



**APPLICATION FOR HOUSING**

**Please Print Clearly**

Please complete this application and return to:	<b>Name:</b> Property Management
	<b>Address:</b> 16C N. Maple Street Florence, MA 01062
	Phone: 413-570-4916 Fax: 413-586-9060

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

Applicant Name(s): \_\_\_\_\_

Address: \_\_\_\_\_  
Street Apt.# City State ZIP

Daytime Phone: \_\_\_\_\_ Evening Phone: \_\_\_\_\_

**Property/Bedroom size requested:**

- 0 bedroom efficiency 96-98 King Street Northampton
- 0 bedroom efficiency G0 West Main Street Florence
- single room shared facilities 16 North Maple Street Florence
- single room shared facilities 82 Bridge Street Northampton
- 1, 2, 3 BR apartments 18, 34, 79 Michelman Ave Northampton
- 1, 2, 3 BR apartments 46-48 School Street Northampton
- 1, 3, 4 BR apartments 22-34 New South Street Northampton
- 1, 2, 3 BR apartments 683-687 Main Street Amherst

I require a handicap accessible apartment

<b>B. HOUSEHOLD COMPOSITION</b>						
Please include everyone that will occupy the apartment						
	Name	Relationship to head	Birth Date	Age (optional)	SS#	Student Y/N
Head						
Co-T						
3.						
4.						
5.						
6.						
7.						
8.						

<b>C. INCOME</b>		
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
		\$
		\$
		\$
		\$
<b>TOTAL GROSS ANNUAL INCOME</b> (Based on the monthly amounts listed above x 12)		\$

(continued on other side)

Do you hold a section 8 or other mobile housing voucher?  yes  no; if yes please indicate type and issuing agency.

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**F. REFERENCE INFORMATION**

Current Landlord	Name:	
	Address:	
	Home Phone:	
	Bus. Phone:	
	How Long?	

**CERTIFICATION**

I/We hereby certify that I/we do/will not maintain a separate subsidized rental unit in another location. I/We further certify that this will be my/our permanent residence. I/We understand I/we must pay a security deposit for this apartment prior to occupancy. I/We understand that my/our eligibility for housing will be based on applicable income limits and by management’s selection criteria. I/We certify that all information in this application is true to the best of my/our knowledge and I/we 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 (S):**

(Signature of Tenant)	Date
(Signature of Co-Tenant)	Date
(Signature of Co-Tenant)	Date
(Signature of Co-Tenant)	Date