

Overview

The Community Development Department (CDD), Housing Division administers a Middle-Income Rental Program applicant waiting pool for affordable apartments designated for households earning between 80 – 120% of Area Median Income (AMI).

The Middle-Income Rental Program apartments will be privately developed, owned, and managed. The Community Development Department's role is to identify qualified applicants to occupy the apartments.

Households interested in being added to the Middle-Income Rental Program waiting pool must complete the enclosed Preliminary Application and include all the required documentation listed in the application. *Incomplete applications will not be accepted.*

Applications will be considered in the order they are received, based on preferences.

Mail or drop-off completed applications to:

Cambridge Community Development Department 344 Broadway, 3rd Floor Cambridge, MA 02139

We cannot accept applications via email or fax.

For more information, visit:

www.cambridgema.gov/CDD/Housing

	MIDDLE-INCOME RENTAL PROGRAM INCOME LIMITS					
Household Size	1-PERSON	2-PERSON	3-PERSON	4-PERSON	5-PERSON	6-PERSON
MINIMUM INCOME (80% of AMI)	\$91,200	\$104,200	\$117,250	\$130,250	\$140,700	\$151,100
MAXIMUM INCOME (120% of AMI)	\$125,080	\$142,940	\$160,810	\$178,680	\$192,970	\$207,270

The income chart is based on federal, state, and Cambridge income limits for housing programs. These limits are determined by the US Dept. of Housing and Urban Development and are subject to change.



The City of Cambridge Community Development Department does not discriminate on the basis of disability. The Department will provide auxiliary aids and services, written materials in alternative formats, and reasonable modifications in policies and procedures to persons with disabilities upon request.

MIDDLE-INCOME RENTAL PROGRAM ELIGIBILITY REQUIREMENTS

To qualify for a Middle-Income Rental Program unit, households must have income and assets within the limits outlined below. Income and assets are verified at the Final Application stage.

INCOME LIMIT

The Middle-Income Housing Rental Program is designed for households earning an annual gross income between 80 – 120% of Area Median Income (AMI). Please review the income limit table on Page 1 to determine if your household meets the income limits, adjusted for household size.

ASSET LIMIT

Household liquid assets at the time of application must not exceed \$100,000 to be eligible for the Middle-Income Rental Program (ex. Checking/Savings/Money Market/Investment accounts). Assets in restricted retirement accounts (401(k), IRA, etc.) will not be considered towards the asset limit. Households where all members are 62 or older, and households where all members are disabled, are eligible for special consideration.

PRELIMINARY APPLICATION REVIEW

Once submitted, applications will first be sorted according to the eligible unit size based on the occupancy standards (on page 3). For each bedroom size, applications will be placed into applicant preference groups and are as follows:

- Current Cambridge Resident (4 points)
- Household with a child under 6 (1 point)
- Household with a child under 18 (1 point)
- Households with emergency need(s), as defined on page 4 (1 point)

THE APPLICANT POOL WITH THE HIGHEST POINTS FOR EACH BEDROOM SIZE WILL BE CONSIDERED BEFORE APPLICANT POOLS WITH LOWER POINTS.

Please Note: Applicants who are not presently living in Cambridge but are employed in Cambridge will be considered after all eligible Cambridge residents. These applicants will follow the same preference point system as Cambridge residents. Contact the Community Development Department for further information.

APPLICANT SELECTION

Applications will be added in the order they are received, based on preferences.

When a middle-income apartment is available for applicants in the waiting pool, applicants in the highest preference group will be asked to submit a Final Application to determine their income and asset eligibility. If the applicant is determined not to be income or asset eligible for the Middle-Income Rental Program, is not approved by the property manager, declines the opportunity to rent a unit, or withdraws their application, the next applicant within the highest remaining preference group will be considered. The tenant selection process will continue on this basis until the unit is filled.

VIEWING AND LEASING MIDDLE-INCOME APARTMENTS

- Applicants who have submitted a Final Application and are determined eligible for the Middle-Income Rental Program by CDD will then be screened by the property manager for a credit check, CORI background check, and landlord references.
- Applicants that are approved by the property management company will be contacted to tour the available unit and
 will have 48 hours to decide whether to lease the unit after viewing it. The applicant will enter into a 12-month lease
 with the management company.
- Applicants who enter into a lease are responsible for all terms and conditions of the lease during the term of their tenancy.
- Applicants that are denied due to credit will be notified in writing by the management company. Applicants may
 file an appeal in writing within (5) business days to the property management company.

RENTAL CALCULATION AND PAYMENTS

Depending on the middle-income apartment being leased, rents will either be calculated at 30 percent of the households' gross monthly income or a set, affordable rent. Final rents will be determined after an allowance for utilities paid by the tenant is deducted from these amounts. For tenants who require a parking space, there will be an additional fee.

OCCUPANCY STANDARDS

TO DETERMINE UNIT SIZE

To determine appropriate unit size for an applicant, the following criteria will be used:

- No more than two persons shall occupy the same bedroom.
- Couples or those in a similar living arrangement are required to share a bedroom.
- Two children of the same gender shall share a bedroom unless the difference in their ages is 10 years or more

Some applicants may choose to under-house themselves in order to apply for multiple unit sizes. For example:

- Children of opposite genders may share a bedroom if the sum of their ages is 15 or less.
- Children of the same gender may occupy the same bedroom regardless of age.

TO DETERMINE HOUSEHOLD SIZE

We will review your household based on:

- All current, household members living together
- Your intended household composition

Household members will include:

- an unborn child(ren)if the scheduled due date is within four (4) months (as documented by a medical professional);
- Children where applicants have physical custody for at least 30% of their overnights (as documented by a legal separation agreement or a signed and notarized parental agreement);
- Children of applicants, who are enrolled, full-time students aged 18 years and older, if they are listed as dependents on their parent's tax return.

REQUIRED HOUSEHOLD INFORMATION DOCUMENTATION*

THE FOLLOWING DOCUMENTS MUST BE PROVIDED WITH YOUR PRELIMINARY APPLICATION

HOUSEHOLD SIZE

PLEASE PROVIDE EVIDENCE OF YOUR CURRENT HOUSEHOLD SIZE BY SUBMITTING <u>TWO (2)</u> OF THE FOLLOWING DOCUMENTS:

- A copy of rental lease signed and dated within the last year in your name and listing members of your household.
- A copy of your signed current federal tax return (Form 1040) with W2s indicating your current household size.
- A copy of birth certificates for all household members under the age of 18. (For adult household members, a copy of a passport, state-issued ID or birth certificate.).

CAMBRIDGE RESIDENCY*

FOR CURRENT CAMBRIDGE RESIDENTS PLEASE PROVIDE RESIDENCY DOCUMENTATION FROM THE FOLLOWING THREE OPTIONS:

Option 1: Provide one document from Category A and one document from Category B; or

Option 2: Provide three documents from Category B; or,

Option 3: Provide two documents from Category B and two documents from Category C

Category A	Category B	Category C
Current Lease Current Section 8 Agreement or Income Verification Worksheet Letter from shelter or transitional housing facility in Cambridge	Current Utility Bill (electric, gas, oil, cable) Massachusetts ID Current Cambridge Public School Enrollment Federal Tax Return Car Registration Excise Tax Bill Renter's Insurance Statement Three months of rent receipts	Bank or other Financial Institution Statement Credit Card Statement Cell Phone Bill Public Benefit Letter or Statement Medical Bill or Statement Current Voter Registration

We may require residency documentation for additional adults in your household.

FOR FORMER CAMBRIDGE RESIDENTS: Did you previously live in Cambridge within the last 12 months? Were you displaced due to a court order or other judgment issued for a no-fault eviction? If yes, please submit both:

- Documentation listed above to demonstrate your prior residence in Cambridge; and,
- Copy of court order or other judgment that was entered against your household which shows that the action was not brought to address a fault of your household.

FOR APPLICANTS WITH MOBILE (HOUSING CHOICE) VOUCHERS FROM THE CAMBRIDGE HOUSING AUTHORITY: Do you live outside of Cambridge? Were you first awarded a mobile rental housing voucher from the Cambridge Housing Authority within the last twelve months? If yes, please submit:

• Documentation your initial approval for a rental housing choice voucher issued by the Cambridge Housing Authority.

^{*}Non-Cambridge residents do not need to supply this information

FOR APPLICANTS LIVING IN A SHELTER OR TRANSITIONAL HOUSING IN CAMBRIDGE: Do you live in a shelter or transitional housing in Cambridge? If yes, please submit:

• A current letter from the facility with information about your residency

FOR HOMELESS APPLICANTS THAT PREVIOULY LIVED IN CAMBRIDGE: Do you live in a shelter, or do not have permanent housing? Was your last permanent residence in Cambridge? If yes to both, please submit:

- Documentation listed above to demonstrate that your last permanent residence was in Cambridge;
 and,
- A current letter from shelter facility with information about your residency; or,
- Document must be signed by the applicant and a "professional" that has provided the applicant with housing-related assistance. A professional can include: a housing search caseworker, a social service provider, shelter staff, school personnel, an attorney, medical professional, or social worker or a mental health professional. The document must specify, under penalty of perjury, that the professional believes the applicant is not permanently housed or is living unsheltered.

EMERGENCY NEED DOCUMENTATION

HOUSEHOLDS WITH THE FOLLOWING EMERGENCY NEED(S): IF YOU ARE CLAIMING AN EMERGENCY, YOU MUST ATTACH A COPY OF THE EVIDENCE SUPPORTING YOUR EMERGENCY SITUATION:

- Applicant is currently facing a no-fault eviction (provide a copy of court order).
- Applicant is living in a property that has been cited by the City for outstanding code violations (provide report from Inspectional Services Department).
- Applicant is paying more than 50% of their monthly gross income on rent (submit documentation of current rent receipt and lease agreement).
- Applicant is living in an overcrowded situation defined as having more than two individuals per bedroom (provide a signed lease listing all household members and apartment bedroom size).
- Applicant is homeless (provide a letter from shelter).

*THE COMMUNITY DEVELOPMENT DEPARTMENT, HOUSING DIVISION RESERVES THE RIGHT TO REQUEST ADDITIONAL SUPPORTING DOCUMENTATION TO DETERMINE ELIGIBILITY AND PREFERENCES.





Applicant Name (Head of Household):				
Co-Applicant Name:					
Bedroom Size (Please check off the uni 3). studio 1-bedroom			Nore information of 3-bedroom	on occupancy star	ndards is on Page
Address:					
Number & Street	Apt. #	City		State	Zip Code
Telephone #:			_No. of people in	n household:	
Primary	Secondary				
Email address:				_	
How long have you lived at current a	ddress?	What is	s your current re	nt amount?	
# of bedrooms in present unit?	Current Prop	erty Manag	ement Co. /Land	lord:	
Marital Status: ☐ Married ☐	Single \Box D	ivorced	☐ Separated	□Widowed	☐ Other
Ethnicity: Latino or Hispanic	□Not Latino d	or Hispanic	□Prefer not to	provide	
Race:(Please check all boxes that ap ☐ Black or African- American ☐ Na ☐ Prefer not to provide					
Are you a Veteran? ☐ Yes ☐ No					
Driver's License # or State ID#	State o	f Issue:			
How did you hear about this opportu	unity?				
Is your primary employment in Cam	bridge? □Yes □N	No Ifyes	s, where?		
Do you own a home or have owners If yes, when?	•	•			
Have you or any members of your h	ousehold ever file	ed bankrupt	tcy? □Yes □No	If yes, when? _	
Have you ever been evicted? ☐ Yes	□No				
Have you or anyone in your househousehousehousehousehousehousehouse					eanor
Contact person in case of an emerge	ncy:Phone #:			-	

RESIDE	NCES: LIST YOUR ADDRE	SS(ES) FOR THE LAST THREE Y	EARS:		
	Address	Landlord	Telephone #	Date From	Date To
HOUSE	HOLD MEMBERS: LIST AL	L PERSON(S) TO OCCUPY THE	APARTMENT INCLU	DING THE API	PLICANT
	Name	SS #	DOB	Relation App	ship to olicant
				Head of H	ousehold
EMERG	GENCY NEED				
If you h	nave an emergency need, p	olease check which of the follow	ving situations your h	ousehold is fac	cing**
. 🗆		n (provide court filing of court or	-		J
		has been cited by the City's Insp ions (provide documentation fro	· ·	artment for	
	_	f your monthly gross income for		ceipt or lease o	agreement).
	_	l situation defined as having mo nts and bedroom size of unit)	re than two individua	ls per bedroor	m (provide
	_	er from Shelter in which you are	residing)		
**THO	SE CLAIMING AN EMERGEN	CY MUST ATTACH COPIES OF DOC	CUMENTION OUTLININ	G YOUR EMER	GENCY
SITUAT					
	IBLE UNIT	as a disability and requires acco	accibility foatures in y	our home inle	aasa chack
which		as a disability and requires acce	essibility reacures in y	our nome, pre	ease check
_ _ _	Mobility (including whee Hearing Vision	elchair)			

The City of Cambridge Community Development Department does not discriminate based on disability. The Department will provide auxiliary aids and services, written materials in alternative formats, and reasonable modifications in policies and procedures to persons with disabilities upon request.

INCOME INFORMATION FOR ALL HOUSEHOLD MEMBERS

List the current sources of all household income: This includes but not limited to, full and/or part-time employment.

Household Member	Total Income and Frequency of Pay (Weekly, Bi-weekly, Monthly, Annually)		Source of Income
	\$	/per_	

CERTIFICATIONS

I/We certify, under penalty of perjury, all information on this application to the best of my/our knowledge is true. I/We understand that false information given is sufficient grounds for rejection of this application. Furthermore, verification may be obtained from any source herein.

Penalty for False or Fraudulent Statement, U.S.C.

"Title 18, Section 1001, provides: "Whoever, in any matter within the jurisdiction of any department or agency of the United States knowingly and willfully falsifies.... Or makes any false fictitious or fraudulent statements or representations, or makes or uses any false writing or document knowing the same to contain any false, fictitious or fraudulent statements or entry, shall be fined not more than \$10,000 or imprisoned not more than five (5) years or both."

All persons whose names will appear on the lease and are 18 years old or older must sign here:

Signature:	Date:
Signature:	Date:
Signature:	Date:
information regarding my household's eligibility for background information and credit history, includin information, including any agency or housing authorized to the control of the con	ridge and the affiliated Private Management Staff to obtain housing, including income, present or former tenancies, criminal ng court judgments and bankruptcies, from any parties having such ority managing any housing subsidy for which I am eligible. I information is requested to release it to the City of Cambridge and
Signature:	Date:
Signature:	Date:
Signature:	Date:

APPLICANT RE	LEASE AND CONSENT			
Cambridge, Comm	ed below without liability, in the second sec	nformation regarding e ment.	mployment, income	
INFORMATION	COVERED			
may be requested medical or child ca	include, but are not limited are allowances. I/We under pertinent to my eligibility fo	d to; personal identity, s stand that this authoriz	tudent status, emplo ation cannot be use	d to obtain information about
GROUPS OR IND	DIVIDUALS THAT MAY B	E ASKED		
The groups or indi	ividuals that may be asked	to release the above inf	ormation include, bu	ut are not limited to:
	 Past and Present Employers Veteran Administrations Support and Alimony Providers State Unemployment 	Financial	ons curity ration	 Retirement Systems Welfare Agencies
CONDITIONS				
authorization is or	photocopy of this authoriz n file and will stay in effect riew this file and correct an	for a year and one mon	th from the date sign	oove. The original of this ned. I/We understand I/We
SIGNATURES				
Applicant/Resident		(Print Name)		Date
Co/Applicant/Resid	ent	(Print Name)		Date

PLEASE SUBMIT COMPLETED PRELIMINARY APPLICATION TO:

Cambridge Community Development Department, Housing Division 344 Broadway, 3^{rd} Floor Cambridge, MA 02139

Applications submitted via fax or email will not be accepted.



Please use this checklist to verify that you have completed the Preliminary Application correctly and have attached copies of the required documentation along with your application. **Incomplete applications will not be considered.**

	Please review Occupancy Standards on Page 3 to determine appropriate bedroom size for your household
	 Fully completed and signed Preliminary Application Household size documentation. Provide evidence of your current household size from two (2) of the following A copy of rental lease signed and dated within the last year in your name and listing members of your household. A copy of your signed current federal tax return (Form 1040) with W2s indicating your current household size.
_	 A copy of birth certificates for all household members. (For adult household members, a copy of a passport, state-issued ID or birth certificate).
	Are you a Cambridge Resident? To be considered for Cambridge residency preference, we are providing three options:

Option 1: Provide one document from Category A and one document from Category B; or **Option 2**: Provide three documents from Category B; or,

Option 3: Provide two documents from Category B and two documents from Category C

Category A	Category B	Category C	
 Current Lease Current Section 8 Agreement or Income Verification Worksheet Letter from shelter or transitional housing facility in Cambridge 	 Current Utility Bill (electric, gas, oil, cable) Massachusetts ID Current Cambridge Public School Enrollment Federal Tax Return Car Registration Excise Tax Bill Renter's Insurance Statement 	 Bank or other Financial Institution Statement Credit Card Statement Cell Phone Bill Public Benefit Letter or Statement Medical Bill or Statement Current Voter Registration 	

Did you live in Cambridge in the last 12 months? *Please refer to page 3-4 for required documentation to qualify for Cambridge residency preference.*

- If you are claiming an emergency need, you must attach a copy of the evidence supporting your emergency situation:
 - Applicant is currently facing a no-fault eviction (provide a copy of court order).
 - Applicant is living in a property that has been cited by the City for outstanding code violations (provide report from Inspectional Services Department).
 - Applicant is paying more than 50% of their monthly gross income on rent (submit documentation of current receipt and lease agreement).
 - Applicant is living in an overcrowded situation defined as having more than two individuals per bedroom (provide a signed lease listing all household members and apartment bedroom size).
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