



Dear Applicant,

Thank you for your interest in 733 Broadway.

Applications will be available through the following methods starting June 1, 2025:

- ✓ Please visit www.733broadway.com to apply or download the application.
- ✓ Call (978) 454-5595 to have one mailed to you.

Once your application is completed it can be returned by:

Emailing to: 733broadway@maloneyproperties.com

Mailing to: P.O Box 57, Lowell, MA 01854

Deadline: All completed applications must be received or post-marked by July 30, 2025

Please be advised that incomplete applications will not be included in the lottery.

Informational meetings will be held via ZOOM on June 21, 2025, at 11:00 and July 16, 2025, at 7:00 p.m. The link to the meeting will be available on the website www.733broadway.com the day of the meeting.

This application is used to gather the minimum information necessary for entrance in the lottery. Entrance into the lottery is not an offer for housing. The lottery is scheduled to be held on August 14, 2025. Once the lottery is completed you will receive written notification of your position on the waitlist.

Selection for tenancy will begin shortly after the lottery is completed. Occupancy is anticipated in November 2025.

When you approach the top of the waitlist, we will contact you for an interview. At that time all adult members of the family will be asked to sign the required individual verification forms authorizing management to verify family income, assets, expenses, and other eligibility factors in accordance with the programs applicable to this property before any offer of a unit can be made.

Please feel free to contact us at (978) 454-5595, TTY 711 or by email at 733broadway@maloneyproperties.com if you have any questions.



JOIN OUR COMMUNITY TODAY!

733 Broadway

P.O Box 57

Lowell, MA 01854

Phone: (978) 454-5595 Relay 711

Email: 733broadway@maloneyproperties.com

PRE-APPLICATION FOR 733 Broadway

Please Print Clearly

NAME: _____

ADDRESS: _____

CITY/STATE/ZIP: _____

PHONE: _____ ALT PHONE: _____

EMAIL: _____

UNIT SIZE REQUESTED:

1 Bedroom _____

2 Bedroom _____

3 Bedroom _____

This application will be used for entrance in the lottery. All applicants will be interviewed and asked to complete a full application and additional paperwork upon being selected from the lottery. Applicants who are not selected for initial occupancy from the lottery will remain on the waiting list.

Please complete all sections of this application and return to P.O Box 57, Lowell, MA 01854 or by email to 733broadway@maloneyproperties.com. If a question is not applicable, write "N/A" in that section. If all sections are not completed, the application will not be placed on the waiting list. Every family member age 18 as well as the Head, Co-head and Spouse must sign and date the application.

First Name, Last Name	Relationship to head of household	Date of Birth	Social Security #	Student Status (F1) (Must Circle as Applicable to <u>EACH</u> Member)
	Head of Household			Full-time / Part-time / Not Student
				Full-time / Part-time / Not Student
				Full-time / Part-time / Not Student
				Full-time / Part-time / Not Student
				Full-time / Part-time / Not Student
				Full-time / Part-time / Not Student
				Full-time / Part-time / Not Student



Are ALL household members full time students?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
If yes, you <i>MUST</i> answer the following questions “a” through “e”.		
a. Is any full-time student(s) a TANF or a title IV recipient?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
b. Is any student(s) enrolled in a job-training program receiving assistance under the Job Training Partnership Act or other similar federal, state or local law?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
c. Are all full-time student(s) married (not necessarily to one another) and filing a joint tax return?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
d. Are all of the full-time student(s) a single parent living with his/her minor child/children and not a Dependent on another individual's tax return and the child/children aren't a dependent of another person other than a parent of the child/children?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
e. Has any full-time student previously been under the care and placement of a foster care program (under Part B or E of Title IV of the Social Security Act)?	<input type="checkbox"/> Yes	<input type="checkbox"/> No

INCOME		
List ALL sources of gross income anticipated to be received by any/all household members in the next 12 months, including but not limited to: Employment, self-employment (net business income), unemployment, Social Security, SSI, SSP, Public Assistance, Pension payments, child support, alimony, regular gifts/contributions etc.		
Household Member Name	Source of Income	Gross Annual Amount
		\$
		\$
		\$
		\$

Assets		
List ALL household members' assets, including but not limited to: Checking accounts, savings accounts, trust accounts, certificates of deposit (CDs), credit unions, mutual funds, brokerage account, savings bonds, life insurance policies, 401(k)s/IRAs, SSA Direct Express Debit Cards, etc.		
Household Member Name	Type of Asset / Bank Name	Current Balance (Checking Accts – 6 mo Average Balance)
		\$
		\$
		\$
		\$

The following four questions are asked for the sole purpose of providing an equal opportunity to enjoy your housing. Answering them is voluntary, but if you don't let us know what you need to have an equal opportunity to enjoy your housing, we can't satisfy your needs.

1. Do you need a fully accessible unit for someone with a mobility impairment? ☐ Yes ☐ No
 *Note: If you only need a unit on the first floor and it doesn't need to be fully accessible, please answer "no" here and respond to question 4 below with a "yes" and let us know your needs.
2. Do you need only certain accessible features of a unit?
☐ Yes ☐ No If yes, please list the features that you need to be accessible: _____
3. Do you need a unit with special features for someone with a hearing and/or visual impairment?
☐ Yes ☐ No
4. Does any member of the household have any accessibility or reasonable accommodation requests or alternate ways we need to communicate with you?
☐ Yes ☐ No If yes, please explain: _____

ADDITIONAL INFORMATION		
<u>Notice for the following question:</u> We do not discriminate based on voucher certificate holder status. The following question is asked for the sole purpose of determining an applicant household's ability to pay rent for a unit that does not have Project Based Subsidy.		
2. Do you currently have a mobile Voucher/Certificate?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
If yes, 2 (a) What agency issued the voucher?		
3. (b) What is the name and phone number of your case manager?		
4. Are you an owner, developer or sponsor of this project (or officer, employee, agent or consultant of the owner, developer or sponsor)?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Please check if any of the following apply to you or your family members:	<input type="checkbox"/> YES	<input type="checkbox"/> NO
a. I/We are currently homeless		
Have you or any member of your household been: (A) convicted of a felony in the last 7 years; and/or (B) subject to any State Sex Offender Lifetime Registration requirement?	<input type="checkbox"/> Yes	<input type="checkbox"/> No

If yes, specify whether (A) and/or (B) above is applicable including member name(s) and description of convictions etc. including dates.: _____

Provide a complete list of ALL States in which any applicant household member has ever resided: _____



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 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 accurate and complete to the best of my/our knowledge, and I/We understand that intentional false statements or information are punishable by law and will lead to cancellation of this application or termination of tenancy after occupancy. I/We hereby authorize the release of information regarding a criminal background and credit check, and landlord authorization. All adult household members, 18 or older, must sign the application. Further, any head, co-head or spouse, who is an emancipated minor, must also sign below.

SIGNATURE(S):

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

Maloney Properties Inc. does not discriminate on the basis of any protected status, including disability, in the admission of or access to, or treatment or employment in its programs and activities. Maloney Properties, Inc. provides persons with disabilities the opportunity to request a Reasonable Accommodation in order to apply to and participate in such programs and activities. Maloney Properties, Inc. also provides people whose primary language isn't English and as a result have limited English proficiency the opportunity to request free language assistance in order to apply to or participate in its programs and activities. Kathy Broderick coordinates Maloney Properties' compliance with all nondiscrimination requirements, including Section 504. Contact her with any questions or concerns relating to Maloney Properties' compliance with nondiscrimination requirements: Telephone (781) 943-0200 x255, Relay: 711 or at Maloney Properties, Inc., 27 Mica Lane, Wellesley, MA 02481.

