



A SENIOR LIVING COMMUNITY
MANAGED BY NORTHBRIDGE COMPANIES

***Stone Hill at Andover Assisted Living
Andover, MA***

Attached is the information regarding the affordable 55+ assisted living units at Stone Hill at Andover, Massachusetts. Potential Residents will not be discriminated against on the basis of race, color, national origin, disability, age, ancestry, children, familial status, genetic information, marital status, public assistance reciprocity, religion, sex, sexual orientation, gender identity, veteran/military status, or any other basis prohibited by law.

Located at Stone Hill at Andover, 141 Elm Street, Andover, 14 assisted living units are available on a first come first serve basis, for eligible 55+ applicants. All units are companion units; however, exceptions may be made for qualified couples. Companion units include a private bedroom. They share with one other person a bathroom, living room and kitchen. This is a smoke-free building.

The monthly rents are as follows:

Income	One Person	Two Person
Up to 60%	\$ 3,506	\$ 4,005
60% - 80%	\$ 4,908	\$ 5,607
80% - 100%	\$ 6,311	\$ 7,210

****Applicants must have funds, between income and assets, to cover two years of rent at time of application.**

The Monthly Rent covers your occupancy of the Unit, 24-hour awake on-site staffing and a personal emergency response system, housekeeping, three meals per day, activities, and the basic services package as outlined below:

1. Assistance with the activities of daily living up to forty-five (45) minutes per day which include supervision of and assistance with bathing, dressing, grooming, ambulation, eating, toileting and other similar tasks as needed.
2. Housekeeping one time per week. Housekeeping includes cleaning and sanitizing both the kitchen and bathroom, dusting of cleared surfaces and vacuuming.
3. Sheets and towels will be laundered one time per week.
4. Residents have the option of participating in the activities and recreational opportunities provided by The Community. Activities and recreation at The Community include activities that are planned and staffed by members of The Community staff and usually include all necessary supplies. Such activities/recreation include, but are not limited to, exercise classes, arts and crafts, games and entertainment. At times, optional activities may be offered that have a separate charge, such as trips and restaurant outings.



The monthly rent includes all electricity and other utilities (exclusive of telephone, cable television). The affordable units are available on a first come first serve basis as outlined in the attached package. Please review the enclosed information packet in detail and complete the application and disclosure statement at the rear of the packet.

The monthly rent is NOT subsidized. You are responsible for the full monthly rent.

In addition to the monthly rent, residents are required to pay a one-time community fee of \$2,500 upon residency agreement signing.

Please note: Complete financial documentation is required. Included in this package is the list of required documentation and additional forms, if applicable, to be sent in with your application.

Thank you for your interest in affordable housing at **Stone Hill at Andover**. We wish you the best of luck. Please contact MCO Housing Services at 978-456-8388 or email us at lotteryinfo@mcohousingservices.com if you have any questions. We encourage you to advise other people or organizations that may be interested in this program and make copies of the relevant information as needed.

Sincerely,



Maureen O'Hagan for Stone Hill at Andover



Este documento es muy importante. Favor de comunicarse con el MCO Housing en 978-456-8388 para ayuda gratis con el idioma. (Spanish)

Este é um documento importante. Entre em contato com o MCO Housing Serv no número 978-456-8388 para obter assistência gratuita com o idioma. (Portuguese)

Dokiman sila a enpòtan. Tanpri kontakte MCO Housing la nan 978-456-8388 pou asistans gratis nan lang. (Haitian Creole)

此文件為重要文件。如果您需要免費的語言翻譯幫助，請聯絡 MCO Housing 聯絡方式： 978-456-8388 。

(Chinese, Traditional)

此文件為重要文件。如果您需要免費的語言翻譯幫助，請聯絡 MCO Housing 聯絡方式： 978-456-8388 。

(Chinese, Simplified)

Это весьма важный документ. Свяжитесь с сотрудником MCO Housing на предмет оказания бесплатной помощи по переводу на иностранный язык (978-456-8388). (Russian)

(Phone #)

នេះគឺជាឯកសារសំខាន់។ សូមទំនាក់ទំនង MCO Housing តាមរយៈ 978-456-8388 ដើម្បីទទួលបានជំនួយ
ផ្នែកភាសាដោយឥតគិតថ្លៃ។ [Mon-Khmer, Cambodian]

Đây là một tài liệu quan trọng. Vui lòng liên hệ MCO Housing tại 978-456-8388 để được hỗ trợ ngôn ngữ miễn phí. (Vietnamese)

Kani waa dukumentiyu muhiim ah. Fadlan MCO Housing kala soo xiriir 978-456-8388 si aad u hesho gargaar xagga luqadda oo bilaash ah. (Somali)

هذه وثيقة مهمة. يرجى الاتصال بـ MCO Housing بـ 978-456-8388 للمساعدة اللغوية المجانية.

[Phone #]

[Agency Name]

(Arabic)

Ce document est très important. Veuillez contacter le MCO Housing au 978-456-8388 afin d'obtenir une assistance linguistique gratuite. (French)

Il presente è un documento importante. Si prega di contattare il MCO Housing al 978-456-8388 per avere assistenza gratuita per la traduzione. (Italian)



Stone Hill at Andover

Question & Answer

What is the process for leasing a unit?

1. All applicants will be screened via a telephone interview with MCO Housing Services (MCO) to determine if they meet the income qualifications.
2. All applicants will then make an appointment at Stone Hill at Andover for an approximate ½ tour and Wellness Check. The wellness check will assess applicants for functional, nutritional, and cognitive needs.
3. Applicants who pass the wellness check will be referred back to MCO to complete an application to determine eligibility.

What are the qualifications required for Prospective Residents? Residents must meet all four criteria as outline below:

1. **Age:** Each household member must be age 55 or over
2. **Income:** Qualify based on the following gross maximum income table, which is adjusted for household size:

2025 Income Limits				
	One Person		Two Person	
AMI	Minimum	Maximum	Minimum	Maximum
Up to 60%	\$ 10,000	\$ 59,400	\$ 10,000	\$ 67,860
60% - 79%	\$ 59,401	\$ 72,950	\$ 67,861	\$ 83,400
80% - 100%	\$ 72,951	\$ 99,000	\$ 83,401	\$ 113,100

3. **Financially Able to Afford Rent:** The applicant must be able to pay for at least two years rent. This will be determined by MCO based on a combination of income and assets at time of application.
4. **Clinically Eligible for assisted living.** Applicants with assisted living needs must be clinically appropriate and will be assessed by Stone Hill at Andover to ensure that the needs of the applicant can be met at Stone Hill at Andover. This determination will be made in the sole and absolute discretion of Stone Hill at Andover.

What if an applicant needs more than 45 minutes of personal care per day?

1. An applicant may be able to access additional personal care for an additional monthly fee. Fee schedule to be provided by Stonehill at Andover. Applicants may be able to demonstrate that they can pay for these additional fees from savings or other assets.

APPLICANT QUALIFICATIONS:

1. Income and Assets:

- a. Household income cannot exceed the above maximum gross allowable income limits.
- b. When assets total \$5,000 or less, the actual income received is included in the annual income as income from assets OR when assets exceed \$5,000, annual income includes the greater of actual income from assets or a .06% imputed income calculation. Assets divested at less than full market value within two years of application will be counted at full market value when determining eligibility.



- c. **Financially Able to Afford Rent:** The applicant must be able to pay for at least two years rent. This will be determined by MCO based on a combination of income and assets at time of application.

2. Age

- a. Each household member must be age 55 or over

3. Clinically Eligible for assisted living:

- a. Applicants with assisted living needs must be clinically appropriate. Need for assistance with daily living includes bathing, dressing, grooming, ambulation, eating and toileting. Applicants will receive an initial wellness check by Stone Hill at Andover to ensure that they have a need for assistance with at least one activity of daily living.
- b. Upon eligibility, the resident will be required to undergo a full six-part examination to determine if the physical, mental and financial needs of the applicant can be met at an affordable unit at Stone Hill at Andover. This determination will be made in the sole and absolute discretion of Stone Hill at Andover. Therefore, being determined eligible for a unit does not guarantee a spot at Stone Hill at Andover.

Are there accessible units?

All the units at Stone Hill at Andover are accessible. All units have walk in showers, grab bars and residents are provided wearable emergency call pendants.

There is one affordable unit that has is fully handicapped accessible with lower counters etc.

Applicants with disabilities may request reasonable accommodations or modifications of the housing, when such accommodations or modifications are necessary to afford the disabled person equal opportunity to use and enjoy the housing. Applicants must request special accommodations at time of application and provide documentation, if needed, i.e. letter from doctor.

What happens if my household income exceeds the income limit?

Annually you will be recertified for eligibility. Once your household income exceeds 140% of the maximum allowable income adjusted for household size, then after the end of your current lease you will have the option of staying in your unit and paying the market rent or not renewing your residency agreement.

Applicant Eligibility

Prior to the time of residency at Stone Hill at Andover, applicants must pass a six-part physical and mental assessment, and pay for the first month's rent, last month's rent and community fee. Upon signing the residency agreement, the applicant is agreeing to abide by the rules of residency agreement and at Stone Hill at Andover. Resident leases have a term of one year. Four months prior to the expiration of the agreement, residents will be notified of their obligation to recertify their income and assets with MCO Housing Services. Failure to do so will result in the loss of the affordability eligibility causing the tenant to move to another unit and pay full market resident fees or vacate the premises.



Stone Hill at Andover

For Office Use Only:

Date Appl. Rcvd: _____

Household Size: _____

First Come First Serve Application

PERSONAL INFORMATION:

Date: _____

Name: _____

Address: _____ City: _____ Zip: _____

Home Telephone: _____ Work Telephone: _____ Cell: _____

Email: _____

Do you currently own a home? ____ Yes ____ No

Are you disabled? ____ Yes ____ No

The total household size is _____ (This is very important to determine the maximum allowable income for your household.)

Household Composition (including applicant(s))

Name _____ Relationship _____ Age _____

Name _____ Relationship _____ Age _____

FINANCIAL WORKSHEET: (Include all Household Income, which includes gross wages, retirement income (if drawing on it for income), business income, veterans' benefits, alimony/child support, unemployment compensation, social security, pension/disability income, supplemental second income and dividend income.)

Residents Monthly Base Income (Gross) _____

Co-Residents Monthly Base Income (Gross) _____

Other Income, specify _____

Other Income, specify _____

TOTAL HOUSEHOLD MONTHLY INCOME: _____**Household Assets:** (This is a partial list of required assets. Complete all that apply with current account balances)

Checking _____

Savings _____

Stocks, Bonds, Treasury Bills, CD or _____

Money Market Accounts and Mutual Funds _____



Individual Retirement, 401K and Keogh accounts _____
Retirement or Pension Funds (amt you can w/d w/o penalty) _____
Revocable trusts _____
Equity in rental property or other capital investments _____
Cash value of whole life or universal life insurance policies _____

TOTAL ASSETS _____

EMPLOYMENT STATUS: (include for all working household members. Attach separate sheet, if necessary.)

Employer: _____
Street Address: _____
City/State/Zip: _____
Date of Hire (Approximate): _____
Annual Wage - Base: _____
Additional: _____ (Bonus, Commission, Overtime, etc.)

ABOUT YOUR HOUSEHOLD: (OPTIONAL)

You are requested to fill out the following section in order to assist us in fulfilling affirmative action requirements. Please be advised that you should fill this out based upon family members that will be living in the apartment/unit. Please check the appropriate categories: *This section is Optional.*

	Applicant	Co-Applicant
Non-Minority	_____	_____
Black or African American	_____	_____
Hispanic or Latino	_____	_____
Asian	_____	_____
Native American or Alaskan Native	_____	_____
Native Hawaiian or Pacific Islander	_____	_____

SIGNATURES:

The undersigned warrants and represents that all statements herein are true. It is understood that the sole use of this application is to establish the preliminary requirements to have an opportunity to lease an affordable unit at Stone Hill at Andover. I (we) understand if selected all information provided shall be verified for accuracy at the time of lease.

Signature _____ Date: _____
Applicant(s)

Signature _____ Date: _____
Co-Applicant(s)



Return with signed Affidavit & Disclosure Form, complete financial documentation and Release of Information by mail, fax or email to:

MCO Housing Services
P.O. Box 372
Harvard, MA 01451
Email: lotteryinfo@mcohousingservices.com
978-456-8388
FAX: 978-456-8986



Affidavit & Disclosure Form

I/We understand and agree to the following conditions and guidelines regarding the distribution of the affordable units at Stone Hill at Andover assisted living:

1. All members of our household are over 55.
2. All members of our household have at least one need for assistance with activities of daily living.
3. The gross annual household income for my family does not exceed the allowable limits as follows:

2025 Income Limits				
	One Person		Two Person	
AMI	Minimum	Maximum	Minimum	Maximum
Up to 60%	\$ 10,000	\$ 59,400	\$ 10,000	\$ 67,860
60% - 79%	\$ 59,401	\$ 72,950	\$ 67,861	\$ 83,400
80% - 100%	\$ 72,951	\$ 99,000	\$ 83,401	\$ 113,100

Income from all family members must be included.

4. I/We understand we must have the funds, between income and assets, to cover two years of rent at time of application.
5. I/We understand the calculation of income will include the higher of actual income from assets (if over \$5,000) or an imputation of .06% of the value of total household assets which is added to a household's income in determining eligibility. The interest /dividends earned for assets \$5,000 or under will be added to income in determining eligibility. Assets divested at less than full market value within two years of application will be counted at full market value in determining eligibility.
6. The household size listed on the application form includes only and all the people that will be living in the residence.
7. I/We certify all data supplied on the application is true and accurate to the best of my/our knowledge and belief under full penalty of perjury. I/We understand that providing false information will result in disqualification from further consideration.
8. I/We understand that by being selected it does not guarantee that I/we will be able to lease a unit. I/We understand that all application data will be verified, and additional financial information may be required, verified and reviewed in detail prior to leasing a unit. I/We also understand that the Project's Owner will also perform its own screening to determine our eligibility to lease.
9. I/We understand that if selected I/we may be offered a specific unit. I/We will have the option to accept the available unit, or to reject the available unit. If I/we reject the available unit I/we will move to the bottom of the waiting list and will likely not have another opportunity to reside in an affordable unit at Stone Hill at Andover.
10. Program requirements are established by the Town of Andover and the Andover Community Trust, Inc. I/We agree to be bound by whatever program changes that may be imposed at any time throughout the process. If any program conflicts arise, regarding your financial eligibility, I/we agree that any determination made by Andover Community Trust, Inc. and the Town of Andover is final. Stone Hill at



Andover as the sole and absolute discretion to determine final eligibility based on physical, mental and financial needs of the applicant.

11. I/We certify that no member of our family has a financial interest in Stone Hill at Andover.
12. I/We understand there may be differences between the market and affordable units and accept those differences.
13. I/We understand that if my/our total income exceeds 140% of the maximum allowable income at the time of annual eligibility determination, after the end of my then current residency term, I will no longer be eligible for the affordable monthly fees and have the option of moving out or paying market monthly fees.

I/We have completed an application and have reviewed and understand the process that will be utilized to distribute the available units at Stone Hill at Andover. I/We am qualified based upon the program guidelines and agree to comply with applicable regulations.

_____ Applicant	_____ Co-Applicant	_____ Date
--------------------	-----------------------	---------------

Return with completed and signed Application, Affidavit and Disclosure Form, Required Personal Identification and Income Verification Document Form and ALL required financial documentation to:

MCO Housing Services
P.O. Box 372
Harvard, MA 01451
Email: lotteryinfo@mcohousingservices.com
978-456-8388
FAX: 978-456-8986



Stone Hill at Andover

Release of Information Authorization Form

Date: _____

I/We hereby authorize MCO Housing Services, Stone Hill at Andover Assisted Livings business office, or any of its assignees to verify any and all income, assets and other financial information, to verify any and all household, resident location and workplace information and directs any employer, landlord or financial institution to release any information to MCO Housing Services, Stone Hill at Andover, or any of its assignees and consequently the Projects Administrator, for the purpose of determining income eligibility for Stone Hill at Andover.

A photocopy of this authorization with my signature may be deemed to be used as a duplicate original.

Applicant Name (Please Print)

Applicant Name (Please Print)

Applicant Signature

Applicant Signature

Mailing Address

Return with completed and signed Application, Affidavit and Disclosure Form, Required Personal Identification and Income Verification Document Form and ALL required financial documentation to:

MCO Housing Services
P.O. Box 372
Harvard, MA 01451
Email: lotteryinfo@mcohousingservices.com
978-456-8388
FAX: 978-456-8986



**Required Personal Identification and Income Verification Documents
TO BE RETURNED WITH APPLICATION**

Provide one copy of all applicable information. Complete financial documentation is required and must be sent with your application

Initial each that are applicable, and provide the documents, or write N/A if not applicable and return this sheet with your application.

1. _____ Proof of Age: Birth Certificate, drivers license etc.
2. _____ If you require a Special Accommodation you must request as part of your application and if documentation is required, i.e. doctors letter, it MUST be included with the application.
3. _____ Federal Tax Returns –2024 (NO STATE TAX RETURNS)
 - **NOTE:** Provide all pages that are submitted to the IRS. For example, if a Schedule C is submitted to the IRS and not part of your application, your application will be considered incomplete.
 - **NOTE:** If you filed but do not have copies of your Federal Income Tax returns, you can obtain a copy of your transcripts using form 4506-T that you can obtain at [irs.gov](https://www.irs.gov).
 - **NOTE:** If you have not filed tax returns you must provide a letter from the IRS verify non-filing of your tax return(s). Request using form 4506-T that you can obtain at [irs.gov](https://www.irs.gov).
4. _____ W2 and/or 1099-R Forms: 2024
5. _____ The most recent last five (5) **consecutive** pay stubs for all jobs (check/direct deposit stubs). For unemployment, copies of unemployment checks or DOR verification stating benefits received. Same for disability compensation, worker's compensation and/or severance pay.
 - **NOTE:** If you have obtained a new job within the last 12 months you must provide a copy of the Employment Offer Letter.
 - **NOTE:** If you are no longer working for an employer you worked for last year, you must provide a letter from the employer with your separation date.
 - **NOTE:** You need to provide 5 pay stubs whether you are paid weekly, bi-weekly or monthly.
6. _____ Benefit letter providing full amount of periodic amounts received from Social Security, annuities, insurance policies, retirement funds, pensions, disability or death benefits and other similar types of periodic receipts.
7. _____ Child support and alimony: court document indicating the payment amount, DOR statement or copy of your divorce papers. If you do not receive child support provide a letter stating, that you are not receiving child support our use the attached form.
8. _____ Interest, dividends and other net income of any kind from real or personal property.



9. Asset Statement(s): provide **current** statements of all that apply, unless otherwise noted:
- _____ Checking accounts – Last **three (3)** months of statements – EVERY PAGE – FRONT AND BACK.

NOTE: If you have cash deposits or non-payroll or income deposits you **MUST** identify where the funds have come from. If you fail to explain they will be counted as income, which may put you over the income limit.
NOTE: Do **NOT** provide a running transaction list of activity. You must provide individual statements. You can obtain e-statements on your bank's website.
 - _____ Pre-paid debit card statements – current month.
NOTE: This is NOT your ATM/Debit card. This is usually a separate debit card statement showing income deposited directing onto the debit card, i.e. Social Security or other regular income.
NOTE: If Social Security payments are deposited on a Direct Express card, it is your responsibility to provide proof. You can print a statement from the Direct Express website at <https://www.usdirectexpress.com/>.
 - _____ Saving accounts – last three months of full statements
 - _____ Revocable trusts
 - _____ Equity in rental property or other capital investments
 - _____ Investment accounts, including stocks, bonds, Treasury Bills, Certificates of Deposit, Mutual Funds and Money Market Accounts including all individual retirement accounts, 401K, Keogh accounts and Retirement and Pension funds.
 - _____ Cash value of Whole Life or Universal Life Insurance Policy.
 - _____ Personal Property held as an investment
 - _____ Lump-sum receipts or one-time receipts
10. _____ If the applicant is in the process of a divorce or separation, the applicant must provide legal documentation the divorce or separation has begun or has been finalized. If information is not available all partners income and assets will be counted towards eligibility. Information must be provided regarding the distribution of family assets.
11. _____ If you are self-employed you **MUST** provide a detailed expense and income statement for the last 12 months and three months of business checking and savings accounts along with last three Federal Income Tax Returns. Lyft, Uber, etc. are considered self-employment.
12. _____ If you currently own a home and are planning on selling we will need a copy of your last mortgage statement and the assessed value of your home in order to determine the estimated equity. A market analysis from a realtor is also required.
13. _____ If you currently own a home and plan on renting the property we will need to know the planned monthly rent.

We understand if we do not provide all applicable financial documentation our application will not be reviewed.



Print Applicants Name(s): _____

Applicants Signature

DATE

Co-Applicants Signature

DATE

Return with completed and signed Application, Affidavit and Disclosure Form, Required Personal Identification and Income Verification Document Form and ALL required financial documentation to:

MCO Housing Services
P.O. Box 372
Harvard, MA 01451
Email: lotteryinfo@mcohousingservices.com
978-456-8388
FAX: 978-456-8986

