



## IEH APPLICATION INFORMATION

Please send completed application to: ISLAND ELDERLY HOUSING, INC.  
60B VILLAGE ROAD  
VINEYARD HAVEN, MA 02568

The Hillside Site Management Office is located at 421 Edgartown Road, Vineyard Haven, Mass. 02568 and is open Monday through Thursday from 8:00 AM - 4:00 PM.

Telephone: 508-693-7577  
Fax: 508-693-9297  
For the hearing impaired: Call MA Relay at 711

To be considered for selection, an applicant must submit a completed application. This application is to determine initial eligibility for our waiting lists only. We will request verification of all information reported in this application at the time of your final screening for occupancy.

You **MUST** notify us if any of the information reported in this application changes.

Fill in all sections completely, as the failure to do so may result in processing delays or rejection of your application.

Should you need help in completing this application, or if you wish to review IEH's Resident Selection Plan, please contact Island Elderly Housing.

We will notify you in writing within 10 days of our receipt of your application.

*In accordance with Federal law and U.S. Department of Agriculture policy, Island Elderly Housing, Inc. is prohibited from discriminating on the basis of race, color, creed, religion, sex, national or ethnic origin, citizenship, ancestry, class, sexual orientation, familial status, disability, military/veteran status, source of income and age.*

*To file a complaint of discrimination, write USDA, Director, Office of Civil Rights, 1400 Independence Avenue, S.W., Washington, D.C. 20250-9410, or call (800) 795-3272 (voice), or (202) 720-6382 (TDD)".*



## HILLSIDE RENTAL PRE-APPLICATION

APPLICANT NAME: \_\_\_\_\_ TELEPHONE #: \_\_\_\_\_  
ADDRESS \_\_\_\_\_  
CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP CODE \_\_\_\_\_

### FAMILY COMPOSITION:

List all persons who would occupy the apartment including yourself.

FULL NAME:                      RELATIONSHIP:                      SEX:    SS#:                      DATE OF BIRTH:

1. \_\_\_\_\_

2. \_\_\_\_\_

### BARRIER-FREE APARTMENTS:

Ten percent of our apartments are designed specifically for persons who need the accessibility of a barrier-free unit in order to live independently.

ARE YOU REQUESTING ONE OF THESE WHEELCHAIR-ACCESSIBLE,  
BARRIER-FREE UNITS?                      YES ( ) NO ( )

### REASONABLE ACCOMMODATIONS AND MODIFICATIONS:

IEH will make reasonable accommodations to policies or reasonable modifications of common or unit premises for all applicants with disabilities who require such changes to have equal access to any aspect of the application process, its programs and services.

DO YOU REQUIRE A REASONABLE ACCOMMODATION OR MODIFICATION?  
YES ( ) NO ( )

### NAME, ADDRESS, AND TELEPHONE NUMBER OF A CLOSE FRIEND OR RELATIVE:

This information is helpful in case we can't get in touch with you when updating our waiting lists.

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

**INCOME:**

List all income earned or received by each household member. This includes: Wages, Self-Employment, Unemployment, Welfare, Social Security, SSI, Disability, Workers Compensation, Retirement Benefits, Veterans Benefits, Child Support, Rental Property, Stock Dividends, Bank Account Interest, etc.

<u>HOUSEHOLD MEMBER</u>	<u>TYPE OF ASSET</u>	<u>GROSS EARNINGS (Before Taxes)</u>
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1.	_____	_____
2.	_____	_____
3.	_____	_____

(specify per week, month, or year)

**ASSETS:**

List all assets for each household member. This includes: Checking Accounts, Savings Accounts, Term Certificates, Money Markets, Stocks, Bonds, and Cash Value of Whole Life Insurance Policies.

<u>HOUSEHOLD MEMBER</u>	<u>TYPE OF INCOME</u>	<u>BALANCE/VALUE</u>
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1.	_____	_____
2.	_____	_____
3.	_____	_____

CASH VALUE

Do you or any household member own or have interest in any real estate, boat, and/or mobile home?      YES ( ) NO ( )      \_\_\_\_\_

Have you sold any real estate in the past two years?      YES ( ) NO ( )      \_\_\_\_\_

**APPLICANT CERTIFICATION:**

I/we do hereby swear and attest that all of the information provided in this application is true and complete to the best of my knowledge. I understand that all information is regarded as confidential in nature and that a consumer credit report, criminal offenders record information (CORI) report, and previous landlord references will be requested. I/We do hereby authorize Island Elderly Housing, Inc., and its staff or authorized representatives to contact any agencies, law enforcement offices, companies, groups or organizations to verify any information contained in this application or to obtain and verify any additional information or materials which are deemed necessary to complete my/our application for housing in programs administered by USDA, Rural Development. Further, I/We consent to the release of wage matching data to the RHS and the borrower.

I/We certify that all information in this Application is true to the best of my/our knowledge and understand that false statements or information are punishable by law and will lead to cancellation of this Application or termination of tenancy after occupancy.

Signatures:

\_\_\_\_\_  
Applicant

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

\_\_\_\_\_  
Date

\_\_\_\_\_  
Date

**RACIAL INFORMATION:**

“The information regarding race, ethnicity and sex designation solicited on this application is requested in order to assure the Federal Government, acting through the Rural Housing Service, that the Federal laws prohibiting discrimination against tenant applicants on the basis of race, color, national origin, religion, sex, familial status, age, and disability are complied with. You are not required to furnish this information, but are encouraged to do so. This information will not be used in evaluating your application or to discriminate against you in any way. However, if you choose not to furnish it, the owner is required to note the race, ethnicity, and sex of individual applicants on the basis of visual observation or surname.”

**Ethnicity:**

Hispanic or Latino \_\_\_\_\_

Not Hispanic or Latino \_\_\_\_\_

**Race: (Mark one or more)**

American Indian/Alaska Native \_\_\_\_\_

Asian \_\_\_\_\_

White \_\_\_\_\_

Black/African American \_\_\_\_\_

Native Hawaiian or Pacific Islander \_\_\_\_\_

**Gender:**

Male \_\_\_\_\_

Female \_\_\_\_\_

*“Island Elderly Housing, Inc. is an equal opportunity provider, and employer.”*

**MARKETING INFORMATION:**

How did you hear about housing with Island Elderly Housing, Inc.?

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# Rural Housing and Community Programs

## Things You Should Know About USDA Rural Rental Housing

***Don't risk losing your chances for federally assisted housing by providing false, incomplete, or inaccurate information on your application or recertification***

### ***Penalties for Committing Fraud***

You must provide information about your household status and income when you apply for assisted housing in apartments financed by the U.S. Department of Agriculture (USDA). USDA places a high priority on preventing fraud. If you deliberately omit information or give false information to the management company on your application or recertification forms, you may be:

- Evicted from your apartment;
- Required to repay all the extra rental assistance you received based on faulty information;
- Fined;
- Put in prison and/or barred from receiving future assistance.

Your State and local governments also may have laws that allow them to impose other penalties for fraud in addition to the ones listed here.

### ***How To Complete Your Application***

When you meet with the landlord to complete your application, you must provide information about:

- **All Household Income.** List all sources of money that you receive. If any other adults will be living with you in the apartment, you must also list all of their income. Sources of money include:
  - Wages, unemployment and disability compensation, welfare payments, alimony, Social Security benefits, pensions, etc.;
  - Any money you receive on behalf of your children, such as child support, children's Social Security, etc.;
  - Income from assets such as interest from a savings account, credit union, certificate of deposit, stock dividends, etc.;
  - Any income you expect to receive, such as a pay raise or bonus.
- **All Household Assets.** List all assets that you have. If any other adults will be living with you, you must also list all of their assets. Assets include:
  - Bank accounts, savings bonds, certificates of deposit, stocks, real estate, etc.;
  - Any business or asset you sold in the last 2 years for less than its full value, such as selling your home to your children.

- **All Household Members.** List the names of all the people, including adults and children, who will actually live with you in the apartment, whether or not they are related to you.

### ***Ask for Help if You Need It***

If you are having problems understanding any part of the application, let the landlord know and ask for help with any questions you may have. The landlord is trained to help you with the application process.

### ***Before You Sign the Application***

- Make sure that you read the entire application and understand everything it says;
- Check it carefully to ensure that all the questions have been answered completely and accurately;
- Don't sign it unless you are sure that there aren't any errors or missing information.

By signing the application and certification forms, you are stating that they are complete to the best of your knowledge and belief. Signing a form when you know it contains misinformation is considered fraud.

- The management company will verify your information. USDA may conduct computer matches with other Federal, State or private agencies to verify that the income you reported is correct;
- Ask for a copy of your signed application and keep a copy of it for your records.

### ***Tenant Recertification***

Residents in USDA-financed assisted housing must provide updated information to the management company at least once a year. Ask your landlord when you must recertify your income.

You must **immediately** report:

- Any changes in income of \$100 or more per month;
- Any changes in the number of household members.

For your annual recertification, you must report:

- All income changes, such as increases in pay or benefits, job change or job loss, loss of benefits, etc., for any adult household member;

- Any household member who has moved in or out;
- All assets that you or your adult housemates own, or any assets that were sold in the last 2 years for less than their full value.

## Avoid Fraud, Report Abuse

Prevent fraudulent schemes through these steps:

- Don't pay any money to file your application;
- Don't pay any money to move up on the waiting list;
- Don't pay for anything not covered by your lease;
- Get receipts for any money you do pay;
- Get a written explanation for any money you are required to pay besides rent, such as maintenance charges.

**Report Abuse:** If you know anyone who has falsified an application, or who tries to persuade you to make false statements, report him or her to the manager. If you cannot report to your manager, call your local or state USDA office at 1 (800) 670-6553, or write: USDA, STOP 0782, 1400 Independence Ave., SW, Washington, DC 20250.

## If You Disagree With a Decision

Tenants may file a grievance in writing with the complex owner in response to the owner's actions, or failure to act, that result in a denial, significant reduction, or termination of benefits. Grievances may also be filed when a tenant disputes the owner's notice of proposed adverse action.

### Notice of Adverse Action

The complex owner must notify tenants in writing about any proposed actions that may have adverse consequences, such as denial of occupancy and changes in the occupancy rules or lease. The written notice must give specific reasons for the proposed action, and must also advise tenants of the "right to respond to the notice within 10 calendar days after the date of the notice" and of "the right to a hearing." Housing complexes in areas with a concentration of non-English-speaking people must send notices in English and in the majority non-English language.

### Grievance Process Overview

USDA believes that the best way to resolve grievances is through an informal meeting between tenants and the landlord or owner. Once the owner learns about a tenant grievance, the process should begin with an informal meeting between the two parties. Owners must offer to meet with tenants to discuss the grievance within 10 calendar days of receipt of the complaint. USDA encourages owners and tenants to try to reach a mutually satisfactory resolution to the problem at the meeting.

If the grievance is not resolved, the tenant must request a hearing within 10 days of receipt of the meeting findings. The parties will then select a hearing panel or hearing officer to govern the hearing. All parties are notified of the decision 10 days after the hearing.

### When a Grievance Is Legitimate

The landlord must determine if a grievance is within the established rules for the program. For example, "I want to file a complaint because the manager doesn't speak to me" is not a legitimate complaint. However, "I want to file a complaint because the manager isn't maintaining the property according to USDA guidelines" is a legitimate complaint. Below are examples of cases in which tenants may and may not file a complaint.

A complaint may not be filed with the owner/management if:	A complaint may be filed with the owner/management if:
USDA has authorized a proposed rent change.	There is a modification of the lease, or changes in the rules or rent that are not authorized by USDA.
A tenant believes that he/she has been discriminated against because of race, color, religion, national origin, sex, age, familial status, or disability. Discrimination complaints should be filed with USDA and/or the Department of U.S. Housing and Urban Development (HUD), not with the owner/management.	The owner or management fails to maintain the property in a decent, safe, and sanitary manner.
The complex has formed a tenant's association and all parties have agreed to use the association to settle grievances.	The owner violates a lease provision or occupancy rule.
USDA has required a change in the rules and proper notices have been given.	A tenant is denied admission to the complex.
The tenant is in violation of the lease and the result is termination of tenancy.	
There are disputes between tenants that do not involve the owner/management.	
Tenants are displaced or other adverse effects occur as a result of loan prepayment.	

PA 1998  
December 2008

The U.S. Department of Agriculture (USDA) prohibits discrimination in all its programs and activities on the basis of race, color, national origin, age, disability, and where applicable, sex, marital status, familial status, parental status, religion, sexual orientation, genetic information, political beliefs, reprisal, or because all or a part of an individual's income is derived from any public assistance program. (Not all prohibited bases apply to all programs.) Persons with disabilities who require alternative means for communication of program information (braille, large print, audiotape, etc.) should contact USDA's TARGET Center at (202) 720-2600 (voice and TDD).

To file a complaint of discrimination write to USDA, Director, Office of Civil Rights, 1400 Independence Avenue, S.W., Washington, D.C. 20250-9410 or call (800) 795-3272 (voice) or (202) 720-6382 (TDD). USDA is an equal opportunity provider and employer.

MORIDIA PARA IDOSOS NA ILHA, INC.  
(ISLAND ELDERLY HOUSING, INC.)

**AVISO DE SERVICIOS DE INTERPRETE**

Por favor deixe o Gerente Local saber se voce gostaria de ter um interprete para assistir voce no processo de aplicacao ou para algum informacao das responsabilidades do inquilino.

ALOJAMIENTO DE RETIRADOS DE LA ISLA, INC.  
(ISLAND ELDERLY HOUSING, INC.)

**AVISO DE SERVICIOS DE INTERPRETE**

Por favor deje saber el Gerente del Lugar si usted desea un interprete para asistirlo con el proceso de la aplicacion o para una explicacion de las responsabilidades del inquilino.

**MORADIA PARA IDOSOS NA ILHA, INC.  
FORMULARIO PARA PEDIDO DE SERVICIOS DE INTERPRETE**

Nos queremos ter a certeza que voce entende todo o processo de aplicacao e/ou as responsabilidades do inquilino na Moradia Para Idosos no Ilha, Inc. (IEH). Nos podemos arranjar, dentro de 3 dias uteis, um encontro com um interprete qualificado para te assistir. Por favor complete a questao e assine abaixo se voce gostaria de ter um interprete. Nos iremos contactar voce para confirmar a data e a hora do encontro.

Sim, eu gostaria de um interprete qualificado em Portugues para uma assistencia no meu encontro com os representantes da Moradia Para Idosos na Ilha (IEH).

Horas de preferencia para o encontro: Manhas  Tardes

**ALOJAMIENTO DE RETIRADOS DE LA ISLA, INC.  
PEDIDO DE SERVICIOS DE INTERPRETE**

Queremos estar seguros que usted entiende el proceso de la aplicacion y/o las responsabilidades de los inquilinos del Alojamiento de Retirados de la Isla, Inc. (IEH). Podemos organizar una reunion con usted dentro de 3 dias habilies y tener un interprete qualificado en Espanol para asistir usted. Por favor complete el siguiente y ponga su firma abajo se usted quiere un interprete. Nosotros estaremos en contacto con usted en quanto a la fecha y la hora de la reunion.

Si, yo quisiera un interprete qualificado en Espanol para asistirme en mi reunion con los representantes del Alojamiento de Retirados de la Isla (IEH).

Hora preferida para una reunion: Mananas  Tardes

Nome (em letras de forma) \_\_\_\_\_

Nombre (en letras de molde) \_\_\_\_\_

Telefone para contato \_\_\_\_\_

Numero de telefono para contactar \_\_\_\_\_

Assinatura e data \_\_\_\_\_

Firme y la fecha \_\_\_\_\_

.....  
To be completed by IEH Staff

\_\_\_\_\_ Date of contact with Island Interpreter Services

\_\_\_\_\_ Date/time of scheduled meeting

\_\_\_\_\_ Date of return call to applicant/tenant to confirm meeting

\_\_\_\_\_ Staff Signature