



*your resource for Affordable Housing*



***Ace Flats  
Reading, MA***

***You MUST contact the Leasing Office first to go through their screening. Call: 978-834-0900***

***Email: [aceflatsreading@outlook.com](mailto:aceflatsreading@outlook.com)***

***Once you are approved by the Leasing Office then you submit this application with all financial documentation to MCO Housing Services***

Attached is the information regarding the affordable rental units at Ace Flats in Reading, Massachusetts. Potential Tenants 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.

The monthly rent is: One Bedroom - \$2,514; Two Bedroom - \$2,814; Three Bedroom - \$3,111; all utilities included except water and sewer.

Please review the enclosed information packet in detail and complete the application and disclosure statement at the rear of the packet.

The rents are NOT subsidized or income based. You are responsible for the full rent. Section 8 or a Housing voucher will be accepted but it is your responsibility to find out if your Section 8 or Housing provider accepts the rent and project.

The minimum income, without a Section 8 or Housing Voucher, is: One Bed: \$75,420; Two Bed: \$84,420; Three Bed: \$93,330;

Thank you for your interest in affordable housing at ***Ace Flats***. We wish you the best of luck. Please contact MCO Housing Services at 978-456-8388 or email us at [lotteryinfo@mcohousingservices.com](mailto: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,

A handwritten signature in blue ink that reads 'Jennifer E. Woodsum'.

Jennifer E. Woodsum, MCO Housing Services

*There have been changes to the approval and eligibility process which are included in this packet.*

## Ace Flats

### Question & Answer

The units will be leased in accordance with policies and guidelines established by the Commonwealth of Massachusetts Executive Office of Housing and Livable Communities and Massachusetts Housing Partnership (MHP).

#### What are the qualifications required for Prospective Tenants?

- Qualify based on the following maximum income table, which is adjusted for household size:

| Household Size       | 1        | 2         | 3         | 4         | 5        | 6         |
|----------------------|----------|-----------|-----------|-----------|----------|-----------|
| Max Allowable Income | \$92,650 | \$105,850 | \$119,100 | \$132,300 | \$142,90 | \$153,500 |

#### APPLICANT QUALIFICATIONS:

1. Household income cannot exceed the above maximum gross allowable income limits. Adults 18 years of age or older income will be counted.
2. If assets exceed \$51,600.01, annual income includes the greater of actual income from assets or a .45% imputed income calculation. Included in this package is the List of Required Financial Documentation.
3. In addition to income and asset eligibility you will also be subject to a screening by the project and determined eligible based on that basis.
4. Persons with disabilities will be given first preference for such units regardless of what pool they are in based on the requested bedroom size. Where a person with a disability is awaiting an accessible unit and a unit with adaptive features becomes available, the owner/management agent must offer to adapt the unit.

#### 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 lease.

#### Unit size preferences are based on the following:

1. There is at least one occupant per bedroom.
2. A husband and wife, or those in a similar living arrangement, shall be required to share a bedroom. Other household members may share but shall not be required to share a bedroom.
3. A person described in the first sentence of (2) shall not be required to share a bedroom if a consequence of sharing would be a severe adverse impact on his or her mental or physical health and the lottery agent receives reliable medical documentation as to such impact of sharing.
4. A household may count an unborn child as a household member. The household must submit proof of pregnancy with the application.
5. If the applicant is in the process of a divorce or separation, the applicant must provide proof that the divorces or separation has begun or has been finalized, as set forth in the application.
6. Foster Children or Adults will not be counted as family/household members. Although payment from Foster Agencies, Kindship Care Payments and other State Foster Payments will be counted as income.

# Ace Flats

## New Tenant APPLICATION

For Office Use Only:

Date Appl. Rcvd: \_\_\_\_\_

Household Size: \_\_\_\_\_

### PERSONAL INFORMATION:

Date: \_\_\_\_\_

Name: \_\_\_\_\_

Address: \_\_\_\_\_ Town: \_\_\_\_\_ Zip: \_\_\_\_\_

Home Telephone: \_\_\_\_\_ Work Telephone: \_\_\_\_\_ Cell: \_\_\_\_\_

Email: \_\_\_\_\_ Have you ever owned a home? \_\_\_\_ If so, when did you sell it? \_\_\_\_

Do you have a Section 8 or Housing voucher (the units are NOT subsidized or income based): \_\_\_\_ Yes \_\_\_\_ No

Bedroom Size: \_\_\_\_ One Bedroom \_\_\_\_ Two Bedroom \_\_\_\_ Three Bedroom

Do you require a wheelchair accessible or sensory (hearing) adapted unit? \_\_\_\_ Yes \_\_\_\_ No Please specify:

**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.)

Tenants 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**

(Please complete reverse side)

Language assistance will be available by appointment at no charge. Call 978-456-8388 to schedule.

**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:**

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

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 _____ |
| Name _____ | Relationship _____ | Age _____ |
| Name _____ | Relationship _____ | Age _____ |
| Name _____ | Relationship _____ | Age _____ |
| Name _____ | Relationship _____ | Age _____ |

**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 for an opportunity to lease an affordable unit at Ace Flats. 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 or email in PDF format to:**

MCO Housing Services, P.O. Box 372, Harvard, MA 01451 [Lotteryinfo@mcohousingservices.com](mailto:Lotteryinfo@mcohousingservices.com)

# Ace Flats

## ***Affidavit & Disclosure Form***

I/We understand and agree to the following conditions and guidelines regarding the distribution of the affordable units at Ace Flats through EOHLC 40R in Reading, MA:

1. The gross annual household income for my family does not exceed the allowable limits as follows:

| Household Size       | 1        | 2         | 3         | 4         | 5        | 6         |
|----------------------|----------|-----------|-----------|-----------|----------|-----------|
| Max Allowable Income | \$92,650 | \$105,850 | \$119,100 | \$132,300 | \$142,90 | \$153,500 |

Income from all family members must be included.

2. I/We understand the calculation of income will include the higher of actual income from assets (if over \$51,600) or an imputation of .45% of the value of total household assets which is added to a household's 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.
3. The household size listed on the application form includes only and all the people that will be living in the residence.
4. 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.
5. I/We understand that by being determined eligible for an affordable unit 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.
6. I/We understand that if selected I/we will 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 lease an affordable unit at Ace Flats.
7. Program requirements are established by MHP and are enforced by MHP or their representatives. 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, I/we agree that any determination made by MHP is final.
8. I/We certify that no member of our family has a financial interest in Ace Flats.
9. I/We understand there may be differences between the market and affordable units and accept those differences.
10. 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 lease term I will no longer be eligible for the affordable rent and have the option of moving out or paying market rent.

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

\_\_\_\_\_  
Applicant

\_\_\_\_\_  
Co-Applicant

\_\_\_\_\_  
Date

**Return with completed application, complete financial documentation and Release of Information Form by mail, fax or email to:**

MCO Housing Services  
P.O. Box 372  
Harvard, MA 01451

## **APPLICATION TIPS**

### **READ THE FOLLOWING CAREFULLY**

1. More than 60% of applications submitted to MCO Housing Services are incomplete. Your application will not be reviewed for eligibility unless all financial documentation has been received. Please take the time to read the application and submit all required documentation. It is your responsibility to provide the correct documentation.
2. The rental eligibility guidelines have changed. The main difference is how income for college students is counted when it comes to Financial Aide.
3. Read the NOTES on the Required Personal Identification and Income Verification Documents. Failure to do so could mean the difference between a complete and incomplete application as well as eligibility for a unit.
4. All financial documentation, income, assets and tax returns, are required from all household adults aged 18 or older. No exceptions.
5. All Asset statements must include your name, account number and Institution name. Do not take photos or copy a statement from your phone. If you provide any asset statements without the above information your application is an automatic incomplete.
6. DO NOT ASSUME you do not need to provide a certain document. When in question call or email BEFORE you submit your application.
7. We will not use the amount listed on your paystubs or W2's regarding your retirement account i.e. 401K, 403B, IRA, Roth IRA etc. Your paycheck and W2's tell us you have a retirement account only. You must provide the last statement from whoever is managing the account for MCO to determine the account's value.
8. Do NOT forget to include statements from Robinhood or any other online investment accounts. They are considered part of your assets. If you have an open account, you must provide a statement whether there are any funds in the account or not.
9. If you are unable to provide specific information, then submit a note with your application explaining the circumstances. This will not guarantee your application will be included in the lottery, but depending on the circumstances, we may be able to work with you.
10. Do not take photos with your cellphone of any documentation and email it to us. The photos are not legible, and we will not accept them.
11. You can fax your information, but it is not recommended. If all pages are not received your application would be considered incomplete.

**I/We have read the above information.**

---

Signature

Date

---

Signature

Date

**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 to be reviewed. Incomplete applications will not be reviewed until all documentation is submitted. MCO may ask for additional information or documentation that may not be listed here due to its need to help determine eligibility.

**Initial each item that are applicable AND provide the document. Write N/A if not applicable and return this sheet with your application.**

1. \_\_\_\_\_ Identification for each household member, i.e. Driver's License , Birth Certificate, Passport etc.
2. \_\_\_\_\_ If you have a Section 8 Voucher or other Housing Voucher, you MUST provide a valid copy with your application.
3. \_\_\_\_\_ If you require 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.
4. \_\_\_\_\_ The most recent last five (5) **consecutive** pay stubs for all jobs (check/direct deposit stubs). For unemployment, DOR verification stating benefits received and payment history. 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 in the last 12 months, 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, semi-weekly, bi-weekly or monthly.
5. \_\_\_\_\_ 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.
6. \_\_\_\_\_ Child support and alimony: court document indicating the payment amount, DOR statement. If you do not receive child support provide a letter stating, that you are not receiving child support or see attached form.
7. \_\_\_\_\_ Foster Children or Adult state-based payment
8. \_\_\_\_\_ 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.
9. \_\_\_\_\_ 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 Tax Transcript using form 4506-T that you can obtain at [irs.gov](https://irs.gov) or create an account at [irs.gov](https://irs.gov) and print out the Tax Transcript.
- **NOTE:** If you have not filed tax returns you must provide a letter from the IRS Verifying Non-filing of your tax return(s). Request Verification of Non-filing letter by using form 4506-T that you can obtain at [irs.gov](https://irs.gov) or create an account at [irs.gov](https://irs.gov) and print out the Verification of Non-filing letter.

10. \_\_\_\_\_ W2 and/or 1099-R Forms: 2024

- **NOTE:** If you do not have copies of W2's and/or 1099's, you can obtain a copy of your Wage Transcript using form 4506-T that you can obtain at [irs.gov](https://irs.gov) or create an account at [irs.gov](https://irs.gov) and print out the Wage Transcript.

11. \_\_\_\_\_ Interest, dividends and other net income of any kind from real or personal property.

12. \_\_\_\_\_ For Full or Part-Time Dependent Students Whose household is not on Section 8: Complete **Appendix A** with all supporting documentation.

13. Asset Statement(s): provide **current** statements of all that apply, unless otherwise noted:

**GENERAL NOTE:** ALL ASSETS STATEMENTS MUST INCLUDED YOUR NAME, ACCOUNT NUMBER AND INSTITUTION NAME FOR ALL CHECKING, SAVINGS, INVESTMENT ACCOUNTS AND RETIREMENT ACCOUNTS. ANY ACCOUNTS PROVIDED WITHOUT THIS INFORMATION IS AN AUTOMATIC INCOMPLETE APPLICATION.

- \_\_\_\_\_ Checking accounts – Most Recent statement – EVERY PAGE – FRONT AND BACK.

**NOTE:** Direct deposits from Payroll, SS, tax refund, transfers between your accounts, DOR, DTA etc. we can identify. If you have cash deposits, payroll or non payroll or other income deposits you MUST identify where the funds have come from. For example only, **VENMO, EBAY, POSHMARK, PAYPAL, CASH APP, ATM and MOBILE deposits, ZELLE and other transfers between any accounts but your accounts, etc. There is no way we can list all sources.** 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 the individual statements.

- \_\_\_\_\_ 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 – most recent full statement.

**NOTES:** Direct deposits from Payroll, SS, tax refund, transfers between your accounts, DOR, DTA etc. we can identify. If you have cash deposits, payroll or non-payroll or other income deposits you **MUST** identify where the funds have come from. For example, **VENMO, EBAY, POSHMARK, PAYPAL, CASH APP, ATM and MOBILE deposits, ZELLE and other transfers between any accounts but your accounts, etc.** There is no way we can list all sources. If you fail to explain they will be counted as income, which may put you over the income limit.

- \_\_\_\_ CashApp, VENMO, Apple Cash, PayPal, Chime or similar accounts – most recent full statement.
  - \_\_\_\_ Revocable trusts
  - \_\_\_\_ Equity in rental property or other capital investments
  - \_\_\_\_ Investment accounts, including stocks, bonds, Treasury Bills, Certificates of Deposit, Mutual Funds, Money Market, Robinhood and all online accounts, etc.
  - \_\_\_\_ Retirement accounts, IRA, Roth IRA, 401K, 403B, etc for all current and past jobs. The balance of these accounts will not be counted as an asset. Any distributions of periodic payment or dividends will be considered income. Most recent statement must be provided.
  - \_\_\_\_ Cash value of Whole Life or Universal Life Insurance Policy.
  - \_\_\_\_ Personal Property held as an investment
  - \_\_\_\_ Lump-sum receipts or one-time receipts
14. \_\_\_\_ A household may count an unborn child as a household member. The household must submit proof of pregnancy with the application, i.e. letter from doctor.
15. \_\_\_\_ If the applicant is in the process of a divorce or separation, the applicant must provide legal documentation that the divorce or separation has begun or has been finalized. Information must be provided regarding the distribution of family assets.
16. \_\_\_\_ If you have a home to sell you need to provide a copy of your last mortgage statement and a market analysis which provides the sale price. The home must be sold before you can lease an affordable apartment.
17. \_\_\_\_ If you are receiving gift monies on a regular basis you need to provide a letter stating who is providing the funds and the monthly amount.

We understand if we do not provide all applicable financial documentation our application will not be reviewed for eligibility. We understand that additional documentation may be requested if it is needed to determine eligibility.

Print Applicants Name(s): \_\_\_\_\_

\_\_\_\_\_  
Applicants Signature

\_\_\_\_\_  
DATE

\_\_\_\_\_  
Co-Applicants Signature

\_\_\_\_\_  
DATE

**REMEMBER IF YOU CHECKED YES TO ANY OF THE ABOVE YOU MUST PROVIDE THE REQUIRED DOCUMENTATION AND STATED ADDITIONAL FORMS OR YOUR APPLICATION WILL BE CONSIDERED INCOMPLETE.**

## **Appendix A: HOTMA Student Eligibility Checklist**

### **A. Student Identification**

- Student Full Name: \_\_\_\_\_
- Date of Birth: \_\_\_\_\_
- Institution Name: \_\_\_\_\_
- Enrollment Status: ☐ Full-time ☐ Part-time

### **B. Independence Status (Student must meet one of the following)**

| Criteria                         | Documentation Required                      | Verified? |
|----------------------------------|---------------------------------------------|-----------|
| Student is 24 years or older     | Government-issued ID or birth certificate   |           |
| Married                          | Marriage certificate                        |           |
| Has dependent children           | Birth certificates, custody, or tax returns |           |
| Veteran of U.S. Armed Forces     | DD-214 or similar                           |           |
| Graduate or professional student | Enrollment records                          |           |

### **C. Parental Information (if student is under 24 and not independent)**

| Criteria                     | Documentation Required            | Verified? |
|------------------------------|-----------------------------------|-----------|
| Student lives with parents   | Lease or proof of residency       |           |
| Student claimed as dependent | IRS Tax Transcript or signed 1040 |           |

### **D. Financial Aid Income Treatment**

| Description                                            | Required Documents               | Excluded?                | Included?                |
|--------------------------------------------------------|----------------------------------|--------------------------|--------------------------|
| Tuition and mandatory fees                             | Financial aid award letter       | <input type="checkbox"/> | <input type="checkbox"/> |
| Room/board, stipends, other expenses                   | Financial aid breakdown          | <input type="checkbox"/> | <input type="checkbox"/> |
| Exemption for students over 23 with dependent children | Birth certificates or tax return | <input type="checkbox"/> | <input type="checkbox"/> |

### **E. Additional Considerations**

- ☐ Student is NOT living in institution-owned housing excluded under Section 8 rules
- ☐ IRS Form 4506-T submitted (for income/tax verification)
- ☐ Certificate of Non-Filing provided if applicable
- ☐ Affidavits for non-filing (if no tax returns)

**Final Determination:** ☐ Student is Eligible ☐ Student is Ineligible ☐ More documentation required

Reviewed by: \_\_\_\_\_ Date: \_\_\_\_\_

### **Required Documents for HOTMA Student Eligibility**

1. **Proof of Enrollment**
  - Letter from the college or university confirming full-time or part-time enrollment.
2. **Proof of Independence** (if under 24, provide at least one of the following):
  - Government-issued ID or birth certificate (if age 24 or older).
  - Marriage certificate.

- Birth certificate of dependent child or tax return showing dependent claimed.
- DD-214 (military discharge).
- Enrollment in graduate or professional program.

**3. Financial Aid Documentation:**

- Financial aid award letter (for tuition and mandatory fees).
- Breakdown of financial aid (showing stipends, room and board, etc.)

**4. Additional Forms:**

- IRS Form 4506-T (for tax transcript request).
- Certificate of Non-Filing (if applicable).
- Affidavits for non-filing (if no tax return was filed).

Print Applicants Name(s): \_\_\_\_\_

\_\_\_\_\_  
Applicants Signature

\_\_\_\_\_  
DATE

\_\_\_\_\_  
Co-Applicants Signature

\_\_\_\_\_  
DATE

**Ace Flats**  
**Reading, MA**

***Release of Information Authorization Form***

Date: \_\_\_\_\_

I/We hereby authorize MCO Housing Services, Ace Flats Leasing 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, Ace Flats Leasing Office, or any of its assignees and consequently the Projects Administrator, for the purpose of determining income eligibility for Ace Flats.

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 the following to MCO Housing Services:**

1. \_\_\_\_\_ Completed, signed and dated application.
2. \_\_\_\_\_ Read, signed and dated Affidavit and Disclosure Form
3. \_\_\_\_\_ Read, signed and dated Application Tip Information Sheet
4. \_\_\_\_\_ Appendix A, if applicable with all required documentation
5. \_\_\_\_\_ All Required Financial Documentation
6. \_\_\_\_\_ Special Accommodation Documentation, if applicable
7. \_\_\_\_\_ Custody and Child Support Affidavit, one for each child, if applicable

### **Return by mail or email as a PDF:**

MCO Housing Services

P.O. Box 372

Harvard, MA 01451

[lotteryinfo@mcohousingservices.com](mailto:lotteryinfo@mcohousingservices.com)