

# Affordable Unit Application

## 21 Crowninshield Condominium

21 Crowninshield Road, Brookline, MA 02446

**Applications and Mortgage Pre-Approvals must be delivered by  
2pm on September 13, 2022.**

**DO NOT SEND APPLICATIONS TO THE PROPERTY. SEND  
APPLICATIONS TO THE NEEDHAM ADDRESS BELOW.**

**\*Please also note that households needing all 3 bedrooms will get priority over households who do not need all 3 bedrooms. Therefore, applications from Type I & II households will not be entered into the lottery. Please see page 3 for more details.**

**Sales Prices** (do not change based on applicant's income)

3BR condos are: \$305,100 (condo fees are \$192/mo.). **One garage and one outside parking space are included.**

Condo fees cover trash and snow removal, landscaping and other maintenance of common areas, water and sewer costs and master insurance, management fees, and a replacement reserve.

**Maximum Household Income Limits:** \$89,500 (2 people), \$100,700 (3 people)  
\$111,850 (4 people), \$120,800 (5 people) \$129,750 (6 people)

**The Maximum Household Asset Limit for the homes is \$75,000.** There are no MINIMUM Household Income requirements but households must submit mortgage pre-approvals. The Information Packet has more details.

### **Directions:**

**You must include mortgage pre-approvals as directed with this application.** The first section must be filled out entirely in order for your application to be processed. Every space given to initial must be initialed, even if you answer "N/A". If a question does not apply to you, check "N/A". LEAVE NOTHING BLANK. Send or drop off all applications and documentation by the date at the top of this page to:

SEB Housing  
Re: 21 Crowninshield  
257 Hillside Ave  
Needham, MA 02494  
Fax: 617.782.4500  
Email: [info@sebhousing.com](mailto:info@sebhousing.com)  
Phone: 617-782-6900 x209

If you fax or email, please be sure you send both sides of double sided pages!!!

*Este documento es muy importante. Favor de comunicarse con el SEB Housing en [info@sebhousing.com](mailto:info@sebhousing.com) o 617.782.2300 x207 y deja un mensaje para ayuda gratis con el idioma. Este documento é muito importante. Entre em contato com o SEB Housing em [info@sebhousing.com](mailto:info@sebhousing.com) ou 617.782.2300 x207 e deixe uma mensagem para assistência linguística gratuita.*



This is an important document. If you require language interpretation, please call the management agent for this development directly.

Este es un documento importante. Si usted requiere interpretación de idioma, por favor llame directamente al agente de gestión para la propiedad.

这是一份重要文件，如果您需要翻译，请直接致电该物业的代理。

Este é um documento importante. Se precisar de interpretação de linguagem, favor chamar diretamente o agente de administração da propriedade.

Este é um documento importante. Caso você precise de interpretação de idiomas, por favor, ligue diretamente para o agente responsável por gerenciar a propriedade.

"Это важный документ. Если Вам необходима интерпретация языка, обратитесь, пожалуйста, непосредственно к административному агенту по поводу данного объекта."

Se yo dokiman enpòtan. Si ou bezwen sèvis entèpretasyon, tanpri rele ajan jesyon an, pou pwopriyete an, dirèkteman.

Questo è un documento importante. Se si ha bisogno di un interprete per la lingua, chiamare l'agente responsabile, per la proprietà, direttamente.

Đây là một tài liệu quan trọng. Nếu quý vị cần phiên dịch, vui lòng gọi trực tiếp cho đại lý bất động sản.

នេះជាឯកសារសំខាន់។ ប្រសិនបើអ្នកត្រូវការការបកប្រែភាសា,  
សូមទូរស័ព្ទទៅភ្នាក់ងារគ្រប់គ្រងសម្រាប់ការអភិវឌ្ឍន៍នេះដោយផ្ទាល់។



**21 Crowninshield.** Please provide all the following contact information for the Head of Household (please print clearly):

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

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Home Phone:(\_\_\_\_\_) \_\_\_\_\_ Work Phone:(\_\_\_\_\_) \_\_\_\_\_

Cell Phone:(\_\_\_\_\_) \_\_\_\_\_ Employer: \_\_\_\_\_

Email address: \_\_\_\_\_ @ \_\_\_\_\_

*Please note: We will only use your email address to contact you about this application. Providing your email should facilitate the process of completing your application as you will be notified of missing documentation faster than if we can only send notifications via postal mail. We will not contact you about future lotteries unless requested.*

**Bedroom Size Information:** For which bedroom size are you applying  
 3 bedroom (for \$305,100)

Please fill out the chart below for everyone who will be occupying the unit:

NAME	AGE	HEAD OF HOUSEHOLD OR DEPENDENT	RELATIONSHIP TO APPLICANT LISTED AT THE TOP OF THIS PAGE	IS THIS PERSON A FULL-TIME STUDENT OR WILL BE A FULL-TIME STUDENT IN THE NEXT 12 MONTHS?	
				Yes	No

I certify that my Household Size is (total number of entries above) \_\_\_\_\_.

Initial(s): \_\_\_\_\_

Initial(s): \_\_\_\_\_

**HOUSEHOLD TYPE** (please check one, read the Information Packet for more details). **Please note that applications from Type I and Type II Households will NOT be entered into the lottery as we expect to have hundreds of applications from Type III Households who will have priority for these units.**

**Type III** (By program guidelines, priority for a 3BR home)

- 6 person household: all types
- 5 person household: all types
- 4 person household: all types
- 3 person household: 1 head-of-household plus 2 members/dependents
- 3 person household: 2 heads-of-household under criteria c (described above) plus 1 member/dependent

**Type II** (will not be entered into the lottery)

- 3 person household: 2 heads-of-household plus 1 dependent
- 2 person household: 2 heads-of-household *who cannot be required to share a bedroom as a consequence of sharing would be a severe adverse impact on his or her mental or physical health*
- 2 person household: 1 head-of-household plus one dependent

**Type I** (will not be entered into the lottery)

- 2 person household: 2 heads-of-household
- 1 person household: all types

**PREFERENCE INFORMATION**

**Do you or any member of your household qualify for Local Preference?** An applicant qualifies for local preference if the applicant or a member of their household fit into one of the following categories (A) a current resident of Brookline, (B) employee of the Town of Brookline or Brookline Housing Authority, or (C) a parent or guardian with children attending the Brookline Public Schools (including METCO students)

- Yes, I am applying for Local Preference, and I understand this documentation is required with my lottery application.
- No, I am not applying for Local Preference.

**If you answered “Yes” for Local Preference you MUST provide the documentation specified below NOW.**

If qualifying under definition (A) as detailed above: I will need to submit a Copy of two (2) utility bills 1 from each utility company in my name dated within the last 60 days, e.g., (1) electric, (1) oil, (1) cable, (1) gas, or (1) telephone landline (not cell phone). If utility bills cannot be provided the following documentation must be provided: current signed lease AND proof of voter registration from Town of Brookline Election Department

If qualifying under definition (B) as detailed above: I will need to submit copies of pay-stubs *AND IF THE PAY STUBS DO NOT SHOW THE ADDRESS OF THE JOB* I will need to submit a signed statement from my employer on company letterhead the states the address of the job and the employee’s name.

If qualifying under definition (C) as detailed above: I will need to submit copies of Brookline school transcripts AND proof of relation to the student (by birth certificate or legal guardianship or divorce decree)

**HOMEOWNERSHIP (CIRCLE "YES" OR "NO")**

**Has anyone listed on this application owned a home in the past 3 years or does anyone on this application currently own a home?** YES NO

If you answered NO, please move on to the next page.  
If you answered YES, please answer all the following questions.

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**To qualify as an age-qualified household, please answer the following question about the person that has owned a home in the past 3 years or who currently owns a home:**

**Are they age 55 or older?** YES NO

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**To qualify as a displaced homemaker, please answer the following questions about the person that has owned a home in the past 3 years or currently owns a home:**

<b>Are they an adult?</b>	YES	NO
<b>Have they owned a home only with a partner?</b>	YES	NO
<b>While married did they not work full-time, full year in the labor force but worked primarily without remuneration to care for the home or family?</b>	YES	NO
<b>Are they currently legally separated from a spouse?</b>	YES	NO
<b>Has the home in question already been sold?</b>	YES	NO

If you answered NO to the last two questions, you must finalize your separation and/or sell your home before you can be placed on the Waiting List. **Please read the Information Packet for more details.**

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**To qualify as a single parent, please answer the following questions:**

<b>Do you have 1 or more child of whom you have custody or joint custody, or are you pregnant?</b>	YES	NO
<b>Did you own a home with your partner or reside in a home owned by your partner?</b>	YES	NO
<b>Has the home in question already been sold?</b>	YES	NO
<b>Are you unmarried or legally separated from your spouse?</b>	YES	NO

If you answered NO to the last two questions, you must finalize your separation and/or sell your home before you can be placed on the Waiting List. **Please read the Information Packet for more details.**

**MORTGAGE QUALIFICATIONS**

1. What is the *estimated* total net value of your assets?  
(Please see the Asset Table in the Application Below)

\$

Box 1

2. What is the size of the loan in your mortgage pre-approval?

\$

Box 2

3. What is the total of Box 1 + Box 2?

\$

Box 3

If Box 3 is less than the sales price of the lowest price affordable unit(s) for which you are income eligible, you will not be allowed to move forward in this application process for that unit. Please speak to your lender for more details.

**DATABASE INFORMATION**

How did you find out about this affordable housing opportunity?  
(please be as specific as possible, if found "online" please provide web address)

**REASONABLE MODIFICATION OR ACCOMMODATION**

Persons with disabilities are entitled to request a reasonable accommodation in rules, policies, practices, or services, ("practices") when such accommodations may be necessary to afford persons with disabilities an equal opportunity to use and enjoy the housing. If you have a reasonable accommodation request related to *this Application/Certification*, please describe it here. If you have any *other* requests, including a reasonable accommodation request related to the *Owner/Developer's* practices, or a reasonable modification request related to the physical structure of the building or unit, do *not* list it here. That request must be made directly to the Owner/Developer.

**RACE (OPTIONAL)**

You are requested to complete the following optional section in order to assist in determining preference. Completing this section may qualify you for additional lottery pools. (Please check all boxes that apply):

- Alaskan Native and Native American
- Black or African American (not of Hispanic origin)
- Hispanic or Latino
- White (not of Hispanic origin)
- Asian
- Native Hawaiian or Pacific Islander
- Other (please specify) \_\_\_\_\_

## **INSTRUCTIONS FOR COMPLETING THE FOLLOWING INCOME TABLE**

Please complete the Income Table on the following two pages. After the lottery, top households will be asked to attach supporting documentation in the form of the **five most recent consecutive pay stubs and/or income statements for all sources of income, W-2 statements** and the **THREE most recent federal income tax returns** (including all attachments and amendments) for each member of the household.

For the purpose of **income determination**, "**Household**" shall mean all persons who intend to occupy the housing unit as their permanent primary residence, even if they are not included on the mortgage. Legally married couples shall both be considered part of the household, even if separated. The incomes of *all* household members will be included, with the exception of income from employment for household members under the age of 18 or any income over \$480/year of full-time students who are dependents (but please note that documentation of income for those dependents still needs to be supplied).

### **Please note:**

1. Gross income from current wages, salaries, tips, etc. is the full amount, before any deductions, and is the amount used to determine estimated current annualized income.
2. For self-employed applicants- include the contract or job name in the space provided. You will be directed to all the additional documentation you will need to submit in **Section 2**.
3. "Interest Income" refers to any amount that you receive from any asset except for amounts drawn down from a retirement account or 401K as those go on the lines for "pension" or "retirement funds".
4. Households, or their families, cannot have a financial interest in the development and a households member cannot be considered a Related Party.



# INCOME

Household Member Name	Source of Income	Current GROSS Monthly Income
	Employer (name)	
	Employer (name)	
	Employer (name)	
	Employer (name)	
	Employer (name)	
	Employer (name)	
	Employer (name)	
	Employer (name)	
	Employer (name)	
	Employer (name)	
	Employer (name)	
	Self-Employed (contract/job name)	
	Self-Employed (contract/job name)	
	Self-Employed (contract/job name)	
	Child Support/Alimony	
	Child Support/Alimony	
	Social Security Income	
	Social Security Income	
	Social Security Income	
	Social Security Income	
	SSDI	
	SSDI	
	Pension (list source)	
	Pension (list source)	
	Retirement Distributions	

Household Member Name	Source of Income	Current GROSS Monthly Income
	Unemployment Compensation	
	Workman's Compensation	
	Severance Pay	
	Title IV/TANF	
	Full-Time Student Income (18 & Over Only)	
	Full-Time Student Income (18 & Over Only)	
	<b>Periodic payments from family/friends &amp; Recurring Gifts</b> <i>(i.e. monthly/weekly money from family/friends)</i>	
	Interest Income (source)	
	Interest Income (source)	
	Interest Income (source)	
	Interest Income (source)	
	Interest Income (source)	
	Interest Income (source)	
	Interest Income (source)	
	Other Income (name/source)	
	Other Income (name/source)	
	<b>Gross Monthly Household Income (GMHI)</b>	\$ /month
<b>GMHI x 12 = Gross Annual Household Income \$ /year</b>		

# ASSETS

If a section doesn't apply, cross out or write NA. After the lottery, if you are invited forward, you will be directed to submit detailed bank/balance statements for EVERY ASSET listed here. If any household member has divested themselves of an asset for less than full and fair present cash value of the asset within two years prior to this application, the full and fair cash value of the asset at the time of its disposition must be listed below.

<b>Checking Accounts</b>	<b>Bank Name</b>	<b>Last 4 Digits of Acct Number</b>	<b>Amount</b>	
			Balance \$	
			Balance \$	
			Balance \$	
<b>Savings Accounts</b>			Balance \$	
			Balance \$	
			Balance \$	
<b>Money Transfer Applications</b>	<b>Circle all that apply in the next space →</b>	<b>Venmo</b>	<b>CashApp</b>	<b>Balance \$</b>
		<b>PayPal</b>	<b>Other</b>	
<b>Trust Account</b>			Balance \$	
<b>Certificates (or CDs)</b>			Balance \$	
			Balance \$	
			Balance \$	
<b>Savings Bonds</b>	<b>Maturity Date:</b>		<b>Value \$</b>	
	<b>Maturity Date:</b>		<b>Value \$</b>	
<b>401k, IRA, Retirement Accounts (Net Cash Value)</b>	<b>Company Name:</b>		<b>Value \$</b>	
	<b>Company Name:</b>		<b>Value \$</b>	
	<b>Company Name:</b>		<b>Value \$</b>	
	<b>Company Name:</b>		<b>Value \$</b>	
<b>Mutual Funds</b>	<b>Name:</b>	<b># of Shares:</b>	<b>Interest/Dividends</b>	<b>Value</b>
			\$	\$
			\$	\$
			\$	\$
<b>Stocks</b>			\$	\$
			\$	\$
			\$	\$
<b>Bonds</b>			\$	\$
			\$	\$
<b>Investment Property</b>			<b>Appraised Value \$</b>	
<b>Down-Payment Assistance</b> <i>(An anticipated one-time gift from family/friends to help with the mortgage down-payment)</i>			\$	

**REAL ESTATE --** You may only currently own a home if one of your household members is over the age of 55 or if you qualify as a displaced homemaker or single parent. Please read the Info Packet for more details.

Do you, or anyone on this application, own any property or have owned property in the past 3 years?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Are you, or anyone on this application, entitled to receive any amount of money from the sale of any property? (currently or thru an upcoming court settlement)	<input type="checkbox"/> Yes <input type="checkbox"/> No
<i>If yes to either question, type of property:</i>	
Location of property:	\$
Appraised Market Value:	\$
Mortgage or outstanding loans balance due:	\$

# MORTGAGE PRE-APPROVAL

## **Applications without mortgage pre-approvals will not be accepted for the lottery.**

1. I have attached a mortgage pre-approval that meets each and every one of the following standards for this affordable housing program:

- The loan must have a fixed interest rate through the full term of the mortgage.
- The loan must have a current fair market interest rate. (*No more than 2 percentage points above the current MassHousing rate, (617) 854-1000 or [www.masshousing.com](http://www.masshousing.com)*)
- The loan can have no more than two points.
- The loan cannot be an FHA or VA loan (as FHA or VA will not accept the terms of the Deed Restriction)
- The buyer must provide a down payment of at least 3% - half of which must come from buyer's own funds.

I understand that I can go to any lender of my choosing as long as the pre-approvals abide by the above standards but it is strongly recommended that I talk to a lender that has familiarity with affordable housing in Massachusetts as they will be more familiar with the process, mortgage requirements, and Deed Restrictions than a lender with no experience in affordable housing. A list of recommended lenders is in the Mortgage Pre-Approval section in the Information Packet.

I understand that the mortgage pre-approval process should be my first step in documentation gathering as this entire process and program depends on my ability to eventually get a mortgage so I can purchase a home.

I also understand that I should make copies of all the documentation I give to my bank as I may need copies to submit with this application.

Initial(s): \_\_\_\_\_

Initial(s): \_\_\_\_\_

**You must now read, sign and date the following question AND read, sign and date the following page.**

**DEED RIDER SIGNATURE OF UNDERSTANDING:**

I/We have read the resale restrictions for 21 Crowninshield Condominium and agree to the restrictions. I/We understand that the Deed Rider Summary in the Information Packet is not the actual Deed Rider and it is only intended to provide general information about Property Restrictions in typical Affordable Housing Programs. I/We understand that a full copy of the example Deed Rider is available under the listing on the SEB Housing website: <https://sebhousing.com/affordable-housing-opportunities/> and that if requested, a copy of this example Deed Rider can be mailed to me. I/We also understand that, if selected to purchase this unit, a full copy of the Deed Rider will be provided.

Full Signature of Applicant: \_\_\_\_\_ Date: \_\_\_\_\_

Full Signature of Co-Applicant: \_\_\_\_\_ Date: \_\_\_\_\_

**Please be sure to fully sign the lines above and not just initial them.**

Please read each item below carefully before you sign.

1. I hereby declare under pain and penalty of perjury that the information provided on every page of this application is true and correct. I understand that if any sources of income or assets are not disclosed on this application, or any information provided herein is not true and accurate, this application may be removed immediately from further consideration and I will no longer be allowed to reserve a unit.
2. I understand that this application will be incomplete if I do not sign and date this page and initial at all indicated points in the application and that the failure to timely and/or fully supply information in accordance with the application may result in the the denial of my application and loss of position on all Waiting Lists.
3. The undersigned certify that none of the people listed in this application, or their families, have a financial interest in the development and none of the people listed in this application can be considered a Related Party by the affordable housing guidelines that govern this property.
4. The undersigned certify that the affordable unit will be undersigned's principal residence and the undersigned cannot own a home elsewhere or in trust while living in an affordable unit.
5. I understand that while previous years' tax transcripts and documentation are required, SEB Housing LLC does not use income reported on the previous years' tax documentation to calculate current annualized income.
6. I understand that the Purchase and Sale Agreement for the units to be occupied through this affordable housing program may be subject to cancellation if any of the information above is not true and accurate.
7. I understand that this is a preliminary application and the information provided **does not** guarantee housing.
8. I understand that any material change in the income or assets of my household that occurs after the submission of this application may make me ineligible for affordable housing. I understand that any changes to income or assets that may put my household into another income tier must be reported to SEB Housing.
9. Mortgage Co-signers **are not** permitted unless they are co-tenants who will reside in the unit.
10. I acknowledge that if my email address is provided in this application, SEB Housing, LLC will correspond with me by email instead of postal mail unless I make a written request otherwise. I understand that any changes to my contact information must be reported to SEB Housing.
11. I acknowledge that the determination of eligibility by SEB Housing is based upon the guidelines that govern the Affordable Housing Program for the development and, as such, barring any confirmed error by SEB Housing in applying the guidelines and/or calculating income, the decision is final and I further agree to hold harmless SEB Housing from any claim(s) related to this application.
12. The undersigned give consent to the Town of Brookline, SEB Housing LLC, 21 Crowninshield Condominium, and MassHousing to verify the information provided in this application. The undersigned authorize the release of information necessary in determining income and assets from third-party references.

\_\_\_\_\_  
Applicant's Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Applicant's Signature

\_\_\_\_\_  
Date

**You MUST ATTACH YOUR MORTGAGE PRE-APPROVAL WITH THIS LOTTERY APPLICATION.**

**Attach all documentation as directed on the cover page of this application. For Questions contact [info@sebhousing.com](mailto:info@sebhousing.com) or call (617) 782-6900**

This development does not discriminate in the selection of applicants 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.