

**SECTION 8 HOUSING CHOICE VOUCHER PROGRAM  
CENTRALIZED WAITING LIST PRE-APPLICATION**

**For Agency Use Only:**  
Date/Time

**1. HEAD OF HOUSEHOLD**

Social Security or Alien Registration #: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

First Name: \_\_\_\_\_ Middle: \_\_\_\_\_ Last Name: \_\_\_\_\_

Home Address\*: \_\_\_\_\_

City/Town: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Telephone: \_\_\_\_\_ E-mail: \_\_\_\_\_ Work Address\* (City/Town ONLY): \_\_\_\_\_

**\*Some housing authorities give preference to applicants and/or spouses living or working in the housing authority's town.**

Mailing Address (if different from Home Address): \_\_\_\_\_

City/Town: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

**2. SPOUSE/PARTNER**

Social Security or Alien Registration Number: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

First Name: \_\_\_\_\_ Middle: \_\_\_\_\_ Last Name: \_\_\_\_\_

Work Address\* (City/Town ONLY): \_\_\_\_\_

**3. HOW MANY PEOPLE WILL LIVE IN THE UNIT? Please include yourself.** \_\_\_\_\_

**4. TOTAL GROSS ANNUAL HOUSEHOLD INCOME:** \_\_\_\_\_

**5. IS HEAD OF HOUSEHOLD (Check ALL that apply):**

- |  |   |
|--|---|
| <input type="checkbox"/> White                         | <input type="checkbox"/> Black/African American                 |
| <input type="checkbox"/> American Indian/Alaska Native | <input type="checkbox"/> Native Hawaiian/Other Pacific Islander |
| <input type="checkbox"/> Asian                         |   |

**6. IS HEAD OF HOUSEHOLD (Check only one):**

- ☐ Hispanic      ☐ Non-Hispanic

Data on race & ethnicity is collected in accordance with federal regulations. Your answers will not affect your application.

**7. PREFERENCES (Check ALL that apply.)**

Please read attached "Definitions of Preferences" to determine which apply to you. **NOTE:** Participating housing authorities may or may not use some or all of the preferences listed below. (A housing authority will request documentation of preferences at the time you reach the top of the waiting list and are selected for final determination.)

- |   |   |
|---|---|
| <input type="checkbox"/> 1. Board of Health Condemnation                          | <input type="checkbox"/> 12. Homeless                                       |
| <input type="checkbox"/> 2. Disabled  | <input type="checkbox"/> 13. Rent Burdened 50% of Income                    |
| <input type="checkbox"/> 3. Displaced by Hate Crimes, Reprisals                   | <input type="checkbox"/> 14. Rent Burdened 40% of Income                    |
| <input type="checkbox"/> 4. Displaced by Landlord Non-Renewal                     | <input type="checkbox"/> 15. One-person Family                              |
| <input type="checkbox"/> 5. Displaced by Natural Disaster                         | <input type="checkbox"/> 16. Substandard Housing (includes homeless)        |
| <input type="checkbox"/> 6. Displaced by Public Action                            | <input type="checkbox"/> 17. Client for Project Based Section 8 Unit        |
| <input type="checkbox"/> 7. Displaced by Domestic Violence                        | <input type="checkbox"/> 18. Tenant of Project Based Section 8 Unit         |
| <input type="checkbox"/> 8. Elderly   | <input type="checkbox"/> 19. Veteran  |
| <input type="checkbox"/> 9. Near Elderly (55+)                                    | <input type="checkbox"/> 20. Working  |
| <input type="checkbox"/> 10. Extremely Low Income                                 | <input type="checkbox"/> 23. Participant in Metco Program in Wayland school |
| <input type="checkbox"/> 11. Health Condition (disability affecting housing need) | <input type="checkbox"/> 24. Activated Military Personnel to Persian Gulf   |

**8. I CERTIFY THAT THE ABOVE INFORMATION IS ACCURATE AND COMPLETE.**

I understand that submission of false information or misrepresentation may result in loss of eligibility to participate in the Section 8 Housing Choice Voucher Program. I certify that I have attained the age of eighteen and therefore have full legal capacity to act on my own behalf in the matter of contracts.

Signature of Head of Household \_\_\_\_\_ Date \_\_\_\_\_

**Complete ALL information. Return completed application to ONE of the participating housing authorities listed on the back of this form. Incomplete, photocopied, e-mailed, or faxed applications will not be accepted.**

**Return completed application to ONE participating housing authority NEAREST TO YOU or**  
**APPLY ONLINE at [www.section8listmass.org](http://www.section8listmass.org).**

***Incomplete, photocopied, e-mailed or faxed applications will not be accepted.***

**Participating housing authorities may have additional housing assistance programs available. Please contact them directly to request information and applications for any additional housing assistance.**

**For general information please call the Centralized Waiting List Informational Line at 877-868-0040**

**Participating Housing Authorities:**

Abington Housing Authority, 71 Shaw Ave., Abington, MA 02351	Middleboro Housing Authority, 8 Benton St., Middleboro, MA 02346
Acton Housing Authority, 68 Windsor Ave., PO Box 681, Acton, MA 01720	Millis Housing Authority, c/o Dedham H.A., 163 Dedham Blvd., Dedham, MA 02026
Amesbury Housing Authority, 180 Main St., Amesbury, MA 01913	Milton Housing Authority, 65 Miller Ave., Milton, MA 02186
Amherst Housing Authority, 33 Kellogg Ave., Amherst, MA 01002	Natick Housing Authority, 4 Cottage St., Natick, MA 01760
Andover Housing Authority, 100 Morton St., Andover, MA 01810	Needham Housing Authority, c/o Dedham H.A., 163 Dedham Blvd., Dedham, MA 02026
Arlington Housing Authority, 4 Winslow St., Arlington, MA 02474	Newburyport Housing Authority, 25 Temple St., Newburyport, MA 01950
Belmont Housing Authority, 59 Pearson Rd., Belmont, MA 02478	Newton Housing Authority, 82 Lincoln Street, Newton Highlands, MA 02461
Beverly Housing Authority, 137 Rear Bridge St., Beverly, MA 01915	North Andover Housing Authority, One Moreski Meadows, No. Andover, MA 01845
Bourne Housing Authority, 871 Shore Rd., Pocasset, MA 02559	North Attleboro Housing Authority, PO Box 668, North Attleboro, MA 02761
Braintree Housing Authority, 25 Roosevelt St., Braintree, MA 02184	North Reading Housing Authority, Peabody Ct., No. Reading, MA 01864
Bridgewater Housing Authority, 10 Heritage Road, Bridgewater, MA 02324	Norwood Housing Authority, 40 William Shyne Cir., Norwood, MA 02062
Brockton Housing Authority, 45 Goddard Rd., PO Box 7070, Brockton, MA 02303	Oxford Housing Authority, 23 Wheelock St., Oxford, MA 01540
Brookline Housing Authority, 90 Longwood Ave., Brookline, MA 02446	Peabody Housing Authority, 75 Central St., Ste. 2, Peabody, MA
Burlington Housing Authority, 15 Birchcrest St., Burlington, MA 01803	Pembroke Housing Authority, Kilcommons Drive, Pembroke, MA 02359
Chelmsford Housing Authority, 10 Wilson St., Chelmsford, MA 01824	Plymouth Housing Authority, 130 Court St., PO Box 3537, Plymouth, MA 02361
Chelsea Housing Authority, 54 Locke St., Chelsea, MA 02150	Quincy Housing Authority, 80 Clay Street, Quincy, MA 02170
Chicopee Housing Authority, 128 Meetinghouse Rd., Chicopee, MA 01013	Reading Housing Authority, 22 Frank Tanner Dr., Reading, MA 01867
Concord Housing Authority, 34 Everett Street, Concord, MA 01742	Revere Housing Authority, 82-84 Cooledge St., Revere, MA 02151
Danvers Housing Authority, 14 Stone Street, Danvers, MA 01923	Rockland Housing Authority, 8 Studley Court, Rockland, MA 02370
Dedham Housing Authority, 163 Dedham Blvd., Dedham, MA 02026	Rockport Housing Authority, 13 Millbrook Park, Rockport, MA 01966
Dennis Housing Authority, 167 Center St., So. Dennis, MA 02660	Salem Housing Authority, 27 Charter St., Salem, MA 01970
Dracut Housing Authority, 971 Mammoth Rd., Dracut, MA 01826	Salisbury Housing Authority, 23 Beach Road, Salisbury, MA 01952
Duxbury Housing Authority, 59 Chestnut St., Duxbury, MA 02332	Saugus Housing Authority, 19 Talbot St., Saugus, MA 01906
Everett Housing Authority, 393 Ferry St., Everett, MA 02149	Shrewsbury Housing Authority, 36 No. Quinsigamond Ave., Shrewsbury, MA 01545
Fall River Housing Authority, 180 Morgan St., Fall River, MA 02722	Somerville Housing Authority, 30 Memorial Road, Somerville, MA 02145
Fitchburg Housing Authority, 50 Day Street, Fitchburg, MA 01420	Southbridge Housing Authority, 60 Charlton St., Southbridge, MA 01550
Framingham Housing Authority, 1 John J. Brady Dr., Framingham, MA 01702	Springfield Housing Authority, PO Box 1609, Springfield, MA 01101
Gardner Housing Authority, 116 Church St., Gardner, MA 01440	Stockbridge Housing Authority, PO Box 419, 5 Pine St., Stockbridge, MA 01262-0419
Gloucester Housing Authority, P.O. Box 1599, Gloucester, MA 01931-1599	Taunton Housing Authority, 30 Olney St., Taunton, MA 02780
Greenfield Housing Authority, One Elm Ter., Greenfield, MA 01301	Tewksbury Housing Authority, Saunders Circle, Tewksbury, MA 01876
Halifax Housing Authority, c/o Dedham H.A., 163 Dedham Blvd., Dedham, MA 02026	Wakefield Housing Authority, 26 Crescent St., Wakefield, MA 01880
Haverhill Housing Authority, 25-C Washington Sq., Haverhill, MA 01831-2451	Walpole Housing Authority, 8 Diamond Pond Ter., Walpole, MA 02081
Holbrook Housing Authority, One Holbrook Court, Holbrook, MA 02343	Waltham Housing Authority, 110 Pond St., Waltham, MA 02451
Holden Housing Authority, 9 Flagler Drive, Holden, MA 01520	Ware Housing Authority, 20 Valley View, Ware, MA 01082
Holyoke Housing Authority, 475 Maple St., Holyoke, MA 01040	Warren Housing Authority, P.O. Box 3021, Warren, MA 01083
Hudson Housing Authority, 8 Brigham Cir., Hudson, MA 01749	Watertown Housing Authority, 55 Waverly Avenue, Watertown, MA 02472
Ipswich Housing Authority, One Agawam Village, Ipswich, MA 01938	Wayland Housing Authority, 106 Main St., Wayland, MA 01778
Lawrence Housing Authority, 353 Elm Street, Lawrence, MA 01842	Webster Housing Authority, 10 Golden Heights, Webster, MA 01570
Leominster Housing Authority, 100 Main St., Leominster, MA 01453	Wellesley Housing Authority, c/o Dedham H.A., 163 Dedham Blvd., Dedham, MA 02026
Lexington Housing Authority, One Countryside Village, Lexington, MA 02420	Westfield Housing Authority, 12 Alice Burke Way, PO Box 99, Westfield, MA 01086
Malden Housing Authority, 89 Pearl St., Malden, MA 02148	West Springfield Housing Authority, 37 Oxford Pl., West Springfield, MA 01089
Marlborough CDA - Housing Division, 240 Main St., Marlborough, MA 01752	Weymouth Housing Authority, 402 Essex St., Weymouth, MA 02188
Medford Housing Authority, 121 Riverside Ave., Medford, MA 02155	Winchendon Housing Authority, 108 Ipswich Dr., Winchendon, MA 01475
Melrose Housing Authority, 910 Main St., Melrose, MA 02176	Winchester Housing Authority, 13 Westley St., Winchester, MA 01890
Methuen Housing Authority, 24 Mystic St., Methuen, MA 01844	Woburn Housing Authority, 59 Campbell St., Woburn, MA 01801
	Worcester Housing Authority, 40 Belmont St., Worcester, MA 01605

- 4) Unit sold with applicant's agreement to vacate upon sale
- 5) Any legally-authorized act that results in owner's taking unit off rental market
- 6) Or any other definition set by a particular housing authority

Verification must include documentation of such action an/or court executed documents.

**Displace by Natural Disaster:** An applicant who has been displaced by a disaster recognized by the Federal government, which extensively damaged or destroyed their dwelling, i.e. fire, flood or other natural disaster and documented by the local Buildings Department or Board of Health.

**Displaced by Public Action:** An applicant who has been displaced through governmental action. Verification must be documented by the government agency displacing the applicant.

**Domestic Violence:** An applicant who vacated their unit because of domestic violence or lives in a unit with a person who engages in violence.

Documented actual or threatened violence directed toward self or member(s) of household by spouse or other member of applicant's household must come from a third party source, i.e. shelter advocate, social worker, law enforcement agency, etc.

The domestic violence should have occurred recently or be of a continuing nature.

**Elderly:** An applicant or spouse who is sixty-two (62) years of age or older.

**Near Elderly (55+):** An applicant or spouse who is at least fifty five (55) but less than sixty-two (62) years of age.

**Extremely Low Income:** An applicant whose gross family income does not exceed 30% of the Median income limit for the highest part of the State (Easton-Raynham & Eastern Worcester areas) by family size, currently:

1 person	2 person	3 person	4 person	5 person	6 person	7 person	8 person
\$21,850	\$25,000	\$28,100	\$31,200	\$33,700	\$36,200	\$38,700	\$41,200

**Health Conditions (disability affecting housing need):** An applicant who is or about to be displaced due to:

- 1) A member of the family has a mobility or other impairment that makes the person unable to use critical elements of the unit, AND
- 2) The owner is not legally obligated to make changes to the unit, or
- 3) Any other definition used by a particular housing authority.

**Homeless:** Applicant must be currently homeless and must be able to provide third party documentation of their homelessness that they:

- 1) Lacks fixed, regular, and adequate nighttime residence; OR
- 2) Has primary nighttime residence that is:

A supervised public or privately operated shelter designated to provide temporary living accommodations. (Welfare Hotels, congregate shelters and transitional housing).

An institution that provides temporary residence for individuals intended to be institutionalized (not incarcerated).

A public or private place not designated or normally used as regular sleeping place for humans.

**Participant in Metco Program in Wayland school:** An applicant with a family member who participates in the Metco Program in a Wayland school is included in the definition of Wayland resident

**Rent burdened 50% of income:** An applicant who can document that they are paying more than 50% of their monthly gross family adjusted income (adjustments for dependent allowance, medical expenses, etc.) toward monthly housing costs (rent and utilities).

**Rent burdened 40% of income:** An applicant who can document that they are paying more than 40% of their monthly gross family adjusted income (adjustments for dependent allowance, medical expenses, etc.) toward monthly housing costs (rent and utilities).

**Single Person:** A one-person family if they meet all other eligibility criteria.  
This includes an elderly person, disabled person and a single pregnant person.

**Substandard Housing (includes homeless):** Applicant who can document through a third party certified to do so, that:

Applicant resides in a unit that:

- 1) Does not provide safe and adequate shelter and endangers the health, safety, or well-being of family; or
- 2) Has one or more critical defects or combination of intermediate defects in sufficient number or extent to require considerable repair or rebuilding (i.e has not satisfied HQS or other regulatory standard used by particular housing authority) .

OR

Applicant is homeless (see 'Homeless'):

**Tenants of Project-Based Units:** An applicant who currently resides in a unit that has been designated for Project-Based Assistance. This Preference selection must be accompanied by a letter of verification from the designated Project-Based landlord.

**Clients for Project-Based Units:** An applicant who has met the qualifications of a designated Project-based unit. This Preference selection must be accompanied by a letter of verification from the designated Project-Based landlord.

**Veteran:** An applicant who can document that they are:

- 1) a veteran with service-connected disability;
- 2) a family of a deceased veteran who's death was service-connected; or
- 3) other veteran that meets the definition of a particular housing authority's administrative plan.

**Working:** An applicant and/or spouse is currently employed.

Massachusetts  
Section 8 Centralized Waiting List  
**Definitions of Preferences**

**NOTE:** *Participating housing authorities may or may not use some or all of the preferences listed below. These definitions are minimum qualifications; housing authorities may have more specific criteria within a particular preference. A housing authority will request documentation of preferences at the time you reach the top of the waiting list and are selected for final determination.*

**Activated Military Personnel to Persian Gulf:** Family whose head or spouse has been called to active duty in the Armed Forces as a result, or in anticipation of, military deployment in Persian Gulf region.

**Board of Health Condemnation:** An applicant who can provide documentation from the Board of Health that they have been displaced most recently or about to be displaced due to the Board of Health condemning their unit.

**Disabled:** Family whose head, spouse or sole member:

- 1) has a physical or mental impairment which substantially limits one or more major life activities, such as caring for one's self, performing manual tasks, walking, seeing, hearing, speaking, learning, breathing and working;
- 2) has a record of or has a history of such an impairment; or
- 3) is regarded as having an impairment or the impairment is treated by the applicant as constituting such a limitation of one or more life activities.

Verification must include one or more of the following:

- 1) Receipt of Social Security Disability or Supplemental Security Income, or
- 2) Letters regarding qualification for SSI payments, or
- 3) Proof of residence in an institution, or
- 4) Documents showing hospitalization for a disability, or
- 5) Letter from another knowledgeable professional, such as a health or service professional or a social worker.

**Displaced by hate crimes, reprisals:** An applicant is involuntarily displaced if the hate crime occurred recently or is of continuing nature, and:

- 1) Family members provided information on criminal activities to a law enforcement agency, or
- 2) One or more members of an applicant's family has been the victim of one or more hate crimes, AND the applicant has vacated the unit or must vacate because the activity interferes with his quiet enjoyment of the premises.

Documentation must be provided by a law enforcement agency that verifies there has been actual or threatened physical violence or intimidation that is directed against a person or his or her property, and that is based on a person's race, color, creed, religion, sex, national origin, disability or familial status.

**Displaced by Landlord Non-renewal:** Displaced by landlord through no fault of their own, i.e.:

- 1) Condo conversions
- 2) Closure of unit (e.g., rehab)
- 3) Owner wants unit for personal or family use

<p><b>MALDEN HOUSING AUTHORITY NOTICE TO HOUSING CHOICE VOUCHER OWNERS AND MANAGERS REGARDING THE VIOLENCE AGAINST WOMEN ACT (VAWA)</b></p>
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*This sample notice was adapted from a notice prepared by the National Housing Law Project.*

A federal law that went into effect in 2013 protects individuals who are victims of domestic violence, dating violence, sexual assault and stalking. The name of the law is the Violence against Women Act, or "VAWA." This notice explains your obligations under VAWA.

**Protections for Victims**

You cannot refuse to rent to an applicant solely because he or she is a victim of domestic violence, dating violence, sexual assault or stalking.

You cannot evict a tenant who is the victim of domestic violence, dating violence, sexual assault or stalking based on acts or threats of violence committed against the victim. Also, criminal acts directly related to the domestic violence, dating violence, sexual assault or stalking that are caused by a household member or guest cannot be cause for evicting the victim of the abuse.

**Permissible Evictions**

You can evict a victim of domestic violence, dating violence, or sexual assault stalking if you can demonstrate that there is an *actual and imminent* (immediate) threat to other tenants or employees at the property if the victim is not evicted. Also, you may evict a victim for serious or repeated lease violations that are not related to the domestic violence, dating violence, sexual assault or stalking. You cannot hold a victim of domestic violence, dating violence, sexual assault or stalking to a more demanding standard than you hold tenants who are not victims.

**Removing the Abuser from the Household**

You may bifurcate (split) the lease to evict a tenant who has committed criminal acts of violence against family members or others, while allowing the victim and other household members to stay in the unit. If you choose to remove the abuser, you may not take away the remaining tenants' rights to the unit or otherwise punish the remaining tenants. In removing the abuser from the household, you must follow federal, state, and local eviction procedures.

**Certification of Domestic Violence, Dating Violence, Sexual Assault or Stalking**

If a tenant asserts VAWA's protections, you can ask the tenant to certify that he or she is a victim of domestic violence, dating violence, sexual assault or stalking. You are not required to demand official documentation and may rely upon the victim's statement alone. If you choose to request certification, you must do so in writing and give the tenant at least 14 business days to provide documentation. You are free to extend this deadline. A tenant can certify that he or she is a victim by providing any one of the following three documents:

- A completed, signed HUD-approved certification form. The most recent form is HUD-50066. This form is available at the housing authority or online at <http://www.hud.gov/offices/adm/hudclips/forms/hud5.cfm>.
- A statement from a victim service provider, attorney, or medical professional who has helped the victim address incidents of domestic violence, dating violence, sexual assault or stalking.

The professional must state that he or she believes that the incidents of abuse are real. Both the victim and the professional must sign the statement under penalty of perjury.

- A police or court record, such as a protective order.

If the tenant fails to provide one of these documents within 14 business days, you may evict the tenant if authorized by otherwise applicable law and lease provisions.

### **Confidentiality**

You must keep confidential any information a tenant provides to certify that he or she is a victim of domestic violence, dating violence, sexual assault or stalking. You cannot enter the information into a shared database or reveal it to outside entities unless:

- The tenant provides written permission releasing the information.
- The information is required for use in an eviction proceeding, such as to evict the abuser.
- Release of the information is otherwise required by law.

The victim should inform you if the release of the information would put his or her safety at risk.

### **VAWA and Other Laws**

VAWA does not limit your obligation to honor court orders regarding access to or control of the property. This includes orders issued to protect the victim and orders dividing property among household members in cases where a family breaks up.

VAWA does not replace any federal, state, or local law that provides greater protection for victims of domestic violence, dating violence, sexual assault or stalking.

### **Additional Information**

- If you have any questions regarding VAWA, please contact MHA Occupancy Department at 781-322-2517.
- HUD Notice PIH 2006-42 contains detailed information regarding VAWA's certification requirements. The notice is available at <http://www.hud.gov/offices/adm/hudclips/notices/pih/06pihnotices.cfm>.
- For a discussion of VAWA's housing provisions, see the preamble to the final VAWA rule, which is available at <http://www.gpo.gov/fdsys/pkg/FR-2010-10-27/pdf/2010-26914.pdf>.

## Definitions

For purposes of determining whether a tenant may be covered by VAWA, the following list of definitions applies:

VAWA defines *domestic violence* to include felony or misdemeanor crimes of violence committed by any of the following:

- A current or former spouse of the victim
- A person with whom the victim shares a child in common
- A person who is cohabitating with or has cohabitated with the victim as a spouse
- A person similarly situated to a spouse of the victim under the domestic or family violence laws of the jurisdiction receiving grant monies
- Any other person against an adult or youth victim who is protected from that person's acts under the domestic or family violence laws of the jurisdiction

VAWA defines *dating violence* as violence committed by a person (1) who is or has been in a social relationship of a romantic or intimate nature with the victim AND (2) where the existence of such a relationship shall be determined based on a consideration of the following factors:

- The length of the relationship
- The type of relationship
- The frequency of interaction between the persons involved in the relationship

VAWA defines *stalking* as (A)(i) to follow, pursue, or repeatedly commit acts with the intent to kill, injure, harass, or intimidate another person OR (ii) to place under surveillance with the intent to kill, injure, harass, or intimidate another person AND (B) in the course of, or as a result of, such following, pursuit, surveillance, or repeatedly committed acts, to place a person in reasonable fear of the death of, or serious bodily injury to, or to cause substantial emotional harm to (i) that person, (ii) a member of the immediate family of that person, or (iii) the spouse or intimate partner of that person.

VAWA defines **sexual assault** as "any nonconsensual sexual act proscribed by Federal, tribal, or State law, including when the victim lacks capacity to consent" (42 U.S.C. 13925(a)).