The Chadwick
(131 Orchard St. in Davis Sq.)

Rehabbed by
LaCourt Enterprises, LLC.

In Cooperation with
Mayor Joseph A. Curtatone and the City of Somerville
Inclusionary Housing Program

The Mayor’s Office of Strategic Planning and Community Development (OSPCD) and LaCourt Enterprises LLC are pleased to announce the affordable rental opportunity at The Chadwick for one (1) two-bedroom apartment and one (1) one-bedroom apartment to income eligible households at an affordable, below market rent through the City’s Inclusionary Housing Program available via an application, lottery and income certification process. The two-bedroom unit will be offered to a household earning at or below 50% of Area Median Income (“AMI”). The one-bedroom unit will be offered to a household earning 51% - 80% AMI (see eligibility table on page 6).

These units are restricted to eligible households and subject to annual income certifications. Tenants will have to sign a lease rider along with the lease that agree to the restrictions and provide the City with a copy on an annual basis. More information on the lease rider and restrictions can be found on page 14.

Building Description

Located at 131 Orchard Street in Davis Square, The Chadwick is a 28 unit, four-(4) story brick apartment building. Finishes and amenities for these units include: hardwood floor, cherry cabinets, granite counters, stainless steel appliances, elevator access, a laundry facility, independent heat controls, hot water included, electric heat not included. Pets are not allowed. Additionally, there are 28 available on-site storage units for rent and 28 available onsite bicycle parking spaces also for rent. There is no on-site car parking. The units will are ready for occupancy.

Unit Description

**Unit 31 - 1 BR at 80% AMI**

Unit 31 is a 3rd floor, 1-bedroom unit measuring 583 sq. ft. that will be rented at $1,031 per month, hot water included. It will be rented to households with incomes between 51-80% AMI. Please see income guidelines on page four (4).

**Unit B1 - 2BR at 50% AMI**

Unit B1 is a basement, 2-bedroom apt. that is 641 sq. ft. that will be rented at $1,202 per month, hot water included, to a household of at least two (2) persons. It will be rented to households at or below 50% AMI.
Household Size

A “household” includes all persons who will be residing with you in the unit you are applying for including children, teenagers and adults. A household member can be referred to as a household member even if the person does not earn income. Applicants must be in a household with 1 or more people, if applying for the two-bedroom unit. One person households may not apply to a two-bedroom unit unless they are eligible for a reasonable accommodation and verification of this need is established and provided with the application to the lottery.

Income Eligibility

In order to be eligible to purchase this unit, annual income must be within the guidelines listed in the one of the two (2) tables below. The combined annual income from all sources and for all household members must not exceed 50% for the 2 BR unit and must be between 51%-80% AMI to be eligible for the 1BR, adjusted by household size, as indicated below.

<table>
<thead>
<tr>
<th>Unit 31 for households with incomes</th>
<th>51% - 80% AMI</th>
</tr>
</thead>
<tbody>
<tr>
<td>How many persons are in your household?</td>
<td>Is your household’s gross annual income between the ranges below?*</td>
</tr>
<tr>
<td>1</td>
<td>$37,751 - $56,800</td>
</tr>
<tr>
<td>2</td>
<td>$43,151 - $64,900</td>
</tr>
<tr>
<td>3</td>
<td>$48,551 - $73,000</td>
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</tbody>
</table>

<table>
<thead>
<tr>
<th>Unit B1 for households with incomes</th>
<th>at or below 50% AMI</th>
</tr>
</thead>
<tbody>
<tr>
<td>How many persons are in your household?</td>
<td>Is your household’s gross annual income between the ranges below?*</td>
</tr>
<tr>
<td>2</td>
<td>$20,280 - $43,150</td>
</tr>
<tr>
<td>3</td>
<td>$20,280 - $48,550</td>
</tr>
<tr>
<td>4</td>
<td>$20,280 - $53,900</td>
</tr>
</tbody>
</table>

*Minimum incomes are not applicable to Section 8 or other voucher holders

**Rents do not include the cost of electricity, heat is electric
Eligibility Requirements
Asset limit is set at $250,000 excluding restricted retirement accounts. Both heads of households cannot be full-time students.

Other Eligibility Requirements
- A “Family” is defined as an individual, or two or more persons related by blood, marriage, or adoption, living together as a single housekeeping unit and occupying one dwelling unit; or a group (but not more than four) or pair of individuals, not so related, but living together as a single housekeeping unit. Unrelated individuals applying must demonstrate a history of living together.
- Applicants must be at least 18 years of age.
- Household income must be able to support rent, utilities and basic living expenses.
- Developer will be running background check and credit screenings after income certifications. Households must have a minimum of 600 credit score.
- Tenants will be subject to annual income recertifications conducted by LaCourt and approved by the City.

Lottery
A lottery will take place on **Monday December 17th at 10:30 AM** in the City Hall Aldermanic Chambers located at 93 Highland Ave, Somerville. All participating applicants will have received an email with a unique identifier ahead of the lottery. Applicants are not required to be present at the lottery. All unique identifiers will be called in the order in which they are drawn from the bingo wheel and placed on a waiting list for the specific unit for which the applicant is found eligible for based on information disclosed on the application. All applicants will be notified of their standing on the waiting list by January 4th 2019 via email if an email is provided or via regular mail. The applicant whose unique identifier is pulled first for each unit will be contacted immediately via phone and email or regular mail if phone and email are not available. This household will have five (5) business days to submit initial income, asset and tax documents to the Housing Division. Household no. 2 will be notified if the first household is determined ineligible. If you are applying with a preference, please begin organizing your documents ahead of the lottery.

Lottery Preferences
First preference will be given to eligible applicants who were former residents of The Chadwick at the time LaCourt purchased in August 2016. The Housing Division has a list of tenants, if you have any questions regarding this preference, please contact Ithzel Polanco-Cabadas at ipcabadas@somervillema.gov or 617-625-6600 ext. 2586.
Second preference will go to households who currently live or work full time (32 hours or more per week) in Somerville and provide current (dated within the last 30 days from the date the application is submitted) verification of this with their application. Applicants who currently live in Somerville must provide one of the following documents with their application to receive a live in Somerville preference in the lottery:
  - Current Lease
  - Utility bill
  - Cable bill
  - Voter registration letter
  - Bank statement

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If applying with a work in Somerville preference, the verification must include the employee’s name, the Somerville location where the applicant works and the number of hours the applicant works at the location per week. Acceptable documents include a letter from the Employer on letterhead with the HR/Payroll contact person and information or a paystub dated within the last 30 days from the date the application is submitted listing the number of hours worked per week in Somerville.

Complete Applications
1) An application completely filled in with every question answered and signed by all household members 18+, if a question is not applicable do not leave it blank, put N/A for not applicable.
2) Please provide documentation regarding preferences, if applicable. Refer to 5 for more information on preferences.

Applications that are not signed by all adults or not completely filled out will not be considered complete and will not be included in the lottery.

The deadline to submit a complete application in order to participate in the lottery is Monday December 3, 2018 by 2:30 PM. Applications that are received after 2:30 PM on Monday December 3 will not be considered.

If you are mailing an application to the Housing Division at 50 Evergreen Avenue, Somerville MA 02145, please allow at least a week in the mail to be safe.

If the application and required documents are complete and eligible, households will be provided with a unique identifier consisting of numbers and letters. This identifier will be called out during the lottery instead of the applicants name in order to maintain confidentiality. All applicants will be drawn and assigned a number.

The Housing Division will review complete applications as they are submitted. Once the applications are reviewed, if determined complete, applicants will receive verification of the pre-lottery eligibility with a unique identifier. Correspondence will be via email if the household has an email address or via regular mail if the household doesn’t have an email address. Households will also be notified in writing if their application is incomplete or otherwise ineligible in advance of the lottery.

Income Certification
An income certification is a process by which households selected first in a lottery provide documents listed below in order for the Housing Division to determine their eligibility. Household no. 1 will have five (5) business days to submit the income documentation listed below, including Federal tax returns, as well as income and asset documentation to the Housing Division. The Housing Division reserves the right to request additional income documentation as may be necessary to complete a household’s income certification. The Housing Division defines income as any monies received from sources outside of the household. We recommend households begin to set these documents aside in order to facilitate submission to the Housing Division after the lottery.

Documents required at time of income certification include but not limited to the following:

1. 2017 Federal (not State) tax returns, all pages and schedules, including all W2s and any 1099s. If a household did not file federal taxes in 2017, verification from the IRS verifying no taxes were filed must be presented;
2. Most recent three (3) months of consecutive paystubs and/or other income documentation (child support, pensions, Social Security Benefits, etc.)
3. Employer verification forms signed by employee(s) with the employer’s contact information (to be sent directly to employers by the City)
4. Most recent three (3) consecutive months of all asset statements for all household members (including but not limited to: checking, savings, Mutual Funds, IRAs, 401(K)s, CDs, PayPal, Venmo, Square, Bitcoin or any other digital currency).
5. Statements of no income for any adults in the household who do not receive any income signed by both the adult not receiving income and head of household.
6. Verification of student status for any adult household members, from their institution.
7. Other documents may also be requested by the City at the time of income certification.

Please note if deposits are not explained within the statement, an explanation of deposits, explaining the nature and source of the deposit, will be required. Additionally, if the most recent Federal Income Tax Return includes W2s from an employer you no longer work for, employment termination must be verified.

The aforementioned is only a shortlist of documents needed to determine a household’s income eligibility for an income-restricted unit. The Housing Division analysis all documents provided for the most recent three (3) months and answers provided by the employer(s) at the time of income certification to estimate and project the household’s annual gross income for the next 12 months. The Housing Division considers income from all sources including anticipated raises, bonuses, commissions, second jobs, per diem employment, seasonal employment, cost of living adjustments (COLAS) and other sources outside of the household.

Appeals Process
A household deemed ineligible by the Housing Division upon the completion of the income certification process has the right to appeal the income determination. To initiate the appeals process, the applicant must send a written Appeal Request to the Director of the Housing Division within one week of the eligibility determination. In this written request to the Director of the Housing Division, the household must identify in specific terms (for example, inclusion of an income sources no longer received or assumptions made in the calculation) what about the determination is being appealed. While it is the responsibility of the household to provide the Housing Division with all of their current income documents, if there are other documents the household wishes to supply, the household should state such in its written appeal, and either include the additional documents in the appeal request, or provide a timeline within which such documents can be provided. It is within the discretion of the Housing Director whether to accept/wait for additional documents; however, the documents should be provided without any unreasonable delay, with time being of the essence. The Housing Division Director will consider the appeal request and any new information or documentation provided and make a determination. The household will be notified in writing by the Housing Director regarding the outcome of the appeals determination.

A household deemed ineligible by LaCourt Management upon a credit and background check can appeal to LaCourt Management within one week following the above described process.

Proceed Letter
If a household is found income eligible the Housing Division will provide a Proceed Letter outlining the next steps. Once certified and after receiving a Proceed Letter, the household will contact the property management which will conduct their own credit and background screening. If approved by property management the lease and lease rider will be signed and property management will work with you to

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determine a move-in date. If start-up costs assistance (security deposit, first and last month’s rent, and moving costs) please contact Tessa Byer at Just-A-Start at 617-918-7517 or by email at: tessabyer@justastart.org.

Description of Restrictions

This opportunity to rent an affordable unit at a significant discount is being offered through the Somerville’s Inclusionary Housing Program. As an affordable unit, certain eligibility requirements and restrictions apply. You will sign a “Lease Rider” annually which describes the restrictions on the unit and your responsibilities. These restrictions will remain with the unit permanently and will apply to you and all subsequent renters. The following is an overview of the most important aspects of the Lease Rider and is meant for informational purposes only. If selected, you are strongly encouraged to seek legal advice and review the total document.

- **Primary and Principal Residence:** The unit must be used as your primary principal residence.
- **Income Eligibility:** Income certifications are good for one (1) year. Annual income re-certifications are required in order to continue to lease an affordable unit.
  - If your household occupies a 50% Area Median Income unit, your household can increase its income up to 140% of 80% of Area Median Income. If your household income increases to 80% of Area Median Income and you wish to remain in the affordable unit, the rent will increase to HUD’s High Home Rent.
  - If your household occupies an 80% Area Median Income unit, your household can increase its income up to 140% of 80% of Area Median Income. If your household income exceeds 140% of 80% of Area Median Income and your household wants to remain in the unit, the rent will increase to the market rate rent for that unit type. The affordable units will have a lease rider with these details.
- **Renting:** Households may not under any circumstance sublet, rent out or AirBnB the affordable unit or space in a unit under any circumstance

FAQS

**Q1. Why are income certifications necessary?**

**A:** These affordable units are extremely limited and there is a high demand for Inclusionary Housing. It is the responsibility of the Housing Division to ensure that households selected in lotteries are indeed eligible to live in these units.

**Q2. What is income and what types of income are considered during an income certification?**

**A:** The Housing Division defines income as any monies received originating from a source outside of the household. When households provide asset documentation, all deposits into accounts will be examined and will need explanations. The Housing Division considers the following as income: wages from employment, unemployment insurance, self-employment (Uber/Lyft, flea market vending, eBay, Amazon, art sales etc.), Social Security benefits, SSP, pensions, child support, Go Fund Me/fundraising campaigns, compensation for any type of gigs or events worked (performances, teaching classes, shoveling or plowing snow, yard work, backyard sale etc.), rent payments from roommates, any monies received from family members or friends. Please disclose all income sources at the beginning of the income certification process. The Housing Division will work with you to determine what type off documentation is needed.

**Q3. What type of information is needed from my employer?**

**A:** As part of an income certification, employers are requested to complete an Employer Verification Form, which is included in this application. Please only include your employer’s name, address, email along with your
signature and date granting the Housing Division permission to contact your employer in case you win in the lottery. This form should be completed by your HR Rep. and or Office Manager. Information regarding anticipated raises, bonuses, commissions, tips and COLAs will be requested. If this information is not available or unknown, the Housing Division will request information regarding past raises, bonuses etc. over the last three (3) years and use that information to anticipate additional wage increases to better inform a calculation of your household’s gross annual income for the upcoming twelve (12) months.

Q4. What if my household’s income changes?
A: It is the applicant’s responsibility to report and document any anticipated income changes over the next 12 months during an income certification. If these changes are not documented and verified by the income source, the Housing Division will assume current income will continue to be received over the next 12 months. Examples of changes that need to be documented: 1. Termination of employment verified by employer including an end date; 2. letter from Social Security regarding changes in benefits; 3. Signed affidavits regarding any financial assistance a household receives from an outside source etc.

Q5. What steps can I take to avoid delays during an income certification?
A. An income certification is a thorough process. Households selected in a lottery and anticipating an income certification can do the following to expedite an income certification:
   I. Familiarize yourself with all deposits in all household accounts to identify the reason for the deposit and source. Deposits that are not self-evident (cash deposits) require notarized documentation and explanations;
   II. Disclose all income sources at the beginning of the income certification as this is one of the most frequent causes of delays. Each new income source that is “discovered” will need to be documented for the past three months and will require additional verifications about anticipated income over the next 12 months;
   III. Anticipate and disclose changes in income over the next 12 months. If your current situation does not accurately reflect what your income will be over the next 12 months, please indicate and explain these anticipated changes in writing. This includes any increases or decreases in income.

Q6. What happens if somebody joins or leaves the household after moving in?
A. Households in Inclusionary rental units are subject to annual income re-certifications. If a household member leaves or joins the household, this must be reported and the household is required to go through an income certification that reflects the new household composition to verify continued eligibility.
INFORMATION SESSION: Wednesday, Nov. 7th 2018 at 10:30 AM
If driving, please park your car nearby at Dilboy Field.
Address: VNA (Visiting Nurses Association) 405 Alewife Brook Parkway Somerville, MA 02144 4th floor

DEADLINE: Monday, Dec. 3rd 2018 at 2:30 PM
Only complete applications will be accepted before the deadline. Any applications received after the deadline via any means or which are incomplete will not be included in the lottery. Do not email/fax or mail information packet, keep it for reference and only mail the application pages 10-17.
The application must be submitted via one of the following means:
1. In person in the City Hall Annex located on the 1st floor of 50 Evergreen Ave. Somerville, MA 02145.
2. Mail to the address above, ATTN: Ithzel Polanco-Cabadas please make sure it is sent at minimum one (1) week prior to the deadline.
3. Fax to 617-666-8035, a cover letter is not necessary
4. Emailed to ipcabadas@somervillema.gov

LOTTERY: Monday, Dec. 17th 2018 at 10:30 AM
Location: City Hall located at 93 Highland Ave., Somerville, MA 02144 in the Aldermanic Chambers on the 2nd floor. Applicants are not required to attend. The lottery will be recorded and can be viewed here: https://www.youtube.com/user/SomervilleCityTV. Households will be notified of their standing within two weeks of the lottery via email if provided.

STEPS AFTER LOTTERY:
- Lottery Results will be posted and applicants will be notified of their standing on the waitlist by January 7, 2019.
- If your contact information changes, please contact the Housing Division to update your email/address/phone number on the waitlist
- Applicants chosen first will receive notification on Dec. 17th following the lottery
- Proceed Letters will be issued to eligible households after an income certification and eligibility determination.
- Property Management will then run a credit & background check
- If screening passes, applicants will be offered a lease and move in date will be determined

Applications will be available at all three (3) Somerville Public Libraries, at City Hall, City Hall Annex and online at https://www.somervillema.gov/inclusionaryhousing.

Please keep this information packet for reference as you proceed through the lottery and income certification.

Individuals with disabilities who need auxiliary aids and services for effective communication, written materials in alternative formats, or reasonable modifications in policies and procedures, in order to access the programs and activities of the City of Somerville or to attend meetings, should contact the City’s Manager of Equity, Diversity, and Inclusion, Nency Salamoun, at 617-625-6600 x2323 or nsalamoun@somervillema.gov.
Pre-lottery Application for rental units at the Chadwick at 131 Orchard St.

Please check the unit you are applying for after checking income guidelines on pg. 3 of information packet.

- Unit B-1 (2 BR at 50% AMI): $1,202 per Month
- Unit 31 (1 BR at 51-80% AMI): 1,031 per Month

Application Deadline: Monday, December 3, 2018 @ 2:30 PM

A. GENERAL INFORMATION

You must include information about all household members including income, assets and debt. Please answer all questions. Incomplete applications will be disqualified.

Additional income documentation will be requested at time of income certification and will include but is not limited to: employer verification form, 3 consecutive months of paystubs/income statements, 3 consecutive months of asset statements for all accounts owned, last 3 federal and state income tax returns, all pages and schedules, 1099s and W2s

B. APPLICANT INFORMATION

Head of Household: ____________________________
Co-head of Household: ____________________________
Mailing Address: ____________________________
City: ____________________________ State: ______ Zip Code: ____________________________
Cell Phone No.: ____________________________ Work Phone #: ____________________________
E-mail Address: ____________________________

Would you like your email to be included in the Inclusionary Housing Listserv to receive notifications of upcoming income restricted rental and homeownership opportunities available through the City of Somerville’s Inclusionary Housing Program?  □ Yes □ No

How did you hear about this opportunity? __________________________________________________

Do you currently live or work full-time in Somerville? □ Yes □ No
If yes, you must submit current documentation to receive the preference. See page 9 of the Information Packet for more details.

Is any member of your household a City employee? □ Yes □ No
Is the head of household a full time student? □ Yes □ No
Is the co-head of household a full time student □ Yes □ No

Please note: Both head of households cannot be full time students. Full time student households are not eligible to participate in Inclusionary Housing Program opportunities.

The following questions are optional and not a requirement to participate in the Inclusionary Housing Program:

What is the head of household’s ethnicity? □ Hispanic □ Non-Hispanic
What is the head of household’s race? Please check all boxes that apply:
□ African-American/Black (non-Hispanic) □ American Indian/Alaskan Native □ Asian
□ Caucasian (non-Hispanic) □ Native Hawaiian/ Other Pacific Islander □ Other
What is the total number of persons in your household? ________
(This number should be the same number of persons expected to move into the affordable unit and must include all of the persons listed in the table below.)

List all household members (including yourself and children) in the table below.

<table>
<thead>
<tr>
<th>FULL NAME</th>
<th>SOCIAL SECURITY for adults only</th>
<th>AGE</th>
<th>RELATIONSHIP TO HEAD OF HOUSEHOLD</th>
<th>TYPE OF INCOME</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td>(child support, self-employment, pension, TAFDC, SSI, donations, art sales, wages, zero income, etc.)</td>
</tr>
</tbody>
</table>

C. HEAD OF HOUSEHOLD INCOME INFORMATION

1. Head of Household's Total Present Gross Monthly Income ________________________________
   How much in bonuses, tips, commission have you received within the last 12 months? ______
   Do you anticipate bonuses, tips or commissions within the last 12 month? If so, how much ______
   Have you received a raise or cost of living adjustment within the last 12 months? ☐Yes ☐No
   If so, when was it received and how much was this raise or cost of living adjustment (COLA)? ______
   Do you anticipate any raises or COLAs within the next 12 months? ☐Yes ☐No
   If so, indicate when and by how much: _______________
   Employer's Name and Address: ____________________________________________________________
   Employer's Phone Number or Email: _____________________________________________________
   Length of Employment: ________________________________________________________________

   All Other Sources of Income:
   Including but not limited to other jobs, child support, pension, benefits, etc.
   Source: ______________________________ Monthly Amount: ______________________________
   Source: ______________________________ Monthly Amount: ______________________________

2. Co-Head/Other Adult's Total Present Gross Monthly Income ______________________________
   How much in bonuses, tips, commission have you received within the last 12 months? ______
   Do you anticipate bonuses, tips or commissions within the last 12 month? If so, how much ______
Have you received a raise or cost of living adjustment within the last 12 months? □ Yes □ No
If so, when was it received and how much was this raise or cost of living adjustment (COLA)? ______
Do you anticipate any raises or COLAs within the next 12 months? □ Yes □ No
If so, indicate when and by how much: ________________

Employer’s Name and Address: ____________________________________________

Employer’s Phone Number or Email: ____________________________________________

Length of Employment: _____________________________

All Other Sources of Income:
Including but not limited to other jobs, child support, pension, benefits, etc.

Source: ____________________________ Monthly Amount: ______________________

D. INCOME FROM OTHER HOUSEHOLD MEMBERS

1. Other Household Members Name: ____________________________________________

Total Present Gross Monthly Income________________________

How much in bonuses, tips, commission have you received within the last 12 months? ______________

Do you anticipate bonuses, tips or commissions within the last 12 month? If so, how much __________

Have you received a raise or cost of living adjustment within the last 12 months? □ Yes □ No
If so, when was it received and how much was this raise or cost of living adjustment (COLA)? ______
Do you anticipate any raises or COLAs within the next 12 months? □ Yes □ No
If so, indicate when and by how much: ________________

Employer’s Name and Address: ____________________________________________

Employer’s Phone Number: ____________________________________________

Length of Employment: _____________________________

All Other Sources of Income:
Including but not limited to other jobs, child support, pension, benefits, etc.

Source: ____________________________ Monthly Amount: ______________________

Source: ____________________________ Monthly Amount: ______________________
### E. ASSETS

List ALL open savings/checking and other assets, including accounts such as a 401(k), IRA, Certificates of Deposit, Venmo, Paypal, Bitcoin, 403Bs, accounts etc.

<table>
<thead>
<tr>
<th>Name(s) on Account</th>
<th>Name of Bank/Institution</th>
<th>Account Type (Checking, savings, IRA, etc.)</th>
<th>Current Balance</th>
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Have you owned a home or joint interest in a home in the three years prior to the date of this application?
☐ Yes ☐ No
If yes, please explain: ____________________________________________

### F. DEBT INFORMATION

1. Applicants Present Monthly Rent: ___________ Unit Type: ___________ (Studio/1BR/2BR)

Do you have a Section 8, MRVP or similar voucher with which you pay rent with? ☐ Yes ☐ No

Do you have a lease? ☐ Yes ☐ No If yes, when does it end? ________________

2. List any Debt, *other than credit cards*, that requires a scheduled payment for any household member:

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<tr>
<th>Source of Debt</th>
<th>Balance Due</th>
<th>Monthly Payment</th>
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3. List all credit cards, with present balance due and monthly payments being made:

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<th>Credit Card Name</th>
<th>Balance Due</th>
<th>Monthly Payment</th>
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4. Have you ever been past due on any credit or loan account? ☐ Yes ☐ No

If yes, explain: ____________________________________________

Inclusionary Housing Program- The Chadwick
**G. NOTIFICATION**

All information you provide here will be treated as confidential and used by OSPCD’s Housing Division to determine eligibility in occupancy of this rental unit available for through the City’s Inclusionary Housing Program. Applicants understand that, if selected, OSPCD’s Housing Division will require complete income and asset verification. This means that applicants, if selected, must provide the Housing Division with documentation and further verification of all information related to income, assets, and household members. The applicant certifies all information in this application is true to the best of his or her knowledge and belief, and no information has been included or excluded which might reasonably affect judgments regarding applicant’s eligibility.

I acknowledge and consent to the sharing of my household’s information with the Office of Housing Stability, Health Department and other City of Somerville departments as needed.

I have read and understand the conditions, restrictions, and the deadlines as described above. I certify under penalty of perjury that the information I have provided is complete and accurate. I understand that the provision of false information and statements are grounds for ineligibility under the City of Somerville’s Inclusionary Housing Program.

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Print Head of Household’s Name ___________________________ Head of Household’s Signature ___________________________ Date __________

Print Co-head of Household’s Name ___________________________ Co-head of Household’s Signature ___________________________ Date __________

Print Other Adult Household Member’s Name ___________________________ Other Adult Member’s Signature ___________________________ Date __________
EMPLOYMENT VERIFICATION FORM

Fill in the name and address of employer & email __________________ DATE: _________
________________________________________________________________________
________________________________________________________________________

Print Full name of applicant employed at above mentioned location: __________________

I hereby authorize release of my employment information.

X ____________________________ Date

Signature of applicant employed at location above

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The individual named above is an applicant of a City of Somerville housing program that requires verification of income. The information provided will remain confidential to and used only for income verification purposes. Your prompt response is crucial and greatly appreciated.

City of Somerville-OSPCD representative ____________________________ Date __________

Please return form to: City of Somerville-OSPCD/Housing ATTN: __________________
or City Hall Annex, 50 Evergreen Avenue ____________________________ Somerville, MA 02145 (617) 625-6600 x 258

Fax: (617) 666-8035 Somerville, MA 02145 (617) 625-6600 x 258

This section below is to be completed by the employer only AFTER LOTTERY and if selected:

Employee Name: ____________________________ Job Title: ____________________________

Presently Employed: Yes ___ Date First Employed ___________; No ___ Last Day of Employment ____________

Current Gross Wages/Salary $__________ / (circle one) hourly weekly bi-weekly semi-monthly monthly yearly other ___

Average # of regular hours per week: ____________ Year-to-date earnings: $__________

Number of weeks per year: ____________________________ From ____________ to ____________

Overtime Rate: $__________ per hour Average # of overtime hours per week: ____________

Shift Differential Rate: $__________ per hour Average # of shift differential hours per week: ____________

Commissions, bonuses, tips, other: $__ (circle one) hourly weekly bi-weekly semi-monthly monthly yearly other ___

Is any change in the employee’s rate of pay anticipated within the next 12 months: ____________ Effective date: ____________

If the employee’s work is seasonal or sporadic, please indicate the layoff period(s) ____________

Additional remarks: __________________________________________________________________________

_____________________________ ____________________________ Date __________

Employer’s Signature Employer’s Printed Name and Title

_____________________________ ____________________________ Date __________

Employer (Company) Name and Address

Phone __________________ Fax __________________ E-mail __________________

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