



## Income-Restricted Rental Lottery Application

CALA Apartments  
1060 Broadway, Somerville, MA 02144

Completed Applications must be delivered no later than **August 12, 2021** and sent to:

Maloney Properties, Inc.  
Attention: CALA Lottery  
27 Mica Lane, Wellesley MA 02481  
Emailed to: [CALA@maloneyproperties.com](mailto:CALA@maloneyproperties.com)  
Faxed to: 833-734-1491

**Proof of Local Preference and/or proof of 55 years of age+ must be submitted with the application.**

**Please see Information Packet for additional info.**

Free language assistance and reasonable accommodations available. For assistance and more information, please contact Maloney Properties, Inc 781-992-5306 - US Relay

711 or

email: [CALA@maloneyproperties.com](mailto:CALA@maloneyproperties.com)



Equal Housing Opportunity



**IMPORTANT:**

**You may only submit one application per household. Duplicate applications will be discarded and only one application per household will be accepted.**

1. What language would you like the Maloney Properties to communicate with you in?  
\_\_\_\_\_. *Interpretation services can be offered in Portuguese, Spanish and Haitian Creole.*
2. Do you require a reasonable accommodation or a handicap accessible apartment?: ☐Yes ☐No  
*If yes, submit verification of need from your health care provider with this application **before** the application deadline.*  
Please describe reasonable accommodation need:  
\_\_\_\_\_  
\_\_\_\_\_
3. Does a household member currently have a Section 8 Voucher or any other type of mobile rental voucher (MRVP, VASH, etc.)? ☐Yes ☐No (skip to question no. 4)
4.  
If yes, attach a copy of your voucher to this application and answer the next two (2) questions:  
Which Housing Authority or Agency issues your voucher?  
\_\_\_\_\_  
Provide the name, email and phone number of your Leasing Officer:  
\_\_\_\_\_
5. Does a household member currently live or work full-time (32hrs+ /week) in Somerville? ☐Yes ☐No  
*If “yes”, submit current documentation to receive the preference.*
6. Is any member of your household a City of Somerville employee? ☐Yes ☐No  
*If “yes,” this is simply a disclosure.*
7. Are both heads of household full-time students or registered to be full-time students the following semester?  
☐Yes ☐No  
**Please note:** *Both heads of household cannot be full-time students; Applicants must provide verification directly from institution.*
8. How did you hear about this opportunity? ☐Inclusionary Housing Listserv ☐City Website ☐Flyer  
☐Newspaper ☐Family/friend ☐Social media ☐Web search ☐Other  
\_\_\_\_\_
9. Do you have credit? ☐Yes ☐No If “Yes”, indicate your credit score:  
\_\_\_\_\_  
**Credit requirements are established by the developer as part of rental application screening process.**
10. How much do you currently pay per month in rent (not including utilities)? : \_\_\_\_\_

11. Would you like your email to be included in the Inclusionary Housing Listserv to receive notifications of upcoming affordable rental and homeownership opportunities available through the City of Somerville's Inclusionary Housing Program? ☐ Yes ☐ No *Please check "No" to the above question if you already receive email alerts*

**The following questions are optional and not required to participate in the lottery:**

Do you own a motor vehicle? ☐ Yes ☐ No      If "yes", do you need a parking space in the garage? ☐ Yes ☐ No

Do you need an all-city residential parking permit? ☐ Yes ☐ No

If "Yes", why?

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What is the head of household's ethnicity? ☐ Hispanic/Latino ☐ Non-Hispanic/Latino

What is the head of household's race? Please check all boxes that apply:

☐ African-American/Black ☐ American Indian/Alaskan Native ☐ Asian ☐ Caucasian  
☐ Native Hawaiian/ Other Pacific Islander ☐ Middle Eastern/North African ☐ Other

What is the head of household's national origin?

☐ Bangladesh ☐ Brazil ☐ Canada ☐ Cape Verde ☐ China ☐ Colombia ☐ Cuba ☐  
Dominican Republic ☐ El Salvador ☐ Ghana ☐ Guatemala ☐ Haiti ☐ Honduras ☐ India ☐  
Ireland ☐ Jamaica ☐ Mexico ☐ Nepal ☐ Nicaragua ☐ Nigeria ☐ Portugal ☐ Puerto Rico ☐  
South Korea ☐ USA ☐ Other: \_\_\_\_\_

**CALA Apartments**  
**1060 Broadway, Somerville, MA 02144**

**Affordable Rental Lottery Application**

**Head of Household:**

<b>Name:</b>	
<b>Street Address:</b>	
<b>City:</b>	
<b>State:</b>	
<b>Zip Code:</b>	
<b>Email Address:</b>	
<b>Phone #:</b>	

**Head of Household (2):**

<b>Name:</b>	
<b>Street Address:</b>	
<b>City:</b>	
<b>State:</b>	
<b>Zip Code:</b>	
<b>Email Address:</b>	
<b>Phone #:</b>	

Maloney Properties will contact applicants by email and phone only. If an email address is not provided, we will send notifications through postal mail and follow up by phone.

Please complete the below chart for all household members that would be residing in the unit, including yourself:

Full Name	Age	Head of Household or Occupant	Relationship to Head of Household (i.e. Daughter, Son, Mother, Father, etc.)	Is any household member a Full-Time Student t or well be a full-time student in the next semester (YN)
		Head of Household		

Is there a household member who will be in their 3<sup>rd</sup> trimester by the lottery date?  
☐Yes   ☐No

*If Yes, please provide letter from doctor confirming this and add this unborn child as a household member*

Is there a household member who is legally married to somebody who is not included listed as a household member?  
☐Yes   ☐No

*If “Yes”, list the name, address and explain your current marital status below. Depending on the response this person may need to be included as a household member for the purpose of this application:*

**My Household Size is:** \_\_\_\_\_

**Local Preference:**

Household that either currently reside or work full-time (32+ hours) in Somerville will be given a preference.

Local Preference - Current Residents

In order to qualify for this preference, applicants must verify their residency by providing one (1) of the following documents with their name and Somerville address and dated within 30 days from the date the completed pre-lottery application is submitted:

- Signed Lease
- Voter Registration
- Utility Bill (electric, gas, oil, cable, etc) – statement date MUST be dated within 30 days
- Current Bank Statement, cable/internet/phone bill
- If a lease cannot be provided, a signed & dated letter by landlord identifying the applicant, address & proof of ownership may suffice in some instances.

#### Local Preference – Full-Time employees in Somerville

In order to qualify for this preference, applicants that work full-time in Somerville, a household member must provide a paystubs, dated within 30 days. Make sure the paystub includes the number of hours worked and the Somerville location of your employment.

If a paystub cannot be provided, a letter of employment by the applicant's Human Resources Director or Payroll Director on company letterhead with contact information may be provided. The letter must state the employee's name, location of employment & the number of hours working in Somerville per week. The letter must be dated within 30 days from the date the completed pre-lottery application is submitted.

Households whose usual place of work is in Somerville but who are working from home remotely during the pandemic may still be considered for Somerville preference through a reasonable accommodation. These households shall obtain a company letter on the company letterhead from their employer and it should include, among the other details noted above, that the house member is temporarily working from home as a result of the pandemic and that it is the intent of all parties to return back to work in the physical office as soon as it is safe to do so.

**Do any household members meet the criteria for the local preference?**

☐ Yes

☐ No

*If your household has a rental mobile voucher, please attach it with this application.*

#### **Elderly Preference:**

**Is at least one member of a household 55 years of age or over?**

☐ Yes

☐ No

**Applicants applying with an elderly preference must provide valid verification of their age with this application.**

**Income Information:**

The affordable units will be in the 50%, 80%, 110% AMI income categories:

Household Size***	Tier 1 (<50% AMI)	Tier 2 (51%-80% AMI)	Tier 3 (81%-110% AMI)
1	\$26,664- \$47,000	\$47,001 - \$70,750	\$70,751 - \$93,050
2	\$26,664 - \$53,700	\$53,701-\$80,850	\$80,851 - \$119,600
3	\$26,664 - \$64,400	\$64,401-\$90,950	\$90,951 - \$132,880
4	\$26,664 - \$67,100	\$67,101-\$101,050	\$101,051 - \$143,550
5	\$26,664 – \$72,500	\$72,501 - \$109,150	\$109,151 - 143,550
6	\$26,664 - \$83,850	\$83,851 - \$117,250	\$117,251 - \$154,150

**Please list all household members & their estimated annual gross income below:**

Household Member Name	Pay Frequency (please circle)	Average <u>GROSS</u> Earnings/Pay Period
	Weekly / Bi-Weekly / Monthly / Bi-Monthly /	
	Weekly / Bi-Weekly / Monthly / Bi-Monthly /	
	Weekly / Bi-Weekly / Monthly / Bi-Monthly /	
	Weekly / Bi-Weekly / Monthly / Bi-Monthly /	
	Weekly / Bi-Weekly / Monthly / Bi-Monthly /	
	Weekly / Bi-Weekly / Monthly / Bi-Monthly /	

Household must include income for any full-time students over age 18.

**Source of Income include but not limited to:**

- **Paystubs from W2 Employment**
- **Self-Employment**
- **Social Security/ Social Security Disability**
- **Unemployment**
- **Child support (formal or informal)**
- **Alimony**
- **Pension**
- **Go Fund Me/Fundraising Platforms**
- **Assistance from family/friends (regular or irregular)**
- **Seasonal work/part-time jobs / one-off gigs**
- **Commissions/tips**

**In the space below, please disclose all household anticipated changes in income for the next 12 month. Please attach additional pages as necessary. *Changes may include but are not limited: bonuses/raises, over-time, promotions, the opening or closing of a business, ending a job, starting a new job, seasonal work, maternity/ medical leave etc.***

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### **Asset Information:**

Households must disclose all assets and accounts below. Assets include but not limited to: Checking, Savings, Stocks, Bonds, Real Estate, CD's, 401K's, IRA's, Cash on Hand, Mutual Funds, Health/College Savings Plans, ownership or joint interest in property (USA and abroad) Cash apps (Venmo/Paypal etc.), digital or crypto currency

[illegible]



			\$
			\$
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			\$
			\$

Please note the Maloney Properties reserves the right to request additional documentation after reviewing the application. Failure to provide any additional documentation requested by Maloney Properties by the given deadline will result in your application not being entered into the lottery.

In carrying out this marketing program and buyer selection process, neither the Owner nor its Lottery Agent, will discriminate based on race, color, creed, religion, sex, familial status, sexual orientation, national or ethnic origin, handicap, citizenship, ancestry or marital status, public assistance, gender identity or any other basis prohibited by law.

Disabled persons are entitled to request a reasonable accommodation in rules, policies, practices, or services, or to request a reasonable modification in the housing, when such accommodations or modifications may be necessary to affordable person with disabilities an equal opportunity to use and enjoy the housing.

#### **Application Deadline:**

The deadline for completed applications by mail, postmarked no later than **August 12, 2021** mailed to:

Maloney Properties, Inc.  
Attention: CALA Lottery  
27 Mica Lane, Wellesley MA 02481

#### **Questions:**

Maloney Properties' staff is available to answer any questions during the process.

Please feel free to contact us through the following methods:

**Email:** [CALA@maloneyproperties.com](mailto:CALA@maloneyproperties.com)

**Phone:** 781-992-5306 | US Relay 711

**Website:** [www.CALALottery.com](http://www.CALALottery.com)

**Signature Clause:**

I understand that the Lottery Agent is relying on this information to prove my household's eligibility for 1060 Broadway, Somerville, MA 02144. I certify that all information and answers to the above questions are true and complete to the best of my knowledge. I consent to release the necessary information to determine my eligibility. I understand that providing false information or making false statements may be grounds for denial of my application.

I authorize my consent to have the Lottery Agent verify the information contained in this application for purposes of proving my eligibility for occupancy. I will provide all necessary information and expedite this process in any way possible. I understand that my income must be eligible to be entered the lottery.

**All ADULT household members must sign below:**

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**Signature**

**Date**

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**Signature**

**Date**

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**Signature**

**Date**



**Equal Housing Opportunity**

