all kitchen appliances. This is a smoke free building. There is garage parking as well as outdoor parking available for all units. Garage parking is at a \$150/month fee and outdoor parking has a \$75/month fee. Outdoor tandem spaces are available for two vehicles at \$150/month fee. A maximum of two dogs or cats are allowed per the pet policy. The monthly pet rent is \$75/month per dog and \$50/month per cat.

The monthly rents are: Studio - \$1,498; One Bedroom - \$1,671; Two Bedroom - \$1,823. Tenants are responsible for all utilities. Utilities are electric plus water and sewer. A utility allowance has been deducted from the rents. 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 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 income, without a Section 8 or Housing Voucher, are: Studio - \$44,940; One Bedroom - \$50,130; Two Bedroom - \$54,690. A combination of income and assets <u>may</u> be taken into consideration when determining the minimum income.

<u>Please note</u>: Complete financial documentation is required to participate in the lottery. Included in this package is the list of documentation required 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. The incomplete notification will include the list of documents that were not provided. If you provide the missing documentation, you will be added to the waiting list should units remain after the lottery.

Complete applications will be reviewed for eligibility. If you are determined eligible you will receive a lottery code prior to the lottery.

## KEY MEETING DATES

**Public Information Meeting via Zoom.com** 

6:30 p.m., Tuesday, August 5, 2025 Go to Zoom.com and provide the following, when prompted: Meeting ID: 828 8634 5097

Passcode: 275705
Page 1 of 22







## **Application Deadline**

August 25, 2025

#### Lottery via Zoom.com

3:00 p.m., Tuesday, September 23, 2025 Go to Zoom.com and provide the following, when prompted: Meeting ID: 890 5859 7479 Passcode: 728501

For those applicants who are unable to attend the Public Information Meeting via Zoom, the meeting will be recorded and posted on mcohousingservices.com within 48 hours of the meeting.

Thank you for your interest in affordable housing at *Amara*. We wish you the best of luck. Please contact MCO Housing Services at 978-456-8388 or email us at <a href="lotteryinfo@mcohousingservices.com">lotteryinfo@mcohousingservices.com</a> 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.

Maureen M. O'Hagan

Maureen M. 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 <u>978-456-8388</u> 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  $\underline{MCO\ Housing}$  на предмет оказания бесплатной помощи по переводу на иностранный язык  $(\underline{978-456-8388})$ . (Russian) (Phone #)

នេះគឺជាឯកសារសំខាន់។ សូមទំនាក់ទំនង <u>MCO Housing</u> តាមរយៈ <u>978-456-8388</u> ដើម្បីទទួលបានជំនួយ ផ្នែកភាសាដោយឥគគិតថ្លៃ។ [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 dukumentiyo muhiim ah. Fadlan MCO Housing kala soo xiriir <u>978-456-8388</u>si aad u hesho gargaar xagga luqadda oo bilaash ah. (Somali)

هذه وثيقة مهمة. يرجي الاتصال بـ <u>MCO Housing بـ MCO Housing بـ (Arabic)</u> [Phone #] [Agency Name] (Arabic)

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

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









#### **Amara**

### 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
Up to 60% Max Gross Income Limits	\$69,487	\$79,387	\$89,325	\$99,225

#### **LOTTERY APPLICANT QUALIFICATIONS:**

- 1. Household income cannot exceed the above maximum gross allowable income limits. Income documentation is required for each household member 18 years of age or older. No exceptions. Income will be projected forward 12 months.
- 2. When assets total \$5,000 or less, the actual interest/dividend income received is included in the annual income OR when assets exceed \$5,000, annual income includes the greater of actual income from interest/dividends or a .06% imputed income calculation.
- 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. Applicants may not own a home and lease an affordable unit, including homes in a trust.
- 5. Persons with disabilities will be given first preference for such units regardless of what pool they are in based on the requested bedroom size. Where a person with a disability is waiting for an accessible unit and a unit with adaptive features becomes available, the owner/management agent must offer to adapt the unit.

### Are there accessible/adaptable units?

All units are adaptable. There are two wheelchair accessible units: 1 one bedroom and 1 two-bedroom apartment. There is 1 one-bedroom hearing impaired unit available. Applicants requiring the wheelchair accessible unit will have priority. Disabled applicants 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. Such reasonable accommodation is not limited to Group 2 units. The request for reasonable accommodation must be made at the time of the initial lottery application with the required documentation, i.e. letter from doctor.

#### Is there a Local Preference Pool?

Yes, three (3) of the five available units are designated local preference for the initial lease up. See page 12 for the Local Preference categories.

#### Are there preferences for Household Size?

In all cases, unit preference size will be 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 will not be offered units larger than the allowable preference size for your household.

## Are there considerations for minorities?

If the percentage of minority applicants in the Local Preference Pool is less than the percentage of minorities in the Surrounding HUD-defined area, currently 33.4%, a preliminary lottery will be held comprised of all the minority applicants who do not qualify for the Local Preference Pool. Minority applicants not otherwise qualifying for the Local Preference Pool would be drawn at random from the Open Pool until the percentage of minorities in the Local Pool is no longer below the percentage of minorities in the surrounding HUD-defined area. Applicants not selected for the Local Preference Pool would be in the Open Pool only.

#### 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**

Five (5) affordable units are available by lottery at Amara in Beverly. The units will be distributed through two pools. The lottery provides you with an opportunity to lease only and does not guarantee you a unit. The units' breakdown as follows:

Unit Size	# of Units	<b>Local Pool</b>	Open Pool
Studio	1	1	0
One Bedroom	3	1	2
Two Bedroom	1	1	0

Each eligible applicant will receive a confirmation email, prior to the lottery, which will include your lottery code. The lottery code is what will be announced during the lottery to protect your privacy. Applicants in the Local Preference Pool would have two opportunities for a unit by also being included in the Open Pool.

If you submitted a complete application and were determined ineligible based on the program eligibility criteria you will have an opportunity to appeal the decision.

All eligible applicants for a given pool will be pulled at the time of the lottery. This will establish the lottery rankings for the distribution of units. Unit distribution will be based on the lottery pool and will go to the highest ranked applicant meeting appropriate household size in either the Local Preference or Open Pool. For example, we fill the Local Preference Pool two-bedroom unit, the highest ranked household in the Local Pool that meets the Household Size Preference (see Page 4) for a two-bedroom unit you will be offered the two-bedroom unit first. This process will be identical for both the Local Preference Pool and Open Pool and will be used for all unit sizes until all units are leased or until the lottery list is exhausted.

**Please note:** Household size preference will override local preference. This means if we exhaust the applicants in the local pool that require two-bedroom units we will move to the open pool for households requiring two bedrooms. 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 to the extent permitted by EOHLC guidance in effect at the time of your application. If the Leasing Office determines you are eligible then you will be offered a unit. At lease signing you will be required to pay the first month's rent and security deposit. The security deposit is to be determined.

You need to be determined eligible by MCO Housing Services, 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 there are lottery applicants remaining once the affordable units are leased then, based on the order in which such applicant was drawn from the Open Pool and subject to any applicable preferences for accessible units and household size, MCO Housing Services will establish a waiting list for future vacancies.

## **Acceptance of Units**

The lottery provides for an opportunity to lease a unit only. The lottery rankings do not provide the order in which applicants select a unit. Initial applicants, with the opportunity to lease, will be provided with a timeframe to contact the Leasing Office to complete their screening. If an applicant does not contact the Leasing Office within the time frame provided, then they may lose the opportunity to lease, and we will move onto 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 #	Income Limit	Unit Size	Bath	Sq. Ft.
103 (H)	60%	2 BR	2	973
110 (HI)	60%	1 BR	1	688
208 (H)	60%	1 BR	1	701
305	60%	1 BR w/ den	2	1000
407	60%	Studio	1	464

(H) = Wheelchair Accessible

(HI) = Hearing Impaired

### **Community Amenities**

Roof Deck Kitchen and Lounge

**Fitness Center** 

Club Room

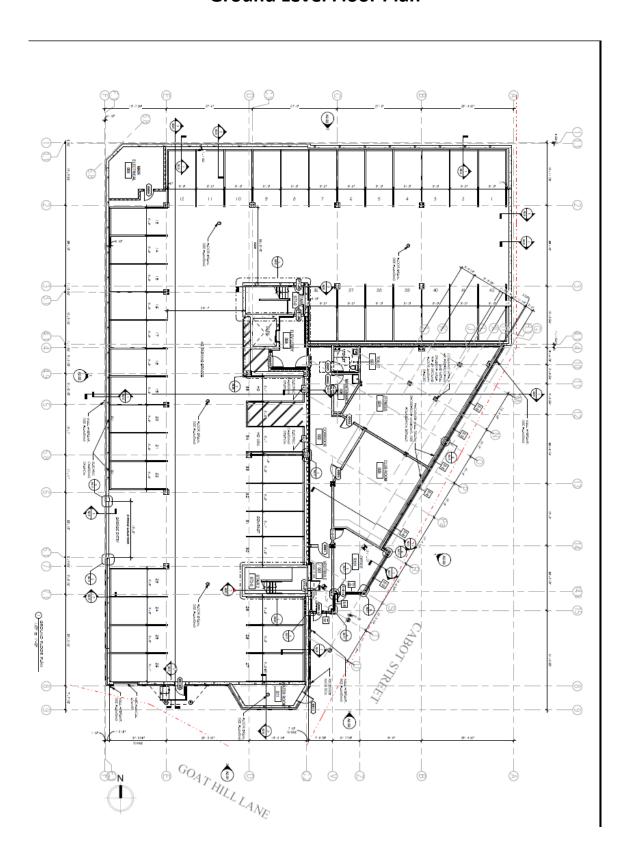
Package Room







## **Ground Level Floor Plan**

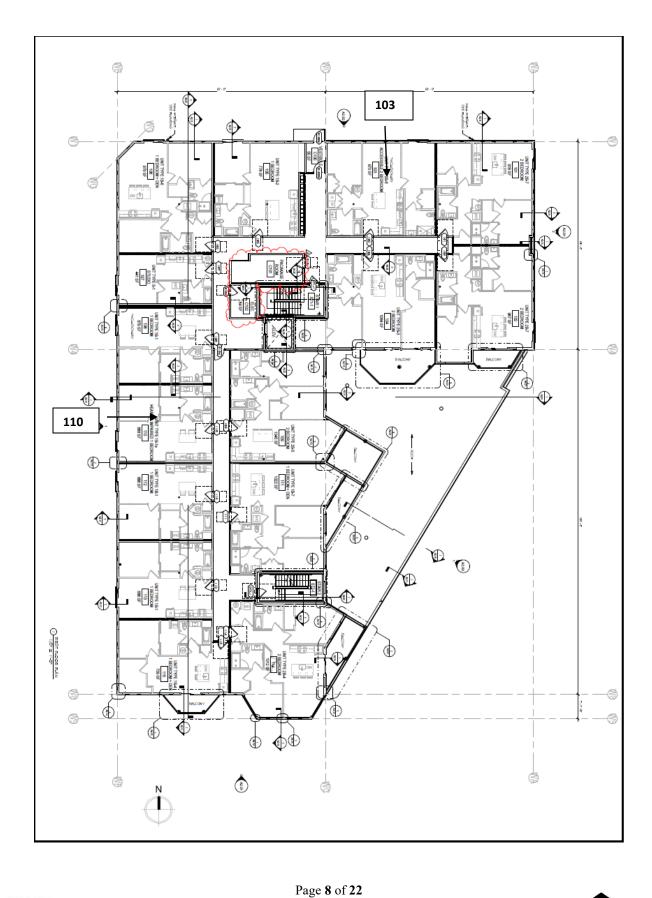








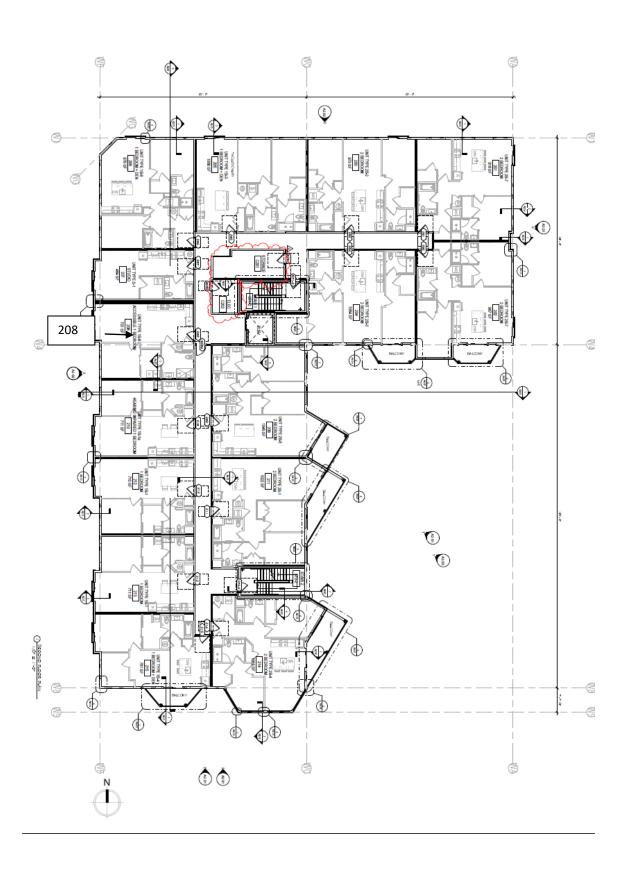
## 1<sup>st</sup> Floor Plan

















## 3<sup>rd</sup> Floor Plan

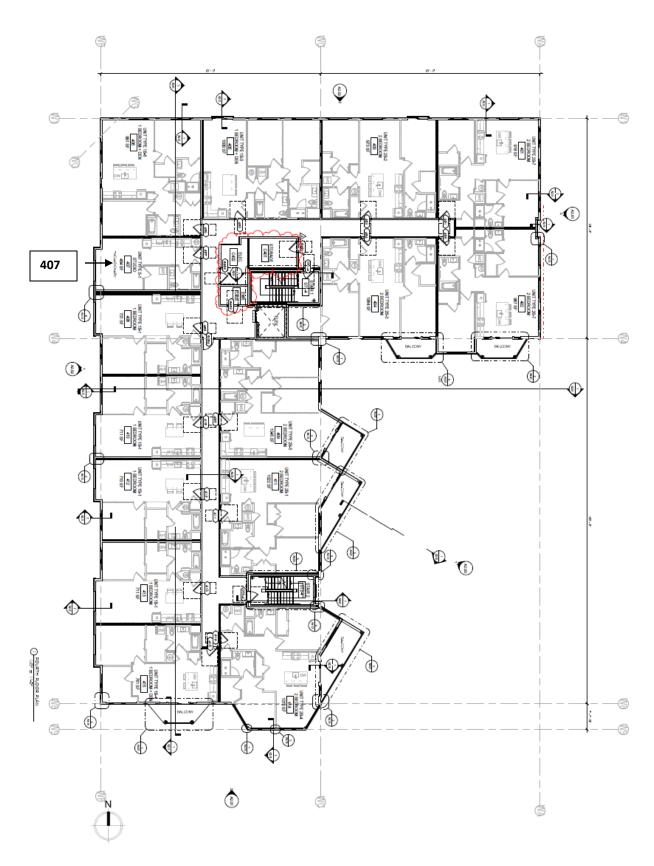








## 4<sup>th</sup> Floor Plan











## **AMARA APARTMENTS**

## **LOTTERY APPLICATION**

**Application Deadline: August 25, 2025** 

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

PERSONAL INFORMATION:				
Name:		Date:		
			Zip:	
Do you currently own a hor				
lease.  Current Beverly Resi Currently employed Employees of local B City of Beverly Household with child	dent by the City of Beverly or t everly businesses or with dren attending the Beverly	he Beverly School Departr an offer of bonafide empl y School System, such as N	loyment from a company located in the METCO students	
Do you have a Section 8 or	other housing voucher (th	e units are <b>NOT</b> subsidize	d or income based): Yes No	
Do you require a wheelchai	r accessible unit?	Yes No		
Do you require a hearing-in	npaired unit? Yes	No		
Do you require any special	accommodation? Y	'es No		
If yes, please specif	y:			
Bedroom Size: Studi	o One Bedroom	Two Bedroom		
The total household size is household.)	(This is very im	portant to determine the	maximum allowable income for your	
Household Composition - ir	clude all that will be living	g in the unit:		
Name	Relationship	A	ge	
Name	Relationship	A	ge	
Name	Relationship	A	ge	
Name	Relationship	Δ	ge	







Applicants Monthly Base Income (Gros	ss)			
Other Income, specify				_
Co-Applicants Monthly Base Income (C	Gross)			_
Other Income, specify				<u> </u>
				_
TOTAL MONTHLY INCOME:				
Household Assets: (This is a partial list	of required ass	sets. Complete al	I that apply with cur	rent account balances)
Checking				
Savings				
Debit Card				<del></del>
Stocks, Bonds, Treasury Bills, CD or				<del></del>
Money Market Accounts and Muti	ual Funds			
Individual Retirement, 401K and Keogl				<del></del>
Retirement or Pension Funds (amt you		analtu)		
Revocable trusts				
Equity in rental property or other capi	tal investments			
Cash value of whole life or universal lif	e insurance pol	licies		
TOTAL ASSETS	-			
Employer: Street Address: City/State/Zip: Date of Hire (Approximate): Annual Wage - Base:				
Additional:	(	Bonus, Commission	on, Overtime, etc.)	
ABOUT YOUR HOUSEHOLD: (OPTION.) You are requested to fill out the follow advised that you should fill this out based.	ving section to a			
the appropriate categories:		,	0	- 4
2 - 1 pp - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1	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				
<u>SIGNATURES:</u>				

**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.)



of lease.





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 Amara. I (we) understand if selected all information provided shall be verified for accuracy at the time

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

See page 22 for return information







### AMARA APARTMENTS

#### Affidavit & Disclosure Form

I/We understand and agree to the following conditions and guidelines regarding the distribution of the affordable units at Amara through the Mass Executive Office of Housing and Livable Communities (EOHLC) in Beverly, MA:

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

Household Size	1	2	3	4
Up to 60% Max Gross Income Limits	\$69,487	\$79,387	\$89,325	\$99,225

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.
- 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 will be offered a 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 Amara.
- 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 Amara.
- 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.
- 11. I/We understand if we have submitted an incomplete application we will not be included in the lottery and will be notified after the application deadline.

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

Applicant	Co-Applicant	Date







## **APPLICATION TIPS**

## 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 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 information.					
Signature			 Date		







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

Provide <u>one copy</u> 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.

## <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 meet the Local Preference criteria you must provide documentation, i.e. utility bills, copy of current lease, voter registration, etc.
4.	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.
5.	The most recent last five (5) <u>consecutive</u> 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.
	<ul> <li>NOTE: If you have obtained a new job within the last 12 months you must provide a copy of the Employment Offer Letter.</li> <li>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.</li> <li>NOTE: You need to provide 5 pay stubs whether you are paid weekly, semi-weekly, bi-weekly or monthly.</li> </ul>
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 or see attached form.
8.	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 Tay Returns







- 9. Federal Tax Returns –2024 (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.
  - <u>NOTE:</u> 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 10	099-R Forr	ทร: 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 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 <a href="https://www.usdirectexpress.com/">https://www.usdirectexpress.com/</a>.







	NOTES: Direct deposits from Payre etc. we can identify. If you have ca MUST identify where the funds have PAYPAL, CASH APP, ATM and MOI but your accounts, etc. There is no counted as income, which may put	sh deposits, ve come fro BILE deposit o way we ca	payroll or non-payroll or other incom. For example, VENMO, EBAY, Poss, ZELLE and other transfers between list all sources. If you fail to explain	ome deposits you  OSHMARK,  een any accounts
•	Funds, Money Market, Robir	ing stocks, be whood and a oth IRA, 401 Universal Lif winvestment	onds, Treasury Bills, Certificates of Il online accounts, etc. LK, 403B, etc for all current and pas e Insurance Policy.	·
	Proof of student status for depene students. Letter from High School ent or next semester.		nold members over age of 18 and for oviding student status, full time o	•
	A household may count an unbor f pregnancy with the application, i.e			ld must submit
docume	_If the applicant is in the process of entation that the divorce or separating the distribution of famil	on has begu		-
	_ If you have a home to sell you need analysis which provides the sale prident.	•		
	If you are receiving gift monies on any graph of the funds and the monthly amou		sis you need to provide a letter sta	ting who is
	lerstand if we do not provide all app We also understand we will be not lete.			
Print Ap	oplicants Name(s):			
Applican	nts Signature	DATE	Co-Applicants Signature	DATE

\_\_\_\_\_Saving accounts – last **three (3)** months of full statements.







## AMARA APARTMENTS Beverly, MA

## Release of Information Authorization Form

Date:		
I/We hereby authorize MCO Housing Service to verify any and all income, assets and othe and workplace information and directs any Housing Services, Amara Leasing Office, or purpose of determining income eligibility for	ner financial information, to verify any and remployer, landlord or financial institution any of its assignees and consequently the	all household, resident location n to release any information to MCO
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		
Applicant Signature		
Mailing Address		







## **Custody & Child Support Affidavit**

Applicant/Tenant:		Unit #:		
Please complete a sep	oarate form for ea th biological or ac		_	
Child Name/SSN(last four dig	its)/DOB :		/	
Name of Absent Parent:				
Will this child live with you in t	he tax credit apartmen	nt at least 50% of	the time?	
□ YES □ NO				
Was there a legal marriage to	the other parent? $\square$	YES   NO	STILL LEGALLY MARRIED	
document outlining cu	istody arrangements. documents such as co		on agreement, or other	
Who claimed the child as a de	ependant on their most	t recent tax return	?	
☐ I did ☐ The abs	ent parent ☐ Othe	r:		
Do you receive support (mone (Note: "Support" may be legal			0	
If YES list amount \$	per	<del></del>		
Have you ever been awarded □YES □NO		pport for this child	I through the courts?	
If awarded but not paid, have □YES □NO		to collect child su	ipport?	
If so, please describe efforts a	and proof:			
Do you expect to receive child		in the next 12 mo	nths?	
Under penalty of perjury, I ca accurate to the best of my kr representation herein constit may result in the termination	nowledge. The unders utes an act of fraud. F	igned further und alse, misleading	erstand that providing false	
(Signature of Household Member	er)		Date	
(Signature of Manager)			Date	

Custody & Child Support Affidavit
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## **Return the following to MCO Housing Services:**

- 1. Completed, signed and dated application.
- 2. Signed and dated Affidavit and Disclosure Form
- 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

## All information must be received by 11:59 p.m. on August 25, 2025. You may email, fax or mail (postmarked on or before deadline) 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: <a href="mailto:lotteryinfo@mcohousingservices.com">lotteryinfo@mcohousingservices.com</a>
TTY: 711, when asked 978-456-8388

NOTE: If you are <u>mailing</u> your application on or before the application deadline, make sure you go into the Post Office and have them date stamp and mail. Due to the delay in mail delivery, you may want to mail Certified or Priority as you would have a tracking number. If you mail your application on or before the application deadline, your application must be received on or before September 8, 2025. All mailed applications postmarked on or before the Application Deadline and received after September 8, 2025 will be added to the waiting list.





