



your resource for Affordable Housing



EDGEWOOD APARTMENTS PLAINVILLE, MA

WAIT LIST APPLICATION

All affordable units at Edgewood Apartments in Plainville are currently leased. If you would like to be added to the waiting list, please complete the application and return to:

**Edgewood Apartments, Leasing Office
100 Taunton Street
Plainville, MA 02762**

Rents are set annually and are NOT income based.

Section 8 or Other Housing Vouchers are Accepted.

If you do not have a Section 8 housing voucher, minimum income limits apply.



Edgewood Apartments Plainville, MA

For Office Use Only:

Date Appl. Rcvd: _____

WAIT LIST APPLICATION

PERSONAL INFORMATION

Date: _____

Name: _____

Address: _____ Town: _____ Zip: _____

Home Telephone _____ Work Telephone: _____ Cell: _____

Email: _____ Do you currently own a home: ____ Yes ____ No

Do you require a handicapped adaptable unit? ____ Yes ____ No

When would you be available to move in? _____

Bedroom Size: ____ One ____ Two

Do you have a Section 8 voucher? (These units are NOT Subsidized): ____ Yes ____ No

The total household size is _____

Household Composition – List ALL who will be living in the apartment

Name _____ Relationship _____ Age _____

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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.)

Tenant Monthly Base Income (Gross) _____

Other Income, specify _____

Co-Tenants Monthly Base Income (Gross) _____

Other Income, specify _____

TOTAL MONTHLY INCOME: _____

Household Assets: (This is a partial list of required assets. Complete all that apply with current account balances)

Checking (avg balance for 3 months) _____

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:

	Applicant	Co-Applicant	(#) of Dependents
Non-Minority	_____	_____	_____
Black or African American	_____	_____	_____
Hispanic or Latino	_____	_____	_____
Asian	_____	_____	_____
Native American or Alaskan Native	_____	_____	_____
Native Hawaiian or Pacific Islander	_____	_____	_____

SIGNATURES:

We understand this application is for the waiting list only. If we have the opportunity to lease we will need to provide required financial documentation before eligibility will be determined. The undersigned warrants and represents that all statements herein are true.

Signature _____ Date: _____
 Applicant(s)

Signature _____ Date: _____
 Co-Applicant(s)

Return to:

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