

The Apartments at the Groves – Affordable Housing Application



Information and Application for The Apartments at the Groves Affordable Housing Lincoln, MA

This packet contains specific information for the Affordable Units at The Apartments at the Groves community, in Lincoln MA. This package contains all the needed information regarding the eligibility requirements, the waiting list process and the application.

The Apartments have 30 total units; of which 8 have been reserved for residents aged 62 or older whose income is at or below 80% of the area median income. There are eight affordable units – five 1BR units at \$1,285 monthly rent, and three 2BR units with a \$1,445 monthly rent. The rent covers all utilities excluding telephone and/or internet.

We are accepting applications now for the waiting list. Applicants must be qualified to join the waiting list.

This application is a first step in the waiting list process and starts the process. This application can be downloaded from the website at: <http://www.sudbury.ma.us/> using keyword Groves, or by calling the Lottery Agent listed below for any questions.

Beth Rust
Department of Planning and Community Development, Town of Sudbury
278 Old Sudbury Rd
Sudbury, MA 01776
(978) 639-3388, housing@Town.Sudbury.Ma.US

Project description

The Apartments at the Groves is a new affordable senior living community managed by Masonic Health System of Massachusetts. The Apartments is a three-story, 39,000 square foot building located at 17 – 19 Cambridge Turnpike, Lincoln MA. The Apartments is the rental component of a larger master-planned campus called 'The Groves in Lincoln' a new Continuing Care Retirement Community (CCRC).

The Apartments have 30 total units; of which 8 have been reserved for residents aged 62 or older whose income is at or below 80% of the area median income and assets are below the proscribed limit. This is enabled through the Town of Lincoln's Multifamily Independent living Community bylaw, which requires additionally that no person under the age of 19 shall be allowed permanent residence.

These eight (8) units include five 1-bedroom units of 725sf (units 105, 110, 202, 301, 302), and three 2-bedroom units of 1,027sf (109, 203, 309). Each unit is carpeted in the living room, dining room and bedroom areas. Kitchen appliances included are electric stove, microwave oven, dishwasher, refrigerator, washer and dryer. There is one outdoor parking space provided per unit.

There is one handicapped accessible unit (unit 105). The accessible unit has features similar to adaptable units but have the additional feature of greater floor space to accommodate the needs of occupants who need such space due to their disability, including clear floor space in the kitchen and bathrooms to allow for the turning radius of the wheel chair, and grab bars in the bathroom. All the remaining units are adaptable, which are units that have features that can be modified without structural change to meet the specific functional needs of an occupant with disability.

There are many amenities available to the residents of The Apartments. The library, personal emergency response system, access to the Country Store and some cultural and wellness activities are included in the monthly rent. Additionally all residents may use the transportation for weekly shopping trips within Lincoln, Lexington and Concord on a first-come first-served basis at no charge. Transportation for appointments within the three towns noted will be charged \$5 per trip for all rental residents; outside of the three town area, all residents of the Groves are charged \$20

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per hour. Special activities that involve transportation (lunch in Boston for example) will carry a charge for all Groves residents, the charge determined by the trip location (generally the cost of the transportation divided by the number of seats available). A fitness membership which includes access to the pool and health club is available for an additional \$40 per month. Residents will also have the option to participate in dining programs, housekeeping, home health care and livery service for additional fees, which will be the same for the affordable units as the market rate units. This fee schedule is currently under development.

Tenants are responsible for cable services as well as private insurance for damage to their furniture, furnishings and other personal property. The Apartments will be responsible for water, sewer, trash collection, and for providing 24/7 security and emergency call services.

Waiting List process description:

1. The household income will be verified and compared to the income limits. The applicant household is required to be at or less than the 80% Area Median Income limits for the Boston Metropolitan Statistical Area as published by HUD. This includes all income prior to any deductions from all adult household members. Income and assets are determined using the method as in the HUD Section 8 program, defined at 24 CFR 5.609. The applicant must demonstrate sufficient income to support the rent (40% of gross income), and not be over the income limits below for the size of household. The 2012 household income limits are: Household of 1 - \$ 45,500, Household of 2 - \$ 52,000, Household of 3 - \$ 58,500.
2. There is no household asset maximum limit. However, income from household assets is counted towards the household income, imputed at 2% of the asset value if actual income from the asset is not available. Assets include but are not limited to all cash, savings and checking accounts, checking accounts, certificates of deposit, bonds, stocks, retirement accounts, value of real estate holdings and other capital investments. Include the value of the asset, with a deduction for the reasonable cost of selling the asset. The value of necessary personal property (furniture, vehicles) is excluded from asset values.
3. Applicants must sell their home before being eligible to lease at the Groves. These applicants can seek conditional eligibility to be placed on the waiting list.
4. There is an age restriction on these units, where at least one member of the household to be aged 62 or older, and no person under 19 years of age shall be allowed permanent residence.
5. Once the Lottery Agent has verified the information contained in the application and confirmed eligibility, eligible applicants will be added to the waiting list in approved order. This waiting list order will be waived only for applicants with a documented need for wheelchair accessibility. That is, if a household member requires mobility accommodation, that household is given priority over other households on the list.
6. Once a unit becomes available, all persons on the waiting list will be notified and given 10 days to respond. The household may need to be recertified if the information on file is older than 9 months, or if conditional eligibility requirements must be satisfied first. The top ranked eligible household may then complete a lease agreement with the Groves on a timely basis.
7. If an eligible household declines to move forward to lease, they will be moved to the bottom of the list. Ineligible households that do not meet the income limits or do not have sufficient income to support the rent (40% of gross income) will not be maintained on the waiting list. Households that are income eligible, but are conditionally eligible due to their ownership in a residential property will be retained on the waiting list.
8. Annually, the tenant must recertify their eligibility with the Lottery Agent before a lease can be renewed. Tenants must continue to be eligible under the Program Guidelines to continue to lease an affordable unit. If the tenant's income exceeds 140 % of the Maximum Income at the time of annual eligibility determination, his/her unit shall be deemed a Low and Moderate Income Unit until the next available unit with the same or greater number of bedrooms which is not a Low and Moderate Income Unit is rented to an Eligible Tenant, at which time the tenant will be charged market rate rent to stay in the unit.
9. Rents may be increased annually, only after approval from DHCD and the Town.

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AFFORDABLE HOUSING APPLICATION

Applicant Legal Name _____ Phone Number _____ E-mail _____

Address _____ City _____ State/Zip _____

Co-Applicant Legal Name _____ Phone Number _____ E-mail _____

Address _____ City _____ State/Zip _____

I learned of this lottery from (check all that applies):

Website: _____ Letter: _____

Advertisement: _____ Other: _____

THIS APPLICATION IS NOT COMPLETE IF NOT SUBMITTED WITH:

- _____ Completed application signed by all individuals over the age of 18
- _____ Copy of 2009 and 2010 Federal tax returns, as filed, with 2011 1099's, W-2's and schedules, for every current or future person living in the household over the age of 18
- _____ Copy of last consecutive three months of pay documentation, for all salaried employed household members over 18. Six months of income for hourly and seasonal workers.
- _____ Copy of last consecutive three months statements and documents that indicate the payment amounts from all other sources of income of all members listed on the application, such as alimony and/or child support, Social Security benefits, all types of pensions, employment, Unemployment Compensation, Worker's Compensation, alimony, disability or death benefits and any other form of income – on organization letterhead
- _____ Current statements of all assets showing current value including all bank accounts, investment accounts, cash life insurance policies, retirement accounts. Include copy of last three months of each asset statement - on organization letterhead.
- _____ Documentation regarding current interest in real estate, if applicable, including assessment or broker opinion of value, and mortgage statement.
- _____ No Income Statement, signed and notarized, for any household member over 18 with no source of income, if applicable
- _____ Self Declaration of minority category, if applicable

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Household Information - List all members of your household including yourself

Number of Bedrooms Needed: _____

Names of all Persons to Reside in Dwelling (First Name, Middle Initial, Last Name)	Relation to Head	Age	Date of Birth	Social Security Number	Minority Category * (Optional)
HEAD					
2					
3					
4					

*Minority preference categories include only Native American or Alaskan Native, Black or African American, Asian, Native Hawaiian or Pacific Islander; or other (non-White); and the ethnic classification Hispanic or Latino. Requires a separate self-declaration document.

Accessibility – Does a household member require wheelchair accessibility? Yes () No ()

Property - Do you own or have an interest in any real estate, land and/or mobile home? Yes () No ()

Address: _____ Current Value: _____

If yes, please include a copy of current assessment and mortgage statement (if any).

Have you sold real estate or other property in the past three years? Yes () No () If yes, attach settlement statement

When: _____ Address: _____

Sales Price: _____

Is one member of your household a full time student? Yes () No () If yes, attach school registration

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Income - List all income of all members over the age of 18 listed on application to reside in the unit, such as wages, child support, Social Security benefits, all types of pensions, employment, Unemployment Compensation, Workman's Compensation, alimony, disability or death benefits and any other form of income; including rental income from property. Adults with no income are required to submit a notarized statement. If additional space is needed, please attach another sheet.

#	Source of Income	Address/Phone# of Source	Amount per Year
1			
2			
3			
4			
TOTAL			

Assets - List all checking, savings accounts, CD's, stocks, bonds, retirement accounts, savings bonds and any other investments below. If additional space is needed, please attach another sheet. Household assets do not include necessary personal property.

#	Type of Asset	Account No	Value, Balance
1	Checking account		
2	Savings account		
3	Retirement account		
4	Other: _____		
5	Other: _____		
6	Other: _____		
TOTAL			

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APPLICANT(S) CERTIFICATION

I/We certify that our household size is ____ persons, as documented herein.

I/We certify that our total household income equals \$_____, as documented herein.

I/We certify that our household assets equal \$_____, as documented herein.

I understand that eligibility to become a tenant is subject to income limits based on household size and based on income as described in the application. The information in this application and the information provided in attachments will be used to determine income eligibility. I have provided accurate information of current anticipated annual income.

I/We certify that no other income is anticipated and no additional household members are intended to be added to the household.

I certify that, should I be selected in the lottery to become a tenant at The Apartments, my sole domicile, the address where I will reside year round, and the address of my voter registration (if any) will be The Apartments, Lincoln. This housing is not intended for seasonal use.

I/We certify that the information in this application and in support of this application is true and correct to the best of my/our knowledge and belief under full penalty of perjury. I/We understand that false or incomplete information may result in disqualification from further consideration.

I/We certify that I am/we are not related to the Developer of The Apartments, the Lottery Agent, or any party of this project.

I/we understand that it is my/our obligation to pay all utilities directly to the provider except water and sewer.

I/We understand that we must continue to be income eligible on an annual basis. I/We understand that if I/we are selected to lease an apartment, I/we must continue to meet all eligibility requirements of the Lottery Agent. I/We understand that I/we must be qualified and eligible under any and all applicable laws, regulations, guidelines, and any other rules and requirements.

My signature(s) below gives consent to the Lottery Agent or its designee to verify information provided in this application. The applicant agrees to provide additional information on request to verify the accuracy of all statements in this application. No application will be considered complete unless signed and dated by the Applicant/Co-Applicant.

Applicant Signature

Date

Co-Applicant Signature

Date

THIS IS APPLICATION IS ONLY FOR THIS SPECIFIC DEVELOPMENT.