

**2024 Ready Renter Lottery Application**  
**775 Main Street, West Dennis, MA**  
**APPLICATION DEADLINE: August 27, 2024 at 4 PM**



The Cape Cod Ready Renter Program is currently conducting a lottery for the affordable apartments located at 775 Main Street, West Dennis, MA. You **must** apply using this application in order to be considered for these units and included in this lottery. The application is due August 27, 2024 at 4 P.M. at the Plymouth Redevelopment Authority, 26 Court Street, Plymouth, MA 02360 Applications must be delivered or postmarked by the due date and time listed here. Applications postmarked by the due date and time must be received no later than 5 business days from the due date. Applications received after this date will not be processed. Applications which are incomplete will not be accepted. **NO EXCEPTIONS! READ THESE INSTRUCTIONS CAREFULLY!**

Successful applicants shall be ranked by lottery. The lottery will consist of all qualified applications received by the due date listed in this application. After the lottery, the lotteried list shall be used to select the tenants for the affordable units. Qualified applicants not placed in an affordable unit shall be placed on the wait list for future affordable housing vacancies at this property. Getting on this list does not guarantee you housing, but it does mean that when there is availability, you may be called. If you are called, you will then have an opportunity to view the unit and decide if you want to rent it. At this point, you will need to submit a FINAL APPLICATION and documentation for certification of income eligibility prior to leasing. Households with rental vouchers are encouraged to apply. **THIS IS AN EQUAL HOUSING OPPORTUNITY.**

Households must remain income eligible to rent an affordable unit. Rental Rates and Income Qualification will vary depending on projects; all rents will be affordable; most require first/last month's rent and a security deposit.

The current income limits are: \$68,500 for a household of 1, \$78,250 for a household of 2, \$88,050 for a household of 3, \$97,800 for a household of 4, \$105,650 for a household of 5, and \$113,450 for a household of 6. Other requirements apply.

To be eligible for an affordable rental unit, no household member may own a home (even in Trust) at the time of executing the lease for the affordable unit. This program requires that households renting an affordable unit must use the unit as their primary residence, submit to an annual recertification of income, and notify the program of any changes in household members and/or contact information. Additional information may be required to establish and maintain eligibility. For example, if a new member joins a household, revised income information and documentation will be required.

**Application are due August 27, 2024 at 4 P.M. at the  
Plymouth Redevelopment Authority, 26 Court Street, Plymouth, MA 02360**

If you need additional information, require assistance completing this application, or have any questions contact: Maggie Spade-Aguilar, Housing Coordinator, Town of Dennis at [mspade-aguilar@town.dennis.ma.us](mailto:mspade-aguilar@town.dennis.ma.us) or Mary Waygan, Affordable Housing Program Administrator, Town of Yarmouth at 508-398-2231 x 1275

**There is no rental assistance attached to these units.  
Rental Voucher Holders Encouraged to Apply.**

Discrimination 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 is specifically prohibited in the selection of applicants for this housing opportunity.

Disabled persons are entitled to request a reasonable accommodation of rules, policies, practices, or services, or to request a reasonable modification of the housing, when such accommodations or modifications are necessary to afford the disabled person equal opportunity to apply for, use and enjoy the housing

## **775 Main Street, West Dennis, MA Lottery Application Instructions**

1) **COMPLETE AND SIGN THIS APPLICATION.** Complete this application, sign it, and submit to Plymouth Redevelopment with **all** applicable documentation requested here in section 2):

2) **SUBMIT INCOME, ASSETS, BENEFITS and TAX DOCUMENTATION:** Copies of the following must be attached and submitted with this application for all household members over 18 years of age. Attach all that apply to you and your household members.

- A. **PAYSTUBS and BENEFITS LETTER:** Two (2) most recent pay stubs and/or benefits letter from Social Security
- B. **TAX RETURNS and DOCUMENTATION:** Copy of your most recent tax return; return must be signed. If you are self-employed you must submit a copy of your most recent tax return and most recent profit and loss statement.
- C. **W2s:** Copy of your most recent W-2s
- D. **BANK AND ACCOUNT STATEMENTS:** One copy of the most recent statement for ALL savings, checking, retirement, and other asset accounts.
- E. **RENTAL VOUCHER:** Copy of evidence of Section 8 Voucher or other rental voucher, or pre-approved assistance.

4) **NOTIFICATION** Once all the relevant information is received and clarified, the documentation will be processed to determine income eligibility and you will be notified.

5) **FINAL APPLICATION & FIRST/LAST/SECURITY DEPOSIT:** This application is an initial application. All applicants who are offered a unit must complete a **FINAL APPLICATION** Prior to you accepting a unit, you will need to submit a full final application and documentation for your income eligibility to be certified before a lease can be signed. Your household will also need to show ability to pay any **FIRST MONTH'S/LAST MONTH'S RENT AND SECURITY DEPOSIT** required by property owner.

5) We are available to assist individuals in the completion of their application and are able to accommodate households with disabilities that may impede their ability to complete the application. We can also arrange for assistance for households that have limited English proficiency. Applicants have the right to request a reasonable accommodation(s), which may include a change to a policy, procedure or practice to afford a person with a disability an equal opportunity to participate fully in the housing program or to use and enjoy the housing. Applicants may also be entitled to a reasonable modification(s) of the housing, when such modifications are necessary to afford a person with a disability an equal opportunity to use and enjoy the housing.

6) Income counted from assets over \$5,000 is the higher of the actual income from the asset or income imputed at 0.6%.



# Lottery Application 775 Main Street, West Dennis, MA

Applicant's Name \_\_\_\_\_

Current Address/PO Box \_\_\_\_\_

\_\_\_\_\_ Zip \_\_\_\_\_

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

E-Mail Address \_\_\_\_\_

Total Number of People in Household \_\_\_\_\_

Non-English Speaking Applicant (optional)? \_\_\_\_ Yes \_\_\_\_ No

Language Preference (optional) \_\_\_\_\_

Does any household member currently own a residential property? If yes, please explain:

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

**BEDROOM SIZE REQUESTED:** \_\_\_\_ 1BR \_\_\_\_ 2 BR

**Accessibility Preference and Accessibility Requested:** Responses may increase your chances of qualifying for accessibility preference.

Does any member of your household require an accessible unit? \_\_\_\_ Yes \_\_\_\_ No

If yes, please explain (responding to this question is optional): \_\_\_\_\_

\_\_\_\_\_

**ACCESSIBILITY REQUESTED (check all that apply):**

\_\_\_\_ Wheelchair accessible unit

\_\_\_\_ Unit accessible for sensory impairments

\_\_\_\_ Other accessible features needed, please describe: \_\_\_\_\_

\_\_\_\_\_

**Local Preference:** Responses may increase your chances of qualifying for local preference. Do you or any member of your household:

- Live in Dennis
- Work in Dennis
- Have a child in the Dennis School System

**Veteran Preference:** Responses may increase your chances of qualifying for Veteran preference. Are you or any member of your household a US Veteran: \_\_\_\_ Yes \_\_\_\_ No

**Optional:** Do you or any member of your household classify yourself as any of the following? (This may include more than one group). Responses may increase your chances of qualifying for local preference through minority balancing of the local preference pool. Also, responses will help us track the diversity of the applicant pool.

- Asian/Native Hawaiian/Pacific Islander
- Black/African-/Caribbean-American
- Latino
- Native American

- White/Caucasian
- Cape Verdean
- Another Race or Ethnicity (please specify): \_\_\_\_\_



**Lottery Application 775 Main Street, West Dennis, MA**  
HOUSEHOLD COMPOSITION Please list ALL person will live in your home:

	Name	Relation-ship to head	Age	School Attending and Town
Head				
2				
3				
4				
5				

**EMPLOYMENT INCOME AND HISTORY**

**\*\*Please attach to this your two most recent pay stubs for all members over the age of 18 who are working. If self-employed please attach a copy of your tax return and profit and loss statement. Attach additional sheets if needed.**

HOUSEHOLD MEMBER NAME	SOURCE OF INCOME:
	CURRENT EMPLOYER:
	ADDRESS
	POSITION HELD:
	How long employed? Supervisor:
	Phone Number
	Income/Pay Rate:

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	CURRENT EMPLOYER:
	ADDRESS
	POSITION HELD:
	How long employed? Supervisor:
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## OTHER INCOME

Please list ALL SOURCES of income as requested below. If a section does not apply, cross it out or write N/A.

HOUSEHOLD MEMBER NAME	SOURCE OF INCOME	GROSS MONTHLY AMOUNT
	Social Security	
	Social Security	
	Social Security	
	Alimony	
	Child Support	
	Child Support	
	SSI Benefits	
	SSI Benefits	
	SSI Benefits	
	Pension – list source	
	Pension – list source	
	Veteran’s Benefits	
	Veteran’s Benefits	
	Unemployment Compensation	
	Unemployment Compensation	
	Title IV / TANF	
	Title IV / TANF	
	Interest Income (source)	
	Other:	
	Other:	
	Other:	

Do you anticipate any changes in income in the next 12 months?

Yes     No    If yes, please explain: \_\_\_\_\_

\_\_\_\_\_



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## ASSETS

If your assets are too numerous to list on this page, please request an additional form.

If a section does not apply, cross it out or write N/A.

**\*\* Please attach to this application the most recent statements for each of the below:**

### FINANCIAL INSTITUTIONS

CHECKING	#	BANK	Balance \$
SAVINGS	#	BANK	Balance \$
TRUST ACCOUNTS	#	BANK	Balance \$
CERTIFICATES OF DEPOSITS (CD's)	#	BANK	Balance \$
CREDIT UNION ACCOUNTS	#		Balance \$

### ALL OTHER ASSETS

SAVINGS BONDS	#	Maturity Date	Face Value\$
LIFE INSURANCE POLICY	#	Company/issuer	Cash Value
STOCKS	Name	# Shares	Div. Paid
BONDS	Name	# Shares	Interest or Dividend \$
Investment Property	Location	Value	



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PLEASE CHECK THE FOLLOWING AND SIGN BELOW:

- 1.  Yes I/We certify that the information in this application and in support of this application is true and correct to the best of my/our knowledge and belief under full penalty of perjury. I/We understand that perjury will result in disqualification from further consideration in this program.
  
- 2.  Yes I/We understand that the use of this application is for placement on a Ready Renter List to rent an affordable unit in Yarmouth, and does not guarantee an offer. Additionally, I/we want to be considered for other Ready Renter Units in the Towns I indicated on page 3.
  
- 3.  Yes I/We understand that the property owner or property manager of a specific unit makes the final tenant selection determination and NOT the Ready Renter List Administrator.
  
- 4.  I/We  did  did not file taxes for year 2022.  
I/We  did  did not file taxes for year 2023.
  
- 5.  Yes I/We give permission to share the application and materials with relevant staff of the Town of Yarmouth staff and/or the designated monitoring agent.

Your signature(s) below gives consent to the Town of Yarmouth or its Designee to verify information provided in this application.

No applications will be considered complete unless signed and dated by the Applicant and Co-Applicant (if any).

\_\_\_\_\_  
Applicant Signature

\_\_\_\_\_  
Date

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

\_\_\_\_\_  
Date