

Preliminary applications are to be completed by applicant(s) when an apartment cannot be assigned and the applicant(s) can be added to the community's waitlist. Preliminary applications with missing information cannot be processed & applicants will not be placed on the waitlist until complete. This preliminary application will contain a Reasonable Accommodation Acknowledgement, HUD-92006 Form (if applicable) and a list of preferences (if any) for this community. For full screening procedures, please contact the management agent at the contact info above.

APPLICANT INFORMATION							
LAST NAME		FIRST NAME		M.I.	SEX (OPTIONAL) MALE <input type="checkbox"/> FEMALE <input type="checkbox"/>	SSN	FULL TIME STUDENT? YES <input type="checkbox"/> NO <input type="checkbox"/>
BIRTH DATE	HOME PHONE ()		WORK PHONE ()		EMAIL		
STREET ADDRESS			APARTMENT #	CITY	STATE	ZIP	
TOTAL GROSS ANNUAL HOUSEHOLD INCOME FROM ALL SOURCES/APPLICANTS \$		DESIRED MOVE IN DATE		NUMBER OF BEDROOMS REQUESTED (check all that apply) <input type="checkbox"/> 0 <input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3		DO YOU HAVE A HOUSING CHOICE VOUCHER? YES <input type="checkbox"/> NO <input type="checkbox"/>	
IS AN ACCESSIBLE UNIT NEEDED? YES <input type="checkbox"/> NO <input type="checkbox"/> IF YES, PLEASE SPECIFY: HEARING <input type="checkbox"/> VISION <input type="checkbox"/> MOBILITY <input type="checkbox"/> OTHER <input type="checkbox"/>				HOW DID YOU HEAR ABOUT THIS COMMUNITY? ARE YOU HOMELESS? YES <input type="checkbox"/> NO <input type="checkbox"/>			
WHAT IS YOUR PRIMARY LANGUAGE? ENGLISH <input type="checkbox"/> SPANISH <input type="checkbox"/> OTHER <input type="checkbox"/>			IF ENGLISH IS NOT YOUR PRIMARY LANGUAGE, CAN YOU SPEAK OR READ ENGLISH FLUENTLY? YES <input type="checkbox"/> NO <input type="checkbox"/>		DO YOU NEED AN INTERPRETER? YES <input type="checkbox"/> NO <input type="checkbox"/> IF YES, CHECK ONE OR BOTH: SPEAK <input type="checkbox"/> READ <input type="checkbox"/>		
PETS? YES <input type="checkbox"/> NO <input type="checkbox"/>		IF YES, DESCRIBE WEIGHT, BREED AND AGE:			Have you applied to the HACP Waiting List? (Select all that apply) *Rental Assistance units are administered through HACP <input type="checkbox"/> Yes <input type="checkbox"/> No		

ADDITIONAL APPLICANT INFORMATION							
LAST NAME	FIRST NAME	M.I.	RELATIONSHIP TO APPLICANT	BIRTH DATE	SEX (Optional)	SSN	FULL TIME STUDENT? Y/N

EMERGENCY CONTACT			
NAME	ADDRESS	PHONE ()	RELATIONSHIP

BACKGROUND INFORMATION			
HAS ANY MEMBER OF THE HOUSEHOLD EVER:	Filed for bankruptcy? <input type="checkbox"/> Yes <input type="checkbox"/> No		Willfully or intentionally refused to pay rent when due? <input type="checkbox"/> Yes <input type="checkbox"/> No
	Been convicted of a felony? <input type="checkbox"/> Yes <input type="checkbox"/> No		If yes, please provide Type of Offense, County, and State:
Are you, or any member of your household subject to a lifetime sex offender registration requirement in any state? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, which state(s):		If you answered "yes" to any of the questions, please specify the household member name(s):	
Please identify the racial or ethnic group of which you are a member (This is optional): <input type="checkbox"/> Black <input type="checkbox"/> Asian/Pacific Islander <input type="checkbox"/> Native American <input type="checkbox"/> Hispanic <input type="checkbox"/> White <input type="checkbox"/> Other (please specify) _____			

Applicant Certification

- I/We certify that the information given to The Community Builders Inc. on this preliminary application is correct and complete to the best of my/our knowledge.
- I/We understand that if this application is not filled out completely, it will not be accepted.
- I/We understand this is a preliminary application and the information provided does not guarantee housing.
- I/We understand additional information and verifications will be necessary to complete the application process.

Applicant Signature: _____ Date: _____

Management Signature: _____ Date: _____

FOR OFFICE USE Date Received: _____ Time Received: _____

The Community Builders Inc. does not discriminate on the basis of disability status in the admission or access to, or treatment or employment in, its federally assisted programs and activities. The following person has been designated to coordinate compliance with the nondiscrimination requirements contained in the Department of Housing and Urban Development's regulations implementing Section 504 (24 CFR, part 8 dated June 2, 1988): **Melissa Perry, The Community Builders, Inc., 185 Dartmouth Street, Boston, MA, 02116; (857) 221-8600, TTY 711; ReasonableAccommodations@tcbinc.org.**



REASONABLE ACCOMMODATION POLICY

If you have a disability and as a result of your disability you need:

- a change in the rules or policies of how we do things that would give you an equal chance to reside within the leased premises and use the facilities or take part in programs on site; or
- a change or repair in your apartment or a special type of apartment that would give you an equal chance to reside within the leased premises and use the facilities or take part in programs on site; or
- a change or repair to some other part of the housing site that would give you an equal chance to reside within the leased premises and use the facilities or take part in programs on site; or
- a change in the way we communicate with you or give you information.

You may request this kind of change which is called a **REASONABLE ACCOMMODATION**

- If you can document that you have a disability and if your request is reasonable (which means not pose an undue financial or administrative burden) we will try to make the change request.
- We will give you an answer within 30 days of our receiving any necessary verification unless there is a problem getting the information we need or unless you agree to a longer time. We will let you know if we need more information or verification from you or if we would like to talk to you about other ways to meet your needs.
- If we deny your request, we will explain the reasons and you can give us more information if you think that will help. If you need assistance filling out a **REASONABLE ACCOMMODATION REQUEST FORM** or if you want to give us your request in some other way, we will assist you.

You can obtain a REASONABLE ACCOMMODATION FORM at the Management Office.

NOTE: all information you provide will be kept confidential and be used only to help assure you have an equal opportunity to enjoy your housing and the common areas.

All Requests are submitted to:

REASONABLE ACCOMMODATION COMMITTEE
THE COMMUNITY BUILDERS, INC.
185 DARTMOUTH STREET
BOSTON, MA 02116

MANAGING AGENT FOR: _____

I acknowledge have read and understand the Reasonable Accommodation Policy. Should there be multiple members of the household, notice of this policy to me, the Primary Applicant, is constructive notice to the entire household.

Primary Applicant's Signature

Date

The Community Builders Inc. does not discriminate on the basis of disability status in the admission or access to, or treatment or employment in, its federally assisted programs and activities. The following person has been designated to coordinate compliance with the nondiscrimination requirements contained in the Department of Housing and Urban Development's regulations implementing Section 504 (24 CFR, part 8 dated June 2, 1988): Melissa Perry, The Community Builders, Inc., 185 Dartmouth Street, Boston, MA, 02116; (857) 221-8600, TTY 711; ReasonableAccommodations@tcbinc.org.



REQUEST FOR A REASONABLE ACCOMMODATION FORM

Name: _____ Phone: _____

Address: _____

1. As a result of his/her disability the following change or changes is requested so that (the person listed) can live here as easily or successfully as the other residents. Check the kind of change(s) you need.

Permission for a Personal Care Attendant to be a regular visitor to my apartment.
Name the person or people who are your Personal Care Attendants:

An additional bedroom for a Live-In Aide or Personal Care Attendant to live in my apartment.
Name the person or people who are your Live-In Aides or Personal Care Attendants:

A physical or structural change in my apartment or other part of the housing complex.
(Describe)

A change in the following rule, policy or procedure. (Note: You may ask for changes in how you meet the terms of the lease, but everyone must continue to meet the terms of the lease.)

2. I need this reasonable accommodation because of my disability so that I can:

3. You may verify that I have a disability and my need for this request by contacting:

Name: _____

Address: _____

Phone: _____

4. If you asked for a change to your apartment or to the housing complex, please use this space to list any company or organization that might help us locate or build anything special that you need. (If you don't know of any, we will try to get this information ourselves.)

I give you permission to contact the above individual for purposes of verifying that I or a family member has a disability and needs the reasonable accommodation requested above. I understand that the information you obtain will be kept confidential and used solely to determine if you will provide an accommodation.

Signed: _____

Date: _____





Rental Criteria for Affordable Housing

Welcome to Gladstone Residences, an affordable housing community managed by The Community Builders, Inc. Outlined below is an overview of the requirements for applicants to qualify for the affordable housing program(s) at this community. Additional information can be found in the property's Tenant Selection Plan, available for review in the management office.

The Community Builders, Inc. is an equal housing opportunity provider. All visitors must present a valid driver's license or other government issued photo identification in order to view the community. Examples of acceptable forms of identification are (but are not limited to): Valid state issued ID card, valid Military ID card, a valid Passport or a US Immigration and Naturalization Services Issued Visa. A copy of all applicants' (18 years of age and older) government issued photo ID's will be made and retained at time of move-in. All applications for apartments: 1) will be accepted on a first come-first served basis; 2) are subject to the availability of the apartment type/size requested; 3) will be approved based on the rental criteria established for the community and program(s). Security Deposits and Pet Fees/Deposits (where applicable) are required. Rental applications are to be completed entirely. **Any omissions or falsifications may result in rejection of an application or termination of lease.**

Application Fee: N/A	When Due:
Pet Fee: N/A	When Due:
Pet Deposit: TBD	When Due: At pet registration
Holding Fee: N/A	When Due:
Security Deposit: One month deposit	When Due: At Lease Signing
Other Fee: N/A	When Due:

Other Application Information (If Applicable): All income restrictions and leasing information can be found on the website: www.GladstoneResidences.com

Preferences (If Applicable): Gladstone Residences does not have any preferences besides persons in need of an accessible unit.

Lottery Information (If Applicable): N/A

Income Restricted: Visit www.GladstoneResidences.com/affordableinformation

As a mixed-income community, Gladstone Residences is designed to facilitate the housing needs for varied-income families. For those homes deemed affordable, residence at this community requires that applicants meet certain qualifying standards established by the federal and/or state affordable housing program(s) at this community and The Community Builders, Inc. For these select affordable homes, applicant household's gross yearly income must not exceed the following, by household size:

20 % AMI	1 person	\$XX,XXX	4 persons	\$XX,XXX	50 % AMI	1 person	\$XX,XXX	4 persons	\$XX,XXX
	2 persons	\$XX,XXX	5 persons	\$XX,XXX		2 persons	\$XX,XXX	5 persons	\$XX,XXX
	3 persons	\$XX,XXX	6 persons	\$XX,XXX		3 persons	\$XX,XXX	6 persons	\$XX,XXX
30% AMI	1 person	\$\$XX,XXX	4 persons	\$XX,XXX	60 % AMI	1 persons	\$XX,XXX	4 persons	\$XX,XXX
	2 persons	\$XX,XXX	5 persons	\$XX,XXX		2 persons	\$XX,XXX	5 persons	\$XX,XXX
	3 persons	\$XX,XXX	6 persons	\$XX,XXX		3 persons	\$XX,XXX	6 persons	\$XX,XXX

****When calculating your total annual household income from all sources on your application, be sure to count all income from sources including, but not limited to, earned income for all adults such as W2, 1099, Salary, Self-Employment. Also include unearned income for all household members, including minors, such as Social Security, Supplemental Social Security, Pension/Retirement, Annuity, Unemployment, Worker's Compensation, TAFDC/Welfare Assistance, Child Support, Alimony and assets .**

*There are no maximum income requirement for our market rate homes.

Please Note: Applicants who are not approved due to credit history will be notified in writing pursuant to the Fair Credit Reporting Act, 15 U.S.C. Sec. 1681 et. seq.

Rental Eligibility Criteria:

All applicants must comply with the following prior to occupancy:

- * Applicants must be of legal age (18 years or legally emancipated) and each applicant must complete an application and meet all rental criteria
- * Applicant household's combined, gross monthly income must be a minimum of at least 2 times the monthly rent (rents are available on our website, and are subject to change, daily). **Note:** This does not apply to household's that will be receiving site-based (ex. Section 8 or PRAC) or tenant-based (ex. Housing Choice Voucher) rental assistance for this apartment.
- * Rental history may be verified for present and previous residences from applicant household's landlords for the last five (5) years or from the last two successive tenancies, whichever is more inclusive. Applicants may not be rejected for lack of rental history, but may be rejected for unsatisfactory rental history. Any applicant who has been evicted for nonpayment of rent, damages, or material noncompliance will not be accepted. Any applicant who owes past due funds to a previous landlord will be rejected until all funds that are past due have been paid in full.
- * Applicant household's income and assets must be verified. Management will make necessary efforts to obtain third party verification of income and assets. In some instances, management may require an applicant to provide additional information such as pay stubs, benefit letters, notarized contribution letters, etc. Applicants can not be proven eligible for housing until all household income and assets have been completely identified and verified.
- * An unsatisfactory credit report can disqualify an applicant from renting an apartment at this community. Management uses a third-party screening company to retrieve credit reports for all applicant household members who are 18 years of age or older. The credit report must demonstrate that the applicant(s) has/have paid financial obligations, as agreed. Greater weight is applied to activity reported over the most recent 24-month period. Management does not consider medical bills, medical expenses, student loans or foreclosures when reviewing credit history. Management will not consider a discharged bankruptcy (Chapter 7 or 13) that has been dismissed more than six (6) months prior to the date of application for housing. Management's inability to verify credit references is also a basis for rejecting an application. However, consideration will be given to special circumstances in which credit has not been established (income, age, marital status, etc.) and the lack of credit history alone will not cause an application to be rejected.
- * Applicant must not have more than two persons residing in an efficiency or one-bedroom apartment, not more than four persons in a two-bedroom apartment, not more than six in a three-bedroom apartment, not more than eight in a four-bedroom apartment and not more than ten in a five-bedroom apartment unless local or state housing occupancy codes dictate otherwise.
- * Applicant household must meet the affordable housing program(s) applicable student rule(s) requirements to obtain housing at this community.
- * Applicants understand that they will not be able to occupy or take possession of an apartment until all supporting paperwork is complete and signed by all parties. All approved applicants are required to execute the lease agreement. In addition, all security deposits must be paid in full prior to move-in.

Management will give consideration to extenuating circumstances as presented by the applicant household.

Management will obtain a criminal background screening report for all adult household members 18 years of age or older. Applicants may be rejected when Management has a reasonable basis to believe that the applicant cannot meet the essential requirements. The requirements include: not to engage in any activity that involves physical danger or violence to persons or property or adversely affect the health, safety and welfare of residents, staff, vendors, service providers and/or owner; and not to engage in activity on or near the premises that involves illegal use of controlled substances or weapons; and any criminal activity on or off the premises that would be detrimental to the housing should it occur on the premises. Management will not consider an arrest or charge that was resolved without conviction. In addition, Management will not consider expunged or sealed convictions. Management may deny admission if an applicant has pending charges as time of application. Reasons for application rejection include:

- * Any household member who is subject to any state lifetime sex offender registration requirement. If the Management determines that a registered sex offender is part of the household, the Management may allow the household to remove the sex offender from the application
- * Any household in which any member was evicted in the last three (3) years from federally assisted housing for drug related criminal activity, unless such member of the Applicant Household has successfully completed a rehabilitation program approved by the Owner.
- * The application for tenancy will be rejected if Management determines that any member of the Applicant Household has been convicted of felonious crimes or any similar offense for manufacture of any controlled substance or new drug.
- * A household in which any member is currently engaged in illegal use of drugs or for which the Management has reasonable cause to believe that a member's illegal use or pattern of illegal use of a drug may interfere with the health, safety, and right to peaceful enjoyment of the property by other residents. Current use will be indicated and investigated if there is a record of arrest or conviction within the last seven (7) years. Please Note: Marijuana is a controlled substance under federal law. Owners of federally assisted housing are required by The Quality Housing & Work Responsibility Act of 1998 (QHWRA), 42 U.S.C. Section 13662 to deny admission to any household with a member who the owner determines is, at the time of application for admission, illegally using a controlled substance, including Marijuana.
- * Any household in which any member presents a reasonable cause to believe that member's behavior, from abuse or pattern of abuse of alcohol, may interfere with the health, safety, and right to peaceful enjoyment by other residents. The screening standards are based on behavior, not the condition of alcoholism or alcohol abuse.
- * The application for tenancy will be rejected if Management determines that any member of the Applicant Household has ever been convicted for murder, rape or similar sex-related crime, sexual intercourse with a minor or any similar offense.
- * Any member of the Applicant Household has, within the seven (7) years preceding the date the Applicant Household would be selected for admission, engaged in any criminal activity that, if repeated, would adversely affect the health, safety, or right to peaceful enjoyment of property of the residents of the Development, Management employees, or persons residing in the immediate vicinity of the Development.
- * Any member of the Applicant Household has been convicted of any of the following felonious crimes or any similar offense within the previous seven (7) years (including but not limited to): assault/battery, crimes against children, domestic crime, harassment, kidnapping, robbery, weapons, arson, burglary, property damage, petit theft, larceny, trespassing, alcohol related, oui/dui/dwi, disturbance to peace, drug possession, embezzlement, fraud, obstruction of the law, conspiracy/organized crime and traffic violations.
- * Any member of the Applicant Household has been convicted of any of the aforementioned crimes or any similar offense categorized as a misdemeanor within the previous three (3) years.

If Management is unable to complete required criminal or sex offender screening due to the applicant's failure to provide required information or release forms, the application will be rejected. If a resident or applicant has requested VAWA protections and such protections have been justified based on Management investigation, the abuser/perpetrator will not be approved to live on the property. If the applicant's criminal conviction was related to his or her disability, Management will consider a reasonable accommodation.

Criminal Screening Discoveries

If the criminal background investigation results indicate that the applicant does not meet the criminal screening criteria, Management will reject the applicant in accordance with HUD guidance and Management's standards for applicant rejection. In appeal, an applicant may provide mitigating documentation to aid Management in a re-assessment of the application.

Denial of Application

Should the applicant be rejected, Management will send a written notice of ineligibility to the applicant stating the specific reason(s) for denial and advise the applicant of their appeal rights and their rights to request a reasonable accommodation, if applicable. The applicant will also be provided information about how to obtain a copy of the information from the reporting agency. The written notice will be accompanied by the Notice of Occupancy Rights Under the Violence Against Women Act (5380) and the corresponding Certification of Domestic Violence, Dating Violence, Sexual Assault, or Stalking, and Alternate Document (5382). Any otherwise eligible applicant household with a history of unsatisfactory conduct who claims that such conduct was due to or related to a Disability within the meaning of Section 504 of the Rehabilitation Act of 1973 ("Section 504") is entitled to request a review for eligibility for a "reasonable accommodation" under Section 504 and related acts.

Privacy Policy for Personal Information of Rental Applicant and Residents – We are dedicated to protecting the privacy of your personal information, including your Social Security Numbers and other identifying or sensitive personal information. Our policy and procedures are designed to help ensure that your information is kept secure, and we work to follow all federal and state laws regarding the protection of your personal information. While no one can guarantee against identity theft or the misuse of personal information, protecting the information you provide us is a high priority to our company and staff. If you have concerns about this issue, please feel free to share them with us.

How Personal Information is collected: You will be asked to furnish some personal information when you apply to rent from us. This information will be on the rental application form or other document(s) that you provide to us, either on paper or electronically.

How and When Information is used: We use this information for our business purposes only as it relates to leasing a dwelling to you. Examples of these uses included but are not limited to, verifying statements made on your rental application (such as your rental, credit and employment history), reviewing your lease for renewal and enforcing your lease obligations (such as to obtain payment for money you may owe us in the future).

How the Information is protected and who has access: We allow only authorized persons to have access to your personal information, and we keep documents and electronic records containing this information in secure areas and systems.

How the Information is disposed of: After we no longer need or are required to keep your personal information, we will store or destroy it in a manner designed to prevent unauthorized persons from accessing it. Our disposal methods will include shredding, pulverizing, destruction or obliteration of paper documents and destruction of electronic files.

I understand and accept these qualifying standards and have truthfully answered all questions. I understand that falsification of rental application information will lead to denial of housing. Rental Criteria for Affordable Housing does not constitute a guarantee or representation that residents or occupants currently residing in the community have not been convicted or are not subject to deferred adjudication for felony. Management's ability to verify this information is limited to the information made available by the agencies and services used. It does not insure that all individuals reside in, on or visiting the community conforms to these guidelines.

_____	_____	_____	_____
Applicant Signature	Date	Management Representative	Date
_____	_____		
Applicant Signature	Date		
_____	_____		
Applicant Signature	Date		
_____	_____		
Applicant Signature	Date		

Discrimination is Against the Law

It is illegal to discriminate against any person because of race, color, religion, sex, handicap, familial status or national origin. The Community Builders, Inc. does not discriminate on the basis of any protected status, as defined and prohibited by local, state or federal law, in the admission of or access to housing its programs and activities.

- * Provides free aids and services to people with disabilities to communicate effectively with us, such as:
 - Qualified sign language interpreters
 - Written information in other formats (large print, audio, accessible electronic formats, other formats)
- * Provides free language services to people with limited English-proficiency, such as:
 - Qualified interpreters
 - Information written in other languages

If you need these services, please contact the Community Manager at (412) 770-1117 or TTY: 711.

If you believe our community has failed to provide these services or discriminated in another way on the basis of race, color, religion, sex, handicap, familial status or national origin or any other local or state protected class, you can file a grievance with The Community Builders, Inc. by contacting Melissa Perry at 857-221-8761 or via TTY 711 or submit a written request to The Community Builders, Inc., 185 Dartmouth Street, Boston, MA 02116 or via fax at (617) 502-8136.

Gladstone Residences and The Community Builders, Inc. complies with Section 504 of the Rehabilitation Act of 1973 which prohibits discrimination, based on the presence of a disability in all programs or activities operated by recipients of federal financial assistance. In accordance with the Fair Housing Act and Section 504 of the Rehabilitation Act, will make reasonable accommodations or modifications for individuals with disabilities (applicants or residents) unless these modifications would change the fundamental nature of the housing program or result in undue financial and administrative burden. The Community Builders, Inc. has designated a person to address questions or requests regarding the specific needs of residents and applicants with disabilities. This person is referred to as the Section 504 Coordinator. For more information please contact: Melissa Perry, Section 504 Coordinator at 857-221-8761 or via TTY 711 or submit a written request to The Community Builders, Inc., 185 Dartmouth Street, Boston, MA 02116 or via fax at (617) 502-8136.

ATTENTION: Please contact the management office if you need help understanding this document.

- Spanish:
 - Contacte por favor la oficina de gestión si usted necesita ayuda a comprender este documento.
- Portuguese:
 - Por favor contate o escritório de gerência se deve ajudar entendimento este documento.
- French:
 - Si vous avez besoin d'aide à la compréhension de ce document, veuillez communiquer avec le Bureau de gestion.
- Haitian Creole:
 - Souple kontakte Biwo jesyon a si w bezwen èd pou konprann dokiman sa a.
- Vietnamese:
 - Xin liên lạc với văn phòng điều hành nếu bạn cần giúp đỡ sự hiểu biết tài liệu này.
- Russian:
 - Пожалуйста свяжитесь с офисом управления, если Вам нужна помощь в понимании этого документа.
- German:
 - Bitte kontaktieren Sie das Leitungsbüro, wenn Sie helfen müssen, dieses Dokument zu verstehen.
- Chinese:
 - 請聯絡管理辦公室, 如果你需要幫助理解這份文件。
- Japanese:
 - もしこの文書を理解しているための助けを必要とすれば、経営オフィスと連絡を取ってください。