

**Franklin School Apartments**  
7 Stedman Road  
Lexington, MA 02421  
Phone (781)863-1810 TDD (1-800)545-1833 ext.179  
Fax (781)673-2704

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

Managed by: **The Community Builders, Inc.** Low / MOD / Market \_\_\_\_\_ # Bedrooms  
95 Berkeley Street  
Boston, MA 02116

Financed by: **Massachusetts Housing Finance Agency**

(1) APPLICANT NAME \_\_\_\_\_  
DATE OF BIRTH \_\_\_\_\_  
PRESENT ADDRESS \_\_\_\_\_  
CITY \_\_\_\_\_  
STATE \_\_\_\_\_ ZIP CODE \_\_\_\_\_  
SOCIAL SECURITY# \_\_\_\_\_  
HOME TELEPHONE \_\_\_\_\_ WORK TELEPHONE \_\_\_\_\_  
MARITAL STATUS \_\_\_\_\_ DO YOU HAVE ANY PETS \_\_\_\_\_

THIS QUESTION IS OPTIONAL, THE INFORMATION WOULD BE MOST HELPFUL TO UN IN CONFIRMING WITH OUR AFFIRMATIVE FAIR MARKETING PLAN. PLEASE SPECIFY RACE.

\_\_\_ AMERICAN INDIAN \_\_\_ BLACK \_\_\_ HISPANIC \_\_\_ ASIAN \_\_\_ WHITE \_\_\_ OTHER

(3) NAME OF YOUR PRESENT LANDLORD \_\_\_\_\_

LANDLORD'S ADDRESS \_\_\_\_\_  
CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP CODE \_\_\_\_\_  
TELEPHONE NUMBER \_\_\_\_\_

CURRENT MONTHLY RENT \$ \_\_\_\_\_ UTILITY COST \$ \_\_\_\_\_

HOW LONG HAVE YOU LIVED THERE? \_\_\_\_\_ NUMBER OF BEDROOMS \_\_\_\_\_

(4) THIS QUESTION IS OPTIONAL. IF THE APPLICANT HAS NOT BEEN LIVING AT PRESENT ADDRESS MORE THAT 5 YEARS. PLEASE FILL OUT REFERENCE BELOW.

PREVIOUS ADDRESS \_\_\_\_\_ CITY \_\_\_\_\_  
STATE \_\_\_\_\_ ZIP CODE \_\_\_\_\_  
PREVIOUS LANDLORD'S NAME \_\_\_\_\_

LANDLORD'S ADDRESS \_\_\_\_\_ CITY \_\_\_\_\_  
STATE \_\_\_\_\_ ZIP CODE \_\_\_\_\_

TELEPHONE NUMBER \_\_\_\_\_ YOUR RENT \$ \_\_\_\_\_ UTILITY COSTS \$ \_\_\_\_\_

WHAT DATE DID YOU OCCUPY AND VACATE: FROM \_\_\_\_\_ TO \_\_\_\_\_

PLEASE USE THE BACK OF THIS FORM IF NECESSARY TO LIST ALL PLACES YOU HAVE LIVED THE PAST FIVE (5) YEARS.

1-3

LIST ALL PERSONS WHO WILL OCCUPY THE APARTMENT ( INCLUDING THE APPLICANT)

NAME	RELATIONSHIP	DATE OF BIRTH	SOCIAL SECURITY #
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

(6) INCOME INFORMATION  
PLEASE INCLUDE ALL INCOME OF ANYONE 18 YEARS OF AGE OR OLDER WHO WILL OCCUPY THIS APARTMENT.

PLACE OF EMPLOYMENT \_\_\_\_\_  
ADDRESS \_\_\_\_\_ CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP  
CODE \_\_\_\_\_ TELEPHONE NUMBER \_\_\_\_\_

CURRENT SALARY \$ \_\_\_\_\_ MONTH/YEAR DATE OF HIRE \_\_\_\_\_

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PLACE OF EMPLOYMENT \_\_\_\_\_  
ADDRESS \_\_\_\_\_ CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP  
CODE \_\_\_\_\_ TELEPHONE NUMBER \_\_\_\_\_

CURRENT SALARY \$ \_\_\_\_\_ MONTH/YEAR DATE OF HIRE \_\_\_\_\_

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PLACE OF EMPLOYMENT \_\_\_\_\_ ADDRESS \_\_\_\_\_

CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP CODE \_\_\_\_\_ TELEPHONE NUMBER \_\_\_\_\_

CURRENT SALARY \$ \_\_\_\_\_ MONTH/YEAR DATE OF HIRE \_\_\_\_\_

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ANY OTHER TYPE OF INCOME IN HOUSEHOLD \_\_\_\_\_ AMOUNT \$ \_\_\_\_\_

WHO IS THE RECIPIENT \_\_\_\_\_

ANY OTHER TYPE OF INCOME IN HOUSEHOLD \_\_\_\_\_ AMOUNT \$ \_\_\_\_\_

WHO IS THE RECIPIENT \_\_\_\_\_

(7) ASSETS - LIST ALL BANK ACCOUNT, STOCKS, BONDS, INVESTMENTS ETC.

TYPE VALUE	BANK OR AGENCY	ACCOUNT #	CURRENT

(8) PERSONAL REFERENCES, NAME, ADDRESS AND TELEPHONE NUMBER:

1. \_\_\_\_\_
2. \_\_\_\_\_
3. \_\_\_\_\_

(9) HAS ANYONE LISTED ON THE APPLICATION BEEN CONVICTED OF A FELONY?

IF YES, WHICH PERSON?

(10) IF YES TO QUESTION (9) PLEASE EXPLAIN IN DETAIL WHY?

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(11) IF ANYONE LISTED IN QUESTION #5 HAS BEEN DESIGNATED AS HANDICAPPED OR DISABLED AND WILL REQUIRE SPECIAL ACCOMODATIONS, PLEASE EXPLAIN.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

PLEASE NOTE THAT THIS IS A PRELIMINARY APPLICATION. ADDITIONAL INFORMATION MAY BE REQUESTED AT A LATER DATE TO COMPLETE THE PROCESSING OF APPLICANTS. YOUR SIGNATURE GIVES CONSENT TO THE MANAGEMENT TO VERIFY THE INFORMATION CONTAINED IN THIS APPLICATION.

**WARNING: SECTION 1001 OF TITLE 18 OF THE U.S. CODE MAKES IT A CRIMINAL OFFENSE TO MAKE WILLFUL, FALSE STATEMENTS OR MISREPRESENTATIONS TO ANY DEPARTMENT OR AGENCY OF THE UNITED STATES AS TO ANY MATTER WITHIN ITS JURISDICTION.**

**I/WE HAVE READ THE FOREGOING AND CERTIFY THAT THE INFORMATION HEREIN SUBMITTED BY MYSELF/US IS TRUE AND CORRECT.**

APPLICANT SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_

APPLICANT SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_

