Hearthway, Inc.

To request a translator to assist with this application, please contact Hearthway, Inc. at 413 499 1630.

English, Chinese, Haitian Creole, Khmer, Portuguese, Russian, Spanish and Vietnamese.

Pou mande yon tradiktè pou ede avèk aplikasyon sa a, tanpri kontakte Hearthway, Inc. Sèvis Lojman nan 413 499 1630.
Haitian Creole

ដើម្បីស្នើសុំអ្នកបកប្រែជួយកម្មវិធីនេះ
សូមទំនាក់ទំនងមកកាន់សេវាកម្មលំនៅដ្ឋា   Hearthway, Inc. ៖ នៅ 413 499 1630។
Khmer

Para solicitar um tradutor para ajudar com este aplicativo, entre em contato com a Hearthway, Inc. pelo telefone 413 499 1630.
Portuguese Brazil

Para solicitar um tradutor para ajudar nesta aplicação, contacte os Serviços de Habitação da Hearthway, Inc. pelo telefone 413 499 1630.
Portuguese Portugal

要請求翻譯人員協助此申請，請致電413 499 1630與伯克希爾住房服務部聯繫。
Cantonese

要请求翻译人员协助此申请，请致电413 499 1630与伯克希尔住房服务部联系。
Chinese Simple

Pour demander un traducteur pour vous aider avec cette application, veuillez contacter Hearthway, Inc. au 413 499 1630.
French

Um einen Übersetzer anzufordern, der Sie bei diesem Antrag unterstützt, wenden Sie sich bitte an Hearthway, Inc. unter 413 499 1630.
German

Чтобы запросить переводчика для помощи с этим заявлением, пожалуйста, свяжитесь с Hearthway, Inc. по телефону 413 499 1630.
Russian

Aby poprosić tłumacza o pomoc w tej aplikacji, skontaktuj się z Hearthway, Inc. pod numerem 413 499 1630.
Polish

Para solicitar un traductor que lo ayude con esta solicitud, comuníquese con Hearthway, Inc. al 413 499 1630.
Spanish

Щоб попросити перекладача допомогти з цією заявкою, будь ласка, зв'яжіться з Hearthway, Inc. за номером 413 499 1630.
Ukrainian

Để yêu cầu người phiên dịch hỗ trợ ứng dụng này, vui lòng liên hệ với Hearthway, Inc. theo số 413 499 1630.
Vietnamese

Hearthway, Inc.

I Speak Statements

- ☐ Unë flas **shqip** (Albanian)
- ☐ አማርኛ እናገራለሁ (Amharic)
- ☐ انا اتكلم اللغة العربية. (Arabic)
- ☐ Ես խոսում եմ **հայերեն** (Armenian)
- ☐ আমি বাংলা ভাষী। (Bengali)
- ☐ Ja govorim **bosanski jezik** (Bosnian)
- ☐ ကျွန်တော်မြန်မာစကားပြောသည်။ (Burmese)
- ☐ 我说中文 (Chinese Simplified)
- ☐ 我說中文 (Chinese Traditional)
- ☐ Ja govorim **hrvatski**. (Croatian)
- ☐ اينجانب به زبان **فارسی** صحبت می کنم (Farsi)
- ☐ Je parle **français**. (French)
- ☐ Je parle le **Français haïtien** (French Creole)
- ☐ Μιλάω **ελληνικά**. (Greek)
- ☐ હું **ગુજરાતી** બોલુ છું (Gujarati)
- ☐ Mwen pale **Kreyòl**. (Haitian Creole)
- ☐ म **हिंदी** बोलता हूँ (Hindi)
- ☐ Kuv hais **lus hmoob**. (Hmong)
- ☐ Ana m a sụ **Igbo** (Igbo)
- ☐ Parlo **Italiano** (Italian)
- ☐ 私は日本語を話します (Japanese)
- ☐ Mi chat **Jamiekan langwjij** (Jamaican Creole)
- ☐ ykt lkqlull b (Karen)
- ☐ ខ្ញុំនិយាយភាសាខ្មែរ (Khmer)
- ☐ 본인의 모국어는 **한국어**입니다 (Korean)
- ☐ ئه‌ز زمانی **کوردی** ده‌ئاخفم. (Kurdish)

- ☐ Ṅ a po **Klào** Win. (Kru)
- ☐ ຂ້ອຍເວົ້າເຂົ້າ ພາສາລາວ. (Lao)
- ☐ Yie gorngv **Mienh** waac. (Mien)
- ☐ म **नेपाली** बोल्छु (Nepali)
- ☐ Mówię **po polsku**. (Polish)
- ☐ Eu falo **Portugês**. (Portuguese)
- ☐ ਇ ਸਪੇਅਕ ਪੰਜਾਬੀ (Punjabi)
- ☐ Cunosc limba **Română.** (Romanian)
- ☐ Я говорю **по-русски**. (Russian)
- ☐ Ou te tautala **faaSamoa**. (Samoan)
- ☐ Govorim **srpski**. (Serbian)
- ☐ Waxaan ku hadlaa **Somali**. (Somali)
- ☐ Yo hablo **español**. (Spanish)
- ☐ أتحدث **السودانية** (لغوي سوداني) (Sudanese)
- ☐ Marunong po akong magsalita ng **Tagalog**. (Tagalog)
- ☐ ข้าพเจ้าพูด **ภาษาไทย** (Thai)
- ☐ ኣነ ትግርኛ ይዛረብ እየ. (Tigrinya)
- ☐ Я розмовляю **українською**. (Ukrainian)
- ☐ میں **اردو** بولتا/بولتی ہوں . (Urdu)
- ☐ Tôi nói tiếng **Việt**. (Vietnamese)
- ☐ **ייִדיש** רעד איך (Yiddish)
- ☐ Mo gbọ **Yoruba** (Yoruba)

APPLICATION FOR HOUSING

Low-Income Housing Tax Credit Property

Smoke Free Property

Please Print Clearly

This is an application for housing at:	**Project: Belder Affordable Housing**
	YMCA Studio Apartments
	Address: 292 North St
	Pittsfield, MA 01201
Please complete this application and return to:	**Name: Hearthway, Inc.**
	Address: One Fenn St., 3rd Floor
	P.O. Box 1180
	Pittsfield, MA 01202-1180

Applications are placed in order of date and time received. An applicant may be interviewed only after the receipt of this tenant application.

A. GENERAL INFORMATION

Applicant Name(s): _____

Address: _____
          Street   Apt.#   City   State   ZIP

Daytime Phone: _____   Evening Phone: _____

No. of BR's in
current unit: _____   Do you   ☐ RENT or ☐ OWN (check one)

Amount of current monthly rental or mortgage payment: $ _____

If owned, do you receive monthly rental income from property?   ☐ Yes   ☐ No (check one)

Check utilities paid by you**:**   ☐ Heat   ☐ Electricity   ☐ Gas   ☐ Other (specify)

Approximate monthly cost of utilities paid by you (excluding phone and cable TV): $ _____

Bedroom size requested: ☐ Studio   ☐ Handicap BR

	Name		**Marital Status** M-married D-divorced S-single L-legal separation E-estranged	**Birth Date**	**Age**	**SS#**	**Student Y/N**
			B. HOUSEHOLD COMPOSITION				
Head							

Do you anticipate any additions to the household in the next twelve months? ☐ Yes ☐ No	
If yes, explain	

Will all of the persons in the household be or have been full-time students during five calendar months of this year or plan to be in the next calendar year at an educational institution (other than a correspondence school) with regular faculty and students? ☐ Yes ☐ No

IF YES, ANSWER THE FOLLOWING QUESTIONS:

Are any full-time student(s) married and filing a joint tax return?	☐ Yes	☐ No
Are any student(s) enrolled in a job-training program receiving assistance under the Job Training Partnership Act?	☐ Yes	☐ No
Are any full-time student(s) a TANF or a title IV recipient?	☐ Yes	☐ No
Are any full-time student(s) a single parent living with his/her minor child who is not a Dependant on another's tax return?	☐ Yes	☐ No

C. INCOME

List ALL sources of income as requested below. If a section doesn't apply, cross out or write NA.

Household Member Name	Source of Income	Gross Monthly Amount
	Social Security	$
	Social Security	$
	Social Security	$
	Social Security	$
	SSI Benefits	$
	SSI Benefits	$
	SSI Benefits	$
	SSI Benefits	$
	Pension (list source)	$
	Pension (list source)	$
	Pension (list source)	$
	Veteran's Benefits (list claim #)	$
	Veteran's Benefits (list claim #)	$
		$
	Unemployment Compensation	$
	Unemployment Compensation	$
	Title IV/TANF	$
	Title IV/TANF	$
	Title IV/TANF	$
	Full-Time Student Income (18 & Over Only)	$
	Full-Time Student Income (18 & Over Only)	$
	Interest Income (source)	$
	Interest Income (source)	$
	Interest Income (source)	$
	Interest Income (source)	$

Household Member Name	Source of Income	Monthly Amount
	Employment amount	$
	Employer:	
	Position Held	
	How long employed:	
	Employment amount	$
	Employer:	
	Position Held	
	How long employed:	
	Employment amount	$
	Employer:	
	Position Held	
	How long employed:	
	Employment amount	$
	Employer:	
	Position Held	
	How long employed:	
	Alimony	
	Are you *entitled* to receive alimony?	☐ Yes ☐ No
	If yes, list the amount you are *entitled* to receive.	$
	Do you receive alimony?	☐ Yes ☐ No
	If yes list amount you receive.	$
	Child Support	
	Are you *entitled* to receive child support?	☐ Yes ☐ No
	If yes list the amount you are *entitled* to receive.	$
	Do you receive child support?	☐ Yes ☐ No
	If yes, list the amount you receive.	$
	Other Income	$
	Other Income	$
	Other Income	$

TOTAL GROSS ANNUAL INCOME (Based on the monthly amounts listed above x 12)	$
TOTAL GROSS ANNUAL INCOME FROM PREVIOUS YEAR	$

Do you anticipate any changes in this income in the next 12 months?	☐ **Yes**	☐ **No**

If yes, explain:

....

....

....

....

D. ASSETS

If your assets are too numerous to list here, please request an additional form.
If a section doesn't apply, cross out or write NA.

Checking Accounts	#	Bank	Balance $
	#	Bank	Balance $
	#	Bank	Balance $
Savings Accounts	#	Bank	Balance $
	#	Bank	Balance $
	#	Bank	Balance $
Trust Account	#	Bank	Balance $
Certificates	#	Bank	Balance $
	#	Bank	Balance $
	#	Bank	Balance $
	#	Bank	Balance $
Credit Union	#	Bank	Balance $
	#	Bank	Balance $
Savings Bonds	#	Maturity Date	Value $
	#	Maturity Date	Value $
	#	Maturity Date	Value $
Life Insurance Policy	#		Cash Value $
Life Insurance Policy	#		Cash Value $

Mutual Funds	Name:	#Shares:	Interest or Dividend $	Value $
	Name:	#Shares:	Interest or Dividend $	Value $
	Name:	#Shares:	Interest or Dividend $	Value $
Stocks	Name:	#Shares:	Dividend Paid $	Value $
	Name:	#Shares:	Dividend Paid $	Value $
	Name:	#Shares:	Dividend Paid $	Value $
Bonds	Name:	#Shares:	Interest or Dividend $	Value $
	Name:	#Shares:	Interest or Dividend $	Value $

Investment Property		Appraised Value $

Real Estate Property: ***Do you own any property?***	☐ Yes ☐ No

If yes, Type of property	
Location of property	
Appraised Market Value	$
Mortgage or outstanding loans balance due	$
Amount of annual insurance premium	$
Amount of most recent tax bill	$

Have you sold/disposed of any property in the last 2 years?	☐ Yes ☐ No
If yes, Type of property	
Market value when sold/disposed	$
Amount sold/disposed for	$
Date of transaction	

Have you disposed of any other assets in the last 2 years (Example: Given away money to relatives, set up Irrevocable Trust Accounts)?	
	☐ Yes ☐ No
If yes, describe the asset	
Date of disposition	
Amount disposed	$

Do you have any other assets not listed above (excluding personal property)?	☐ Yes ☐ No
If yes, please list:	

E. ADDITIONAL INFORMATION		
Are you or any member of your family currently using an illegal substance?	☐ Yes	☐ No
Have you or any member of your family ever been convicted of a felony?	☐ Yes	☐ No
If yes, describe		
Have you or any member of your family ever been evicted from any housing?	☐ Yes	☐ No
If yes, describe		
Have you ever filed for bankruptcy?	☐ Yes	☐ No
If yes, describe		
Will you take an apartment when one is available?	☐ Yes	☐ No

	Briefly describe your reasons for applying:

F. REFERENCE INFORMATION

<table>
<tr><td rowspan="5">Current Landlord</td><td>Name:</td><td></td></tr>
<tr><td>Address:</td><td></td></tr>
<tr><td>Home Phone:</td><td></td></tr>
<tr><td>Bus. Phone:</td><td></td></tr>
<tr><td>How Long?</td><td></td></tr>
<tr><td rowspan="5">Prior Landlord</td><td>Name:</td><td></td></tr>
<tr><td>Address:</td><td></td></tr>
<tr><td>Home Phone:</td><td></td></tr>
<tr><td>Bus. Phone:</td><td></td></tr>
<tr><td>How Long?</td><td></td></tr>
</table>

Credit Reference #1:	
Address:	
Account #:	Phone #:

Credit Reference #2:	
Address:	
Account #:	Phone #:

Credit Reference #3:	
Address:	
Account #:	Phone #:

Personal Reference #1:	
Address:	
Relationship:	Phone #:

Personal Reference #2:	
Address:	
Relationship:	Phone #:

Personal Reference #3:	
Address:	
Relationship:	Phone #:

In case of emergency notify:	
Address:	
Relationship:	Phone #:

f:\wpdata\leasing\applications-leasing only\ymca app revised 031121.docx

<table>
<tr><td colspan="4" align="center">**G. VEHICLE AND PET INFORMATION** (if applicable)
List any cars, trucks, or other vehicles owned. Parking will be provided for one vehicle. Arrangements with Management will be necessary for more than one vehicle.</td></tr>
<tr><td colspan="2">Type of Vehicle:</td><td colspan="2">License Plate #:</td></tr>
<tr><td colspan="2">Year/Make:</td><td colspan="2">Color:</td></tr>
<tr><td colspan="2">Type of Vehicle:</td><td colspan="2">License Plate #:</td></tr>
<tr><td colspan="2">Year/Make:</td><td colspan="2">Color:</td></tr>
<tr><td colspan="2">Do you own any pets?</td><td>☐ Yes</td><td>☐ No</td></tr>
<tr><td colspan="4">*If yes, describe:*</td></tr>
</table>

CERTIFICATION

Apartments are rented without regard to race, color, religion, sex or national origin, handicap or familial status. Federal law prohibits the discrimination against individuals with handicaps. Upon request, reasonable accommodations will be made to rules, policies, practices and services making them accessible and permit assistive animals when they provide tenants with equal housing opportunities.

I understand that this application is not an offer of housing. I understand that it is my responsibility to notify Hearthway, Inc. in writing of any change of address, income or family composition. By signing this application I am giving permission for Hearthway, Inc. staff to verify any information in this application, perform a credit and criminal record check. Additional information will be provided if requested. I understand that if I am contacted regarding this property and I do not respond, my name will be removed from the waiting list.

I hereby certify that I Do/Will Not maintain a separate subsidized rental unit in another location. I further certify that this will be my permanent residence. I understand I must pay a security deposit for this apartment prior to occupancy. I understand that my eligibility for housing will be based on applicable income limits and by management's selection criteria. I certify that all information in this application is true to the best of my/our knowledge and I understand that false statements or information are punishable by law and will lead to cancellation of this application or termination of tenancy after occupancy. All adult applicants, 18 or older, must sign application.

SIGNATURE:

_____   _____
(Signature of Tenant)   (Date)

REASONABLE ACCOMMODATION

Hearthway, Inc., Inc. does not discriminate against applicants on the basis of their race, creed, color, religion, sex, gender identity, genetic information, national origin, marital or familial status, disability, age, receipt of public assistance or sexual preference in its management of rental housing. Consistent with applicable law, Hearthway, Inc. will provide a reasonable accommodation to applicants if they or any household members have a disability or handicap and if the reasonable accommodation is necessary to provide an equal opportunity to use and enjoy the housing.

A reasonable accommodation is some modification that Hearthway, Inc. can make to the apartments it manages or in its rules or procedures that will assist an otherwise eligible applicant with a disability to take advantage of the housing, provided that the change does not pose an undue financial or administrative burden to Hearthway, Inc. or require a fundamental change in its program. A reasonable accommodation may include providing an appropriate auxiliary aid to an applicant with a disability where such assistance is necessary to enable effective communication with the applicant.

Examples of reasonable accommodation include:

- Installing flashing light smoke detectors in an apartment for a household with a hearing-impaired member;
- Making a sign language interpreter available to a hearing-impaired applicant during an interview.

An Applicant household that has a member with a disability must still be able to meet essential obligations of tenancy. For example, they must be able to pay rent, to care for their apartment, to report required information to Hearthway, Inc. to avoid disturbing their neighbors, etc. This requirement takes into consideration whether any requested reasonable accommodation would permit the applicant to be considered eligible.

If you or a member of your household have a disability or handicap and think you might need or want a reasonable accommodation, you may request it at any time in the application process or after you have moved in. We prefer that you make the request by completing our Request for Reasonable Accommodation form, but you do not have to use our form to make the request. Of course, if you would prefer not to discuss your disability with Hearthway, Inc., that is your right.

You can get a Request for Reasonable Accommodation form at Hearthway, Inc.'s office, at One Fenn Street, Pittsfield, MA 01201 or by calling (413) 499-1630. If you need help filling out the form or need to submit your request in some other way, please call at the above numbers.