CUSHMAN HOUSE

67 North Street, Medfield

INFORMATION AND APPLICATION PACKAGE

Developed by

Medfield Holdings, LLC

Marketing and Lottery Agent

Community Opportunities Group, Inc.
129 Kingston Street – 3rd Floor, Boston MA 02111
617-542-3300 ext 303
housinglottery@cogincorp.com

EQUAL HOUSING OPPORTUNITY

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Cushman House, Medfield MA

Overview and Introduction:

Medfield Holding, LLC is now completing construction on Medfield's newest residential address at 67 North Street a project that involves the complete renovation and expansion of an existing property into 8 one and two bedroom rental housing units. Under agreement with the Town of Medfield and the State of Massachusetts Department of Housing and Community Development, two of these units will be affordable to moderate income tenants at below market rents.

The affordable units include a one-bedroom, one-bath 700 square foot unit that will rent for $1,452 per month, as well as a two bedroom, one bath, 740 square foot wheelchair accessible unit that will rent for $1,611 per month. *These rents do not include utilities, which will be paid by the tenant, but the rents have been reduced by a utility allowance based on average utility costs for similar units*. Units include a washer and dryer and free on-site parking. Heat, hot water and cooking are provided by economical natural gas.

Applicants who currently live in Medfield, who work for the Town of Medfield or for a business located in Medfield or whose children attend Medfield schools can qualify for a local preference on one of the two units.

The affordable units will remain affordable. A lottery will be held to select the first tenants for the affordable units. Interested applicants must complete the application included in this Information and Application package and submit all required documentation. Applications will be reviewed prior to the lottery to determine

Community Opportunities Group, Inc., under contract with the developer, will accept applications and conduct a lottery for eligible applicants. The application and lottery process as well as the eligibility requirements are described in this document. An application with instructions is also included in this package. Only applications that are complete, signed, submitted by the application deadline, and meet the eligibility requirements will be entered into the lottery.

Completed applications, *with all supporting documents* must be received by Community Opportunities Group, Inc. no later than January 3, 2018 at 12:00 p.m. ***Applications received after the deadline or which are not complete and signed will not be eligible and will not be placed in the lottery***.

Applications will be reviewed as they are received for completeness and every effort will be made to contact applicants by telephone and/or email to advise them of missing information. For this reason, applicants are STRONGLY URGED to submit applications as early as possible to ensure that they are received and are complete in time to be placed in the lottery.

Affirmative Fair Marketing Statement

Medfield Holdings, LLC will not discriminate in the selection of applicants or the rental of units on the basis of race, color, national origin, disability, age, ancestry, children, familial status, genetic information, marital status, receipt of public assistance, religion, sex, sexual orientation, gender identity, military/veteran status or any other basis prohibited by law.

Reasonable Accommodations

Persons with disabilities 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 afford persons with disabilities an equal opportunity to use and enjoy the home.

Eligibility Requirements:

Selection of initial tenants for the affordable housing units at Cushman House will be done through an application and lottery process. The availability of applications will be advertised for a period of 60 days prior to the Application Deadline. In order to be placed into the lottery for the affordable units, interested applicants must submit a complete, signed, application (included in this package) along with all required documentation (see instructions and documentation list). Applications received by the deadline will be reviewed to determine whether they meet the eligibility requirements, the unit size the applicant is seeking, and whether an accessible unit is required. Individuals with a financial interest in the development or who are related to the developer are not eligible.

Application Deadline: January 3, 2018 at 12:00 P.M.

Completed applications must be mailed to:

Community Opportunities Group, Inc.
129 Kingston Street – 3rd Floor
Boston, MA 02111

Attention: Cushman House Lottery

Applications received prior to the deadline will be pre-screened for completeness, income eligibility, and for minority and local preference status. Ineligible applicants will be notified of the reasons they are ineligible. Eligible applicants will be placed into the lottery pools for which they qualify (local preference and general). Eligible applicants will be notified regarding the preference pool(s) for which they qualify, their assigned application number to be used in the lottery, and any further information deemed necessary.

Public Information Session:

A public information session will be held December 4, 2017 at 6:00 P.M. at Medfield Town Hall, 459 Main Street, Medfield (2nd Floor Meeting Room) at which interested applicants may obtain an application and learn about the development, the affordable housing units, the eligibility criteria and the lottery and will have an opportunity to ask questions. Attendance is not required, but it is strongly encouraged.

Income and Assets:

In order to be eligible to rent an affordable unit at Cushman House, annual income and assets must be within the guidelines listed below. In addition to the maximum allowable incomes, if selected in the lottery to rent a unit, applicants will be required to show sufficient income be able to afford the unit. Generally tenants should not be paying more than 40% of gross annual household income for rent and utilities (except that tenants who have rental subsidies such as Section 8 vouchers may use the voucher to document ability to pay).

Maximum Income

Eligible applicants must have a combined gross annual household income from all sources for members of the household of not more than 80% of area median income, as defined by HUD and adjusted for household size. According to the 2017 Income Guidelines released by HUD, 80% of the area median income for Medfield, MA and therefore the maximum allowable household income to qualify for an affordable rental unit at Cushman House is:

Household Size	Maximum Income
1	$54,760
2	$62,550
3	$70,350
4	$78,150

Bonus pay, overtime pay or other compensation will be reviewed on a case-by-case basis.

Household size will be determined at the time the application is received. If a household member is pregnant at the time of application and provides medical documentation of this, the household size will be increased to account for the anticipated member.

Assets

While there is no maximum asset limit, applicants must document all assets as part of the application process. An amount equal to either actual income received (for example, interest on savings accounts) or an imputed interest rate equal to the current passbook rate published by HUD (currently 0.6%) – whichever is greater -- will be added to the income of the household for purposes of determining income eligibility.

Assets include all cash in savings accounts, checking accounts, certificates of deposit, bonds, stocks, retirement accounts, and the value of real estate holdings as outlined above, as well as other forms of capital investment. Applicants may not own a home (including in a trust). Assets do not include the value of cars, furniture, etc.

Retirement accounts, such as IRAs, 401(k) s, SEPs and pension funds that a household member is currently drawing upon for income will not be included in the asset total for purposes of calculating interest income but the amount being used as income will be calculated into the household's annual income total.

The Affordable Housing Lottery:

The Lottery will be held at 6:00 P.M. on January 11, 2018 at Medfield Town Hall, 459 Main Street, Medfield, MA in the 2nd floor meeting room. The Lottery is open to the public, but applicants need not be present at the Lottery unless they wish to be. All applicants will be notified by mail or email (if an email address is provided) of their status immediately following the lottery.

Lottery Pools and Local Preference:

There will be two lottery pools for Cushman House as follows:

Local Preference Pool:

Applicants may qualify for a local preference if they submit documentation showing that they fall into one of the following categories:

- Current Medfield Residents;
- Employees of the Town of Medfield;
- Employees of Businesses located in Medfield; or
- Families with children attending Medfield public schools

General Pool – for all eligible applicants

Applicants who qualify for the local preference will be placed in both pools.

Minority Participation and Local Preference:

After the application deadline and prior to the lottery, the lottery administrator will review the percentage of minority applicants in the local preference pool. Should the percentage fall below the minority population of the geographic region (27%), a preliminary lottery will be held of minority applicants who do not have a local preference. In the order these are drawn, they will be added to the local preference pool until the percentage of minorities in the local preference pool meets or exceeds the percentage of minority households in the geographic region or all minority applicants have been placed into the local preference pool, whichever first occurs.

Minority households are identified in accordance with the regulatory classifications established by HUD: Native American or Alaskan Native; Asian or Pacific Islander; African-American; Hispanic/Latino: or Cape-Verdean. Applicants are requested, but not required to provide this information. Applicants who do not choose to provide this information will be considered non-minority applicants.

Applicants are not required to provide racial information, but are advised that minorities who do so may increase their chances of being chosen in the lottery if the local pool does not contain a representative percentage of minority applicants.

Unit Distribution by Lottery Pool:

Of the two (2) affordable units available in this phase, applicants who qualify for a local preference will have priority for one (1). The remaining affordable unit will be assigned to applicants drawn from the General Pool.

Preference for Larger Households

There will be a preference as part of the lottery process to award the larger unit to a larger household (defined as at least one person per bedroom with an assumption that couples will share a bedroom unless there are documented medical reasons not to). Household preference overrides local preference where applicable.

Preference for Awarding Accessible Unit

There will be a preference as part of the lottery process to award the wheelchair accessible unit to a household who requires an accessible unit.

After the Lottery – Tenant Screening

While the lottery will determine the order in which applicants will have an opportunity to rent a unit at Cushman House, being selected in the lottery does not guarantee a unit to an applicant. The application files, along with the waiting list order created by the lottery will be turned over to the Cushman House Property Management Company at the conclusion of the lottery.

Applicants will then be screened as tenants in the normal fashion (credit checks, landlord references, ability to pay rent, etc.). The property managers may screen applicants selected in the lottery in a manner that is consistent with equal opportunity and state and federal fair housing regulations.

The Application:

A complete application will consist of the completed and signed application form, a signed disclosure form, and signed consent to affordable housing restriction form included in this package, as well as the required documentation of income, assets, and (if applicable) qualification for local preference. A checklist is included in this information package to assist you in putting together the needed documentation. The checklist is not part of the application and need not be submitted but is intended to help applicants know what documentation to submit for their particular circumstances.

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CUSHMAN HOUSE
APPLICATION

Part I - Applicant Information

Applicant Name:
Spouse/CoApplicant Name:
Mailing Address:
City: State: Zipcode:
Email:
Home Phone:
Work /Other Phone: # Persons in Household:

Household Members - (List ALL Household members, regardless of age, who will occupy the affordable unit)

Name	Date of Birth	Social Security #	Relationship to Applicant
			APPLICANT

Part II - Local Preference

Please review the information package and check below if you qualify for a local preference in the lottery.

My household qualifies for a local preference.

Please be sure to attach proof of eligibility for local preference (See insstructions)

Part III - Race Information for Applicants

Optional: Please check the appropriate Race Category for each Household member

	Applicant	Co-Applicant	Dependent(s)
Native American/Alaskan Native			
Asian/Pacific Islander			
African American			
Hispanic/Latino			
Cape Verdean			
White/Non-Minority			
Other			

Part IV - Unit Type Desired

Please Indicate below the unit size you require and whether your household needs a wheelchair accessible unit

I BR 2 BR I/We need an accessible unit

Part V- Adult Full-Time Student

Is any member of the Household who is over age 18 a full time student? (Circle) Y N

If yes, list name(s) of full time students: Name: Name:

for each, list school attending: School: School:

(Attach a letter from each school verifying the student is enrolled full-time)

CUSHMAN HOUSE
APPLICATION

Part VI - Applicant's Income

Employment Income

Applicant's Primary Occupation:

Employer Name: Years Employed:

Supervisor Name: Phone:

Employers Address:

IF PAID Weekly (Attach 5 most recent Paystubs or other documentation) (See instructions)
Amt #1: Amt #2: Amt #3: Amt #4: Amt #5
Annual Total:

IF PAID Bi-Weekly (Attach 3 most recent paystubs or other documentation) (See instructions)
Amt #1: Amt #2: Amt #3: Annual Total:

IF PAID Bi-Monthly (Attach 3 most recent paystubs or other documentation) (See instructions)
Amt #1: Amt #2: Amt #3: Annual Total:

IF PAID Monthly (Attach 2 most recent paystubs or other documentation) (See instructions)
Amt #1: Amt #2: Annual Total:

Other Regular Income

(Additional Job, Social Security, Pension, Self Employment, Child Support, Alimony, Public Benefits etc.)

Income Source:

IF PAID Weekly (Attach 5 most recent Paystubs or other documentation) (See instructions)
Amt #1: Amt #2: Amt #3: Amt #4: Amt #5
Annual Total:

IF PAID Bi-Weekly (Attach 3 most recent paystubs or other documentation) (See instructions)
Amt #1: Amt #2: Amt #3: Annual Total:

IF PAID Bi-Monthly (Attach 3 most recent paystubs or other documentation) (See instructions)
Amt #1: Amt #2: Amt #3: Annual Total:

IF PAID Monthly (Attach 2 most recent paystubs or other documentation) (See instructions)
Amt #1: Amt #2: Annual Total:

Social Security - Monthly Benefit Amount: Annual Total:

Describe Other Income Source:
Monthly Amount: Annual Total:

Describe Other Income Source:
Monthly Amount: Annual Total:

Describe Other Income Source:
Monthly Amount: Annual Total:

Misc. Variable Income (Describe Source):
Enter Amounts Received in three most recent months:
Amt #1: Amt #2: Amt #3: Annual Total:

Applicant's Total Annual Income:

CUSHMAN HOUSE
APPLICATION

Part VI - Co-Applicant's Income

Employment Income

Applicant's Primary Occupation:

Employer Name: Years Employed:

Supervisor Name: Phone:

Employers Address:

IF PAID Weekly (Attach 5 most recent Paystubs or other documentation) (See instructions)
Amt #1: Amt #2: Amt #3: Amt #4: $0.00 Amt #5

IF PAID Bi-Weekly (Attach 3 most recent paystubs or other documentation) (See instructions)
Amt #1: Amt #2: Amt #3: Annual Total:

IF PAID Bi-Monthly (Attach 3 most recent paystubs or other documentation) (See instructions)
Amt #1: Amt #2: Amt #3: Annual Total:

IF PAID Monthly (Attach 2 most recent paystubs or other documentation) (See instructions)
Amt #1: Amt #2: Annual Total:

Other Regular Income

(Additional Job, Social Security, Pension, Self Employment, Child Support, Alimony, Public Benefits etc.)

Income Source:

IF PAID Weekly (Attach 5 most recent Paystubs or other documentation) (See instructions)
Amt #1: Amt #2: Amt #3: Amt #4: Amt #5
Annual Total:

IF PAID Bi-Weekly (Attach 3 most recent paystubs or other documentation) (See instructions)
Amt #1: Amt #2: Amt #3: Annual Total:

IF PAID Bi-Monthly (Attach 3 most recent paystubs or other documentation) (See instructions)
Amt #1: Amt #2: Amt #3: Annual Total:

IF PAID Monthly (Attach 2 most recent paystubs or other documentation) (See instructions)
Amt #1: Amt #2: Annual Total:

Social Security - Monthly Benefit Amount: Annual Total:

Describe Other Income Source:
Monthly Amount: Annual Total:

Describe Other Income Source:
Monthly Amount: Annual Total:

Describe Other Income Source:
Monthly Amount: Annual Total:

Misc. Variable Income (Describe Source):
Enter Amounts Received in three most recent months:
Amt #1: Amt #2: Amt #3: Annual Total:

Co-Applicant's Total Annual Income:

CUSHMAN HOUSE
APPLICATION

Part VI - Other Household Member Income

Employment Income

Household Member Name:

Applicant's Primary Occupation:

Employer Name: Years Employed:

Supervisor Name: Phone:

Employers Address:

IF PAID Weekly (Attach 5 most recent Paystubs or other documentation) (See instructions)
Amt #1: Amt #2: Amt #3: Amt #4: Amt #5
Annual Total:

IF PAID Bi-Weekly (Attach 3 most recent paystubs or other documentation) (See instructions)
Amt #1: Amt #2: Amt #3: Annual Total:

IF PAID Bi-Monthly (Attach 3 most recent paystubs or other documentation) (See instructions)
Amt #1: Amt #2: Amt #3: Annual Total:

IF PAID Monthly (Attach 2 most recent paystubs or other documentation) (See instructions)
Amt #1: Amt #2: Annual Total:

Other Regular Income

(Additional Job, Social Security, Pension, Self Employment, Child Support, Alimony, Public Benefits etc.)

Income Source:

IF PAID Weekly (Attach 5 most recent Paystubs or other documentation) (See instructions)
Amt #1: Amt #2: Amt #3: Amt #4: Amt #5
Annual Total:

IF PAID Bi-Weekly (Attach 3 most recent paystubs or other documentation) (See instructions)
Amt #1: Amt #2: Amt #3: Annual Total:

IF PAID Bi-Monthly (Attach 3 most recent paystubs or other documentation) (See instructions)
Amt #1: Amt #2: Amt #3: Annual Total:

IF PAID Monthly (Attach 2 most recent paystubs or other documentation) (See instructions)
Amt #1: Amt #2: Annual Total:

Social Security - Monthly Benefit Amount: Annual Total:

Describe Other Income Source:
Monthly Amount: Annual Total:

Describe Other Income Source:
Monthly Amount: Annual Total:

Describe Other Income Source:
Monthly Amount: Annual Total:

Misc. Variable Income (Describe Source):
Enter Amounts Received in three most recent months:
Amt #1: Amt #2: Amt #3: Annual Total:

Household Member's Total Annual Income:

CUSHMAN HOUSE
APPLICATION

Part VII - Household Assets

(Attach statements for last 3 months and enter amounts below)(Round to nearest dollar)

Name(s) on Acct:

Enter Info and Current Balances Below (See Instructions)

Bank/Brokerage Name	Account #	Account Type (See Instructions)	Interest Rate %	Current Balance
			Total Assets:	

Name(s) on Acct:

Bank/Brokerage Name	Account #	Account Type (See Instructions)	Interest Rate %	Current Balance
			Total Assets:	

Name(s) on Acct:

Enter Info and Balances Below (See Instructions)

Bank/Brokerage Name	Account #	Account Type (See Instructions)	Interest Rate %	Current Balance
			Total Assets:	

Equity Calculation for Real Estate Owned:

Current Value of Property :	
Less Outstanding Balance of Mortgage(s):	
Less Estimated Realtor Fee (5% of value)	
Estimated Total Equity	
Ownership percentage:	
Applicant's Equity :	

Calculation of Income from Assets

Total Value of Assets:	
If Total Value of Assets greater than $5,000, multiply by 0.6%	

CUSHMAN HOUSE
APPLICATION

Part VIII - Applicant Signatures and Authorizations

I/We certify that the information contained in this application is true and accurate to the best of my/our knowledge.

I/We Understand that only applications that are complete, signed, and eligible under the guidelines and that contain all necessary documentation and certifications will be entered into the lottery. (See list of enclosures required)

I/We Authorize Community Opportunities Group, Inc., The Town of Medfield, the Massachusetts Department of Housing and Community Development to verify any information contained in this application and authorize any banks, financial institutions, and employers to provide verification of information provited in thsi application.

Applicant Signature: _____ **Date:** _____

Co-Applicant Signature: _____ **Date:** _____

Please submit this application along with ALL of the listed documents in a single large (9x12" or 11x14") envelope to: COMMUNITY OPPORTUNITIES GROUP, INC., 129 KINGSTON STREET - 3RD FLOOR, BOSTON MA 02111. MARK THE ENVELOPE "CUSHMAN HOUSE APPLICATION"

(SEE APPLICATION INSTRUCTIONS FOR LIST AND EXPLANATION OF DOCUMENTS REQUIRED)

Cushman House
Medfield

Disclosure Form

Please check and fill in the following items that apply to your household.
Write N/A (not applicable) next to those that do not apply.

___ I/We certify that our household is comprised of ____ (insert #) persons.

___ I/We certify that our annual gross household income is $_____
(Estimated gross income from all household members has been included)

___ I/We certify I/we have provided documentation of all assets of members of our household as outlined in the application package instructions.

___ if applicable, I/We certify that our household qualifies for a Local Preference.
(attach documentation to your application).

___ If applicable, I/We certify that at least one member of our household qualifies under the minority preference category noted in my/our application.

___ If applicable, I/We certify that at least one member of our household is disabled and requires a wheelchair accessible or adapted unit.

___ I/We certify that the information contained in this application is true and accurate to the best of my/our knowledge and belief under the pains and penalties of perjury. I/We understand that perjury will result in disqualification from further consideration.

___ I/We understand that if selected in the lottery for Cushman House, it does not guarantee that I/We will be able to rent a unit. I understand that all application data will be verified and my qualifications will be reviewed in detail.

___ I/We understand that the rents at Cushman House are not subsidized and that I am responsible for paying the stated rent and the cost of utilities.

___ I/We further authorize Medfield Holdings, LLC. through it's Lottery and Marketing agent, Community Opportunities Group, Inc. as well as the Town of Medfield, to verify any and all income, asset and other financial information; to verify any and all household, resident location and workplace information and I/we direct any employer, landlord, or financial institution to release any information to Community Opportunities Group, Inc. , Medfield Holdings, LLC and/or the Town of Medfield for the purpose of determining eligibility for affordable units at Cushman House in Medfield.

___ I/We have completed an application and have reviewed and understand the process that will be used to distribute the available affordable units at Cushman House in Medfield.

_____ _____

Applicant Signature Date

_____ _____

Co-Applicant Signature Date

Please return this form with your completed application and all attachments to:
Community Opportunities Group, Inc.
129 Kingston Street – 3rd Floor
Boston, MA 02111
Attention: Cushman House Lottery

Complete Application must be received by 12:00 P.M. January 3, 2018 in order to be eligible to be included in the lottery. Applications may not be delivered in person but must be mailed to the address listed above.

Cushman House

Consent to Affordable Housing Restrictions

You are applying for an affordable rental unit at below market rents. There are deed restrictions and regulatory agreements requiring the long terms use of this unit to house income-eligible tenants.

In addition to qualifying initially to rent a unit at Cushman House, if you wish to renew your lease after the first year, you will be required to re-certify your income eligibility each year approximately 90 days before the end of your current lease.

Upon initial occupancy (when you first rent the unit) you must be determined to have a gross annual household income of no more than 80% of the area median income for your household size. (See income limits listed in the information and application package)

Upon lease renewal, you must again provide income and asset documentation, but you will continue to be eligible to rent the affordable unit at the affordable rent provided that your household income does not exceed 140% of the then-current income limits. (Income limits are adjusted annually by the U.S. Department of Housing and Urban Development). Should you cease to be income eligible under these guidelines you will be able to remain in the unit until the end of your current lease. At that time you must vacate the affordable unit.

You should be aware that your income eligibility for the affordable unit does not relieve you of the requirements to comply with all other lease obligations associated with your tenancy at Cushman House.

For more information, contact:
Paula Stuart, Lottery Administrator: Phone: 617-388-1331 Email: housinglottery@cogincorp.com

I understand and agree to abide by the requirements outlined above, to annually re-certify my income in accordance with the regulations and to comply with the terms of my lease if offered a unit at Cushman House in Medfield.

_____ _____
Applicant Signature Date

_____ _____
Co-Applicant Signature Date

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Cushman House
Application Instructions

To enter the Lottery for an affordable home at Cushman House, an applicant must submit a complete Application Package prior to the deadline.

Complete Application Package:

A complete application package shall consist of the following:

- A completed Application Form signed by the Applicant and (if applicable) Co-Applicant
- A completed and signed Disclosure Form
- A signed Consent to Affordable Housing Restriction Form
- All Required Documentation
    - Income Documentation for all household members
    - Proof of Eligibility for a Local Preference (if applying for Local Preference)
    - Documentation of Assets for all household members
    - Verification of full-time student status (if applicable) for Household members over 18 years of age who are full-time students.
    - Copies of complete signed federal and state tax returns for the most recent three years with all schedules and attachments (including W2 forms, 1099's etc.)

The following sections will provide guidance in completing and submitting an eligible application. *Applications that are not complete or not eligible will not be entered in the Lottery.* For this reason applicants are strongly urged to contact Paula Stuart at Community Opportunities Group, Inc. (Marketing and Lottery Agent for Cushman House) for guidance if there are any requirements you do not understand.

Paula Stuart can be reached by phone at 617-388-1331 or by email at housinglottery@cogincorp.com.

Instructions:

Application Form

Part I of the application form collects information about the Applicant Household. Please provide the requested information. Applicant is the Head of Household. Co-Applicant is the spouse, partner or other adult who will sign the lease and reside in the unit. Additional Household members include every person who will live in the affordable home as a member of the household (including children). The Applicant's name goes on the first line. Social Security Numbers and Birthdates are required for each household member. Describe the Relationship to the Applicant for each household member (for example: Wife, Son, Daughter, Partner, Mother, Nephew, etc.)

Part II of the application allows the applicant to claim a Local Preference. To be eligible for a local preference, at least one member of the applicant household must either 1) be a current resident of Medfield; 2) be a current employee of the Town of Medfield; 3) be a current employee of a business located in Medfield; or 4) have children attending Medfield public schools. Proof of this must be provided (for example, for a current resident proof of residency would be in the form of a current utility bill, copy of Town census listing, etc). If you have a question about what proof to submit, please call Paula Stuart at 617-388-1331 and ask. Check the box

Part III of the application is optional, and designed to capture racial data on applicant households. You need not fill in this section. However, if you are a minority household (at least one household member falls into the listed minority categories) and do not qualify for a Local Preference, if the applicant pool that is eligible for a Local Preference does not equal or exceed the minority population of the area, a special pre-lottery drawing from among minority applicants will be held to add minority applicants to the Local Preference pool until the minority percentage of the Local Preference pool equals the percentage within the geographic area. For non-resident minority applicants, providing this information **may** increase your chances of renting a unit at Cushman House.

Part IV of the application asks for information regarding the size of unit the applicant requires and whether the applicant household requires an accessible unit.

Part V of the application should be filled out regarding members of the applicant household who are over 18 years of age and registered as full-time student in a school or college. Please include a letter from the educational institution showing that the household member is a full time student, and the anticipated graduation date.

Part VI of the application captures income data for the applicant household. There is a page of the application to captures information about the Applicant, and a page for the Co-Applicant if there is one (these are the names that will be on the lease). Please fill in the requested information in the appropriate spaces. A section for the full-time occupation and income for the applicant and co-applicant is provided, as well as additional space to capture additional income from a part time job, alimony or child support, retirement or investment income, etc. There is an additional page to

collect information about incomes of additional household members. You may copy this page for additional household members if you need to include more household members. You must provide documentation of all income (see the application form and the checklist at the end for guidance). Please provide documentation that is current with the application date (most recent time period). Should you have any questions, please contact Paula Stuart at COG for guidance before submitting your application. (See Appendix A for guidance regarding what documentation to submit for specific types of income).

Part VII of the application captures information about household assets. Assets include liquid assets such as cash in savings and checking accounts, real estate, investment accounts (stocks, bonds, mutual funds, etc). Please indicate in whose name(s) each account is held. If a listed asset has a set interest rate, (such as a savings account) show the interest rate (example: if your savings account pays 0.5% interest, list 0.5% in the column for interest rate). The current balance should include the principal balance (or value if a non-cash asset) as of the most recent statement. Please include documentation as outlined in the application package and checklist.

Part VIII of the application is for signatures and certifications by the Applicant and Co-Applicant. Please read the certification statements and sign this page.

Part IX of the application is not for the applicant to complete, but will be used by Community Opportunities Group, Inc., as the developer's Marketing and Lottery Agent, to pre-screen applications for eligibility and inclusion in the Lottery.

Disclosure Form

Please check off all applicable items and sign the Disclosure form included in the Information and Application Package. Include the signed form with your application.

Consent to Affordable Housing Restriction

Please carefully review the Consent to Affordable Housing Restriction Form. Include the signed form with your application.

Ask for help if you need it!

If there is anything you don't understand or need clarified as you complete the application and collect the needed documentation, please ask for assistance. Paula Stuart can be reached by phone (617-388-1331) or email (housinglottery@cogincorp.com).

APPENDIX I
DOCUMENTATION CHECKLIST

Documentation must be submitted with your application to verify your eligibility to lease a unit at Cushman House. The list below is intended to provide guidance as to what documentation is required. Please review this list, make sure that if the category applies to you have included the required documentation with your application. If a category does not apply to you (for example, if you do not have self-employment income) check N/A. If the category does apply, review the list of documentation needed and check that those items are included in your application.

If you have any questions, or cannot obtain certain documentation, please contact Paula Stuart of Community Opportunities Group, Inc. (617-388-1331 or housinglottery@cogincorp.com) for additional guidance regarding how to comply with this requirement. (Note: ***You must submit copies of these documents and retain your originals for your records. Do not submit originals as we cannot return them to you).***

INCOME DOCUMENTATION (For all adult members of the applicant household)

Current Wage Income — **Required Documentation**

☐ Not Applicable

☐ Copies of 5 most recent paystubs;
or
☐ Letter from employer on company letterhead signed by an authorized person stating gross wages for last 5 pay periods, and year to date.

Prior Wage Income — **Required Documentation**
(for job left from Jan 1 of 2016 to the date of this application)

☐ Not Applicable

☐ Signed letter from prior employer stating last day employed
or
☐ Copy of last pay stub from 2016 and the matching 2016 W-2 form. (The YTD earnings on the paystub must match the W-2 total).

Self-employment Income — **Required Documentation (Provide all that apply)**

☐ Not Applicable

☐ Self Employment Affidavit (Form Attached)
☐ Copies of most recent 1099's (for last 3 years)
☐ Copies of 3 most recent bank statements for the business
☐ Accountant's statement of net business income for most recent fiscal quarter.
☐ Copy of most recent quarterly tax filing
☐ Copies of checks or payments received for last 3 months
☐ Any other documentation of self employment income

Social Security, SSI, Unemployment, TANF, Veterans Benefits or Other Government Benefits

☐ Not Applicable

Required Documentation

☐ Benefit Letter for current year from income source
☐ Copies of check stubs for last 3 months
☐ Printout of Status of Claim from Unemployment website

Retirement Income

☐ Not Applicable

Required Documentation

☐ Statement of monthly benefits from pension provider
☐ Copies of 3 most recently monthly check stubs
☐ If you are drawing down income from IRA's, or other retirement accounts, provide documentation in the form of checks, withdrawal statements or other appropriate records.
☐ If payments are direct-deposited to bank accounts, highlight and annotate these deposits on your bank statements.

Child Support/Alimony

☐ Not Applicable

Required Documentation

☐ Copy of Divorce Decree or Settlement Agreement
☐ A Statement from the Dept of Revenue (DOR) showing Payments
☐ Notations on bank statements showing deposited payments

Note: If you are not receiving the amount of alimony or child support you should be, please attach:

☐ Proof of legal claim against person who owes you money
☐ If applicable, statement from DOR showing child support arrears owed.

Recurring Gift Income

☐ Not Applicable

Required Documentation

☐ A signed and notarized letter from your contributor stating the amount contributed and frequency.

Other Income

☐ Not Applicable

Required Documentation

☐ Submit documentation sufficient to verify source and amount of income

No Income (for household Members 18 years and over)

☐ Not Applicable

Required Documentation

☐ Complete and attach Certificate of Zero Income (form attached)

Copies of Income Tax Returns for most recent 3 years with all schedules and attachments

☐ Not Applicable

Required Documentation

☐ Complete copies of Federal and State Tax Returns for 2014, 2015 and 2016 including all schedules and attachments. (Schedules A, C, etc. and Attachments including W-2s, 1099's, 1099G, 1099-Int, etc.). ***The submitted copies should be signed by the taxpayer(s).***

☐ For any member of the household who did not file tax returns in one or more of those years, or who cannot locate a copy of the needed tax returns, please complete IRS Form 4506T (form attached). Fill in the name, social security number and address information of the taxpayer. The form authorizes the IRS to send the information to Community Opportunities Group, Inc. Please complete the form, sign it and return it with your application. COG will mail the form to the IRS.

ASSET DOCUMENTATION (For all adult members of the applicant household)

Bank Accounts

☐ Not Applicable

Required Documentation

☐ Copies of all Bank and Credit Union Accounts, both Checking and Savings Accounts, for all members of the household for the most recent 3 months. **Include all pages of all bank statements.** For Passbook savings accounts submit copies of pages covering transactions over the last 3 months as well as the cover page with the account holder's name and account number. Note that if online printouts are submitted, they must have the name of the bank, the account number and the account holder.

Investment and Retirement Accounts (Stocks, Bonds, Mutual Funds, IRA's 401Ks, SEP, Real Estate, Trusts, etc)

☐ Not Applicable

Required Documentation

☐ Copies of 3 most recent monthly statements from income sources reporting monthly

☐ Copies of 2 most recent quarterly statements from income sources reporting quarterly

☐ Appraised value of investment Real Estate owned, plus outstanding mortgage balance. If Real estate is co-owned include copy of deed or other documentation showing percentage and form of ownership.

☐ If you have sold real estate within the last year, a copy of the HUD-1 Settlement Statement

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LOCAL PREFERENCE DOCUMENTATION (Current residents of Medfield, current employees of the Town of Medfield, current employees of businesses located in Medfield and Households with children attending Medfield public schools.

Proof Local Preference Eligibility

☐ Not Applicable

☐ Copy of current utility bill
☐ Copy of Lease
☐ Medfield Voter or Census listing for the current year
☐ If Town employee, copy of contract, letter from HR Dept. current pay stub
☐ If employee of local business, copy of contract, letter from HR Dept., or current pay stub with employer name and address
☐ For non-residents with children attending Medfield public schools, a letter from the school department.

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Self-Employment Income Affidavit

Anticipated Self Employment earnings for this calendar year:	$
Previous year's Self Employment income:	$

You must attach:

☐ A current financial statement, accountant's statement of Net Business Income for this calendar year, income receipts, or any other documentation you can provide to corroborate the income and earnings stated above.

☐ Copies of bank statements for business bank accounts for the most recent 3 months. Include all pages of bank statements.

☐ A copy of your 2016 executed tax return, including Schedule C.

CERTIFICATION

I certify that the above listed income amounts are accurate and I have provided all of the above requested information.

Signature: _____

Print Name: _____

Date: _____

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Certification of Zero Income

(To be completed by adult household members only, if stating that they have no current income from any source)

Name of Applicant Household Member:

_____

1) I hereby certify that I have not received income from any of the following sources during the past twelve (12) months:
   a) Wages from employment (including commissions, tips, bonuses, fees, etc.);
   b) Income from operation of business;
   c) Rental income from real or personal property;
   d) Interest or dividends from assets;
   e) Social Security payments, annuities, insurance policies, retirement funds, pensions, or death benefits;
   f) Unemployment or disability payments;
   g) Public assistance payments;
   h) Periodic allowances such as alimony, child support, or gifts received from persons not living in my household;
   i) Sales from self-employed resources;
   j) Any other source not named above.

2) I will be using the following sources of funds to pay for housing and other necessities:

_____

_____

Under penalty of perjury, I certify that the information presented in this certification is true and accurate to the best of my knowledge. The undersigned further understand(s) that providing false representations herein constitutes an act of fraud and will disqualify the applicant from further consideration for a unit at Cushman House.

_____
Signature of Household Member

_____
Printed Name of Household Member

_____
Date

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IRS Form 4506-T

Complete the form on the following page and return it with your application if you:

1. Did not file tax returns for one or more of the last three tax years; or
2. Do not have a copy of your tax return for one or more of the last three tax years

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Form **4506-T**
(July 2017)
Department of the Treasury
Internal Revenue Service

Request for Transcript of Tax Return

▶ **Do not sign this form unless all applicable lines have been completed.**
▶ **Request may be rejected if the form is incomplete or illegible.**
▶ **For more information about Form 4506-T, visit *www.irs.gov/form4506t*.**

OMB No. 1545-1872

Tip. Use Form 4506-T to order a transcript or other return information free of charge. See the product list below. You can quickly request transcripts by using our automated self-help service tools. Please visit us at IRS.gov and click on "Get a Tax Transcript..." under "Tools" or call 1-800-908-9946. If you need a copy of your return, use **Form 4506, Request for Copy of Tax Return.** There is a fee to get a copy of your return.

1a Name shown on tax return. If a joint return, enter the name shown first.

1b First social security number on tax return, individual taxpayer identification number, or employer identification number (see instructions)

2a If a joint return, enter spouse's name shown on tax return.

2b Second social security number or individual taxpayer identification number if joint tax return

3 Current name, address (including apt., room, or suite no.), city, state, and ZIP code (see instructions)

4 Previous address shown on the last return filed if different from line 3 (see instructions)

5 If the transcript or tax information is to be mailed to a third party (such as a mortgage company), enter the third party's name, address, and telephone number.

Community Opportunities Group, Inc. 129 Kingston St - 3rd Floor, Boston, MA 02111 - ATTENTION P. STUART

Caution: If the tax transcript is being mailed to a third party, ensure that you have filled in lines 6 through 9 before signing. Sign and date the form once you have filled in these lines. Completing these steps helps to protect your privacy. Once the IRS discloses your tax transcript to the third party listed on line 5, the IRS has no control over what the third party does with the information. If you would like to limit the third party's authority to disclose your transcript information, you can specify this limitation in your written agreement with the third party.

6 **Transcript requested.** Enter the tax form number here (1040, 1065, 1120, etc.) and check the appropriate box below. Enter only one tax form number per request. ▶ 1040

a **Return Transcript,** which includes most of the line items of a tax return as filed with the IRS. A tax return transcript does not reflect changes made to the account after the return is processed. Transcripts are only available for the following returns: Form 1040 series, Form 1065, Form 1120, Form 1120-A, Form 1120-H, Form 1120-L, and Form 1120S. Return transcripts are available for the current year and returns processed during the prior 3 processing years. Most requests will be processed within 10 business days . . . . . ☑

b **Account Transcript,** which contains information on the financial status of the account, such as payments made on the account, penalty assessments, and adjustments made by you or the IRS after the return was filed. Return information is limited to items such as tax liability and estimated tax payments. Account transcripts are available for most returns. Most requests will be processed within 10 business days . ☐

c **Record of Account,** which provides the most detailed information as it is a combination of the Return Transcript and the Account Transcript. Available for current year and 3 prior tax years. Most requests will be processed within 10 business days . . . . . ☐

7 **Verification of Nonfiling,** which is proof from the IRS that you **did not** file a return for the year. Current year requests are only available after June 15th. There are no availability restrictions on prior year requests. Most requests will be processed within 10 business days . . ☑

8 **Form W-2, Form 1099 series, Form 1098 series, or Form 5498 series transcript.** The IRS can provide a transcript that includes data from these information returns. State or local information is not included with the Form W-2 information. The IRS may be able to provide this transcript information for up to 10 years. Information for the current year is generally not available until the year after it is filed with the IRS. For example, W-2 information for 2011, filed in 2012, will likely not be available from the IRS until 2013. If you need W-2 information for retirement purposes, you should contact the Social Security Administration at 1-800-772-1213. Most requests will be processed within 10 business days . ☐

Caution: If you need a copy of Form W-2 or Form 1099, you should first contact the payer. To get a copy of the Form W-2 or Form 1099 filed with your return, you must use Form 4506 and request a copy of your return, which includes all attachments.

9 **Year or period requested.** Enter the ending date of the year or period, using the mm/dd/yyyy format. If you are requesting more than four years or periods, you must attach another Form 4506-T. For requests relating to quarterly tax returns, such as Form 941, you must enter each quarter or tax period separately. 12 / 31 / 2014 | 12 / 31 / 2015 | 12 / 31 / 2016 | / /

Caution: Do not sign this form unless all applicable lines have been completed.

Signature of taxpayer(s). I declare that I am either the taxpayer whose name is shown on line 1a or 2a, or a person authorized to obtain the tax information requested. If the request applies to a joint return, at least one spouse must sign. If signed by a corporate officer, 1 percent or more shareholder, partner, managing member, guardian, tax matters partner, executor, receiver, administrator, trustee, or party other than the taxpayer, I certify that I have the authority to execute Form 4506-T on behalf of the taxpayer. **Note:** This form must be received by IRS within 120 days of the signature date.

☑ **Signatory attests that he/she has read the attestation clause and upon so reading declares that he/she has the authority to sign the Form 4506-T.** See instructions.

Phone number of taxpayer on line 1a or 2a

Sign Here

▶ **Signature** (see instructions) — Date

▶ **Title** (if line 1a above is a corporation, partnership, estate, or trust)

▶ **Spouse's signature** — Date