Instructions for Completing Rental Application Please Read These instructions In Full Before Completing Your Application

- 1. You must fill out the application and required attachments <u>completely</u>. If there is information that doesn't apply, please write "N/A" in the blank.
- 2. Information provided on this Application will be treated as confidential.
- 3. Your household can file only one application and no household member can appear on more than one application.
- 4. You intend to reside in the development as your primary residence.
- 5. You may apply for more than one unit type however, your household size and composition must be appropriate for the unit size.
- 6. Information for <u>all</u> adults over the age of 18 planning to reside in the apartment must be provided.
- 7. All information provided will be verified. If you have intentionally falsified information, your application will be rejected.
- 8. Your total household income and assets must be within the required limits:

<u>Include as income</u>: income of all household members 18 years of age and older, including gross income from employment, including overtime; bonuses and commissions; pensions; annuities; dividends; interest on assets; social security; social security supplement; alimony and child support; veterans' benefits; unemployment and disability compensation; welfare assistance; regular gifts; etc.

<u>Include as assets</u>: the current value of all savings, checking and investment accounts (including retirement and educational accounts), real estate, investment property, etc. (Do not include automobile(s) and other personal property).

- 9. Divestment of assets within two years of application for greater than \$1,000 for less than fair market value will be counted for imputation of income at full and fair value.
- 10. You must have sufficient income to afford the rent. Generally, you should be paying no more than 40 percent of your gross income to rent, or have assets equal to at least two years of rent.
- 11. Credit/Criminal background checks and rental references will be obtained for all adult household members over 18 years of age.
- 12. You have not committed any fraud in connection with any federal or state housing assistance program, and you do not owe rent or other amounts in connection with housing assistance.
- 13. Applications will be reviewed as quickly as possible to determine preliminary eligibility.
- 14. Priority for the accessible units will be for families which require physical accommodations.
- 15. If you are disabled and require an accessible unit, an extra bedroom for equipment or for a Personal Care Attendant, a reasonable modification of the housing, or a reasonable accommodation of rules, policies, practices or services, please include a letter from your primary health care provider explaining such special requirements.
- 16. Completed applications may be mailed or returned in person to the management office at the property.
- 17. For more information, please call the management office.

It is unlawful to discriminate against any person because of race, color, religion, national origin, gender, disability, familial status, marital status, sexual orientation, genetic information, veteran/military status, and receipt of public assistance, ancestry, age, gender identity or other basis prohibited by federal, state, or local government.





Bethany Apartments

369 Washington Street, Hanover, MA 02339 P: 781.924.1471

MA TTY: Dial 711 or 800.439.2370

RENTAL	E: bethany@peabodyproperties.com APPLICATION	Lottery Number:
SITE		

MANAGEMENT USE ONLY				
Date/Time Application Received:				
Lottery Number:				

PPLYING FOR: 1	BR□ 2BR□ 3	BBR □						
AME 1:							-	-
	FIRST	MI		LAS	ST	SOC	CIAL SEC	URITY NUMBER
AME 2:	FIDOT						-	-
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eason for applying	at this developmen	it?						
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RESENT LAND	LORD							
	DLORD		TEL.#	:		FAX #:		
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Please provide list of all sta	ites in which any	household memb	er has resi	ded.		
Previous Apartment Addres						
Landlord Name:			Landlor	d Address:		
Why did you leave this apar	rtment?					
Did you ever receive any no	otices of terminati	on of tenancy wh	ile at this a	apartment? YES □ I	NO □ If yes, please	explain:
Complete the following infor	rmation for each r	nember of your fa	mily, inclu	ding yourself, who wil	I be occupying the apa	artment:
NAME	RELATIONSHIP	DATE OF BIRTH	SEX*	OCCUPATION	F.T. STUDENT YES / NO	SOCIAL SECURITY NUMBER
						-
*The information provided under	I er the column 'sex' is	l s for demographic p	urposes an	d is optional.		
EMPLOYMENT (for each			·	·		
Individual Employed:		g	- /-			
Employer Name:						
Address:						
	EDOM		TO			
Dates of Employment:						
Gross Wages / Salary						
Contact Person / Superviso	or:			FAX #:		
Individual Employed:						
Employer Name:						
Address:						
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Contact Person / Superviso						
Santa and an adjust violation				.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		
OTHER SOURCES OF	F INCOME (for	all Household N	Members)):		
		Al	MOUNT RE	CEIVED PER MONTH	PERSON RECEIV	ING SUCH INCOME
Social Security		\$				
Supplemental Security Inco	ome (SSI)	\$				
Pension / Annuity / Trust	AEDC / EAFDC /	GR) \$				
Public Assistance (TANF / / Unemployment Compensate		(GR) \$				
Worker's Compensation		\$				
Child Support / Alimony		\$				
Student Financial Assistance	ce	\$				
Other Income (please spec		\$				
Rental Assistance ((i.e. Sec (Mass Rental Voucher)	c. 8 mobile vouch	er, MRVP \$				

ELATIVES (Please list two	i cia i vec i ve i vi ii g	, <u> </u>	
NAME	NAME RELATIONSHIP ADDRESS		(AREA CODE) TELEPHO NUMBER
		thin the last two years of anyone lived Real Estate, Stocks, Bonds, and	ring in your household (<i>Include</i> Check d Certificates.):
ASSET DESCRIPTION	SOURCE / BANK NAME		ACCOUNT NUMBER
ASSET DESCRIPTION	SOUNCE / BANK NAME	\$	ACCOUNT NUMBER
		\$	
		\$	
		\$	
		\$	
		\$	
		\$	
REDIT HISTORY (Include	payments, loans, credit car	rds, etc.):	
OWED TO	ACCOUNT NUMBER	CURRENT BALANCE	MONTHLY PAYMENT
		\$	\$
		\$	\$
		\$	\$
		\$	\$
		'	<u> </u>
Do you pay for utilities?	ES □ NO □ If yes, \$	per month.	
Oo you pay child support? Y	ES □ NO □ If yes, \$	per month.	
Oo you pay alimony? Y	ES □ NO □ If yes, \$	per month.	
Oo you pay child care? Y	ES □ NO □ If yes, \$	per month.	
DOITIONAL INCODMATI	OM.		
DDITIONAL INFORMATION			
re you or any member of the ho	usehold subject to lifetime sex	offender registration requirement	in any state? YES □ NO □
o you currently have a househo	ld pet? YES □ NO □; if	YES, what type?	
ow many cars will be parked at	the premises?	(copies of registration must be	e provided)
Year: Registrat	on #:	Make/Model:	
Year: Registrat	on #:	Make/Model:	
ave you or any household mem ES □ NO □; if YES, <i>please e</i>	ber ever committed any fraud xplain:	in connection with any Federal Ho	using Assistance program?
=0 = 110 =, : =0, p.0000 0			
ave you or any household mem		ver been terminated for fraud?	

EQUAL OPPORTUNITY / FAIR HOUSING INFORMATION

Peabody Properties, Inc. does not discriminate on the basis of race, color, religion, national origin, gender, disability, familial status, marital status, sexual orientation, genetic information, veteran/military status, receipt of public assistance, ancestry, age, gender identity or other basis prohibited by federal, state, or local law in the access or admission to its programs or employment or its programs, activities, functions or services.

The following information will be required by the Federal Government to monitor this owner / management agent's compliance with Equal Housing Opportunity and Fair Housing Laws. The law provides that an applicant may not be discriminated against on the basis of the information supplied below whether or not the information is furnished.

Note: HUD Race and Ethnicity Data Form(s) must be attached for Subsidized Sites.

ETHNIC CATEGORIES			
☐ Hispanic or Latino	☐ Not-Hispanic of	or Latino	
RACE CATEGORIES			
☐ American Indian or Alaska Native		☐ Asian	☐ Black or African American
☐ Native Hawaiian or Other Pacific Is	lander	□ White	☐ Other
$\ \square$ I do not wish to furnish the above in	nformation		
the understanding that this application constit	utes my request for gement agent that	or consideration as a t it an apartment will b	to the best of my knowledge and hereby acknowledge tenant in the above development. It does not constitute the made available to me. I understand that additional
permission to authorize a credit bureau serv obtained through public records, personal or inquiry may include information as to my char	ice to make any c telephonic intervie acter, credit worth	consumer report and ews with my neighbor iness, credit standing	by the owner/agent. I further understand and grant investigative consumer report, whereby information is its, friends, or others with whom I am acquainted. This is, and credit capacity. I understand that I have the right about the nature and scope of any such report that is
I understand that a false statement or misrep event that I take occupancy, it shall be consid			oplication will affect approval for residence; and, in the ease and a basis for termination of tenancy.
Finally, I understand and grant permission tagency, criminal checks, and/or other inquiring			can and will be made available to a consumer credit complex during and after my tenancy period.
Peabody Properties, Inc. will consider a accommodation is necessary, not just des Reasonable accommodations may include and procedures. Please check here if you would li with a Request for a Reasonable Accommodations	reasonable accomirable, to ensure endeanges to the bulke to make a required	equal access to the ouilding, grounds, or a uest for a reasonable RA-1) and complete a	DDATION uest for qualified people with disabilities when an development, its amenities, services and programs. In individual unit and changes to policies, practices, accommodation. Management will then provide you a Referral Form (RA-2) to the property's Resident ment's Reasonable Accommodation Policies and
Date:	s	Signature:	
	S	Signature:	
Signatures and pro	of of identification	on will be required	of all those who sign lease.
	FOR M	MARKET USE ONLY	
A deposit (one month's rent) is required with this ap	oplication. It will be b	ased as follows:	
1. Applied to your first month's rent if applic	ation is approved;		
2. Returned to the Applicant if application is	not accepted with ex	xplanation of denial;	
3. Retained as liquidated damages if applications	ation is approved and	d Applicant cancels his o	or her application.
Amount of Deposit \$		Check #	Occupancy Date:
Signature:		Date:	
Signature:		Date:	

2. Print application and mail to the community address.

Please fill out application and save to your desktop. Options:

1. Email pdf application to the community email address: bethany@peabodyproperties.com

Peabody Properties, Inc.

Rental Application Attachment (for all affordable housing programs)

This community may have certain preference criteria in place or a housing programs whereby certain deductions or considerations may apply. Upon request to management, you may receive a copy of the Tenant Selection Plan which describes the occupancy requirements, the application process and resident selection criteria including eligibility and screening requirements for residency at the property.

If you would like to be considered for a preference, deduction or special consideration should they apply to the property for which you are submitting this application, please respond to the following questions. Documentation will be required to verify eligibility for a preference, deduction or other special consideration.

cause or declared disaster? If yes, please describe:	☐ Yes ☐ No
Are you or are you about to be homeless due to displacement by Urban Rer If yes, please describe:	
3. Are you or are you about to be homeless due to overcrowding in housing the family?	at is too small for your
4. Have you or any member of your household suffered actual or threats of ph violence by a spouse or another member of the household? (If yes, household member will be requested to complete form HUD-5382)	nysical
5. Are you displaced as a result of government action or a presidentially decla If yes, please describe:	
6. Are you a local resident who lives or works in the town where this property i	is located? ☐ Yes ☐ No
7. Are you or any member of your household a veteran?	☐ Yes ☐ No
8. Are you or any member of your household a person with a disability? If yes, please provide name(s) of the household members:	Yes No
 Does any member of your household require an apartment with accessible If yes, please indicate type: 	features?
☐ Wheelchair Adapted ☐ Hearing/Visually Adapted	