

Oak Hill Apartments
35 Central Street
Ipswich, MA 01938
PHONE 978-356-1530 FAX 978-356-5247
TDD # 711 or 1-800-439-2370
oakhilloffice@verizon.net

Dear Applicant,

Thank you for your interest in Oak Hill Apartments. We are located in the heart of downtown Ipswich on Central Street, within walking distance of many shops and restaurants.

Oak Hill is subsidized by Rural Development and is available to Senior Citizens 62 years of age or older and individuals handicap or disabled, regardless of age. We have 33 one bedroom apartments, some are handicap accessible. The building has an elevator, community room with community kitchen, and a sun porch. The building also has a coin operated laundry facility and secured entrances.

This is a non smoking facility.

Enclosed please find an application packet for the waiting list at Oak Hill Apartments in Ipswich.

Please fill out **completely** and return to the address listed on top of this page. You will not be added to waiting list until we have a fully completed application.

If you have any questions or would like to arrange a tour, please call if you have any questions.

Sincerely,

Theresa Whitmore
Property Manager



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Oak Hill Apartments

Although most of the 33 one bedroom units here follow the same floor plan, some are unique. The typical apartment consists of a bedroom that is about 8 feet by 12 feet with one window and a large closet. The living/dining room measures about 17 feet in length and 13 feet wide with two windows side by side on one short side. The bathroom is around 5 feet by 5 feet not counting floor space in the shower. There is also a nice large closet in the bathroom. The average kitchen floor is about 8 feet by 8 feet floor space with cabinets above and below, refrigerator and stove. There is also a very big closet in the hallway.

Bedroom 96 8x12	Bathroom 25 5x5 Closet
Living/Dining Room 221 17x13	Kitchen 64 8x8

Oak Hill Apartments were developed and are owned by Oak Hill, Inc.

They are managed by:

E.P. Management
 7 Tozer Road
 Beverly, MA 01915



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Oak Hill Apartments

RENTAL APPLICATION

All information must be completed in full to be added to wait list

General Household Information:

Applicant Names: 1) _____ 2) _____

Home Phone: (____) - _____ Cell Phone: (____) - _____

Email Address: _____

Present Address: _____

Dates of Tenancy from _____ to _____

Landlord contact information: _____

Previous Address: _____

Dates of Tenancy: from _____ To _____

Landlord contact information: _____

List all persons who will occupy apartment:

Name	Sex	Social Security No.	Date of Birth	Relationship
_____	_____	_____	_____	_____

Have you or anyone in your household ever been convicted of a felony? { } Yes { } No
Is yes, describe: _____

Are you or any member of your household subject to a lifetime registration requirement under the State Sex Offender Registration Program? { } Yes { } No

Are you currently under eviction or have you ever been evicted? { } Yes { } No
If yes, why? _____

Do you own any pets? { } Yes { } No
Describe: _____

Do you have a car? { } Yes { } No

ELIGIBILITY INFORMATION

To qualify for "Elderly Household" status, you must meet the following criteria. (Please check one that applies).

- a) 62 years old or older _____
- b) Handicap or Disabled and 18 or older _____ (If under the age of 62 please ask our office to send a disability verification form for your physician or include your SSI information.)

Do you need any specific features or unit designs for handicap accessibility such as wheelchair accessibility, visual aids (brail) or apparatus for hearing assistance? { } Yes { } No If so, describe: _____



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Are you applying **only** for a handicap accessible unit? { } Yes { } No

EMPLOYMENT AND INCOME INFORMATION

Employment: Name of Employer: _____ Telephone: (____)-_____

Business Address: _____

Length of Employment: _____ Annual Gross Wage: \$ _____

If other member of household is employed, please fill out the following:

Name _____

Name of Employer: _____ Telephone: (____)-_____

Business Address: _____

Length of Employment: _____ Annual Gross Wage: \$ _____

Other Sources of Income: (Please state **MONTHLY INCOME**)

Social Security Amount \$ _____ Name _____

(Include SSI) Amount \$ _____ Name _____

Veterans Benefits Amount \$ _____ Name _____

Pension Amount \$ _____ Name _____

Name of Fund _____

Other (Unemployment Etc)

Source _____ Amount \$ _____

Source _____ Amount \$ _____

Other Sources of Income (Please list and explain source such as bank interest dividends, rents, ect)

ASSET AND EXPENSE INFORMATION

NAME OF BANK(S) AMOUNT ACCOUNT #

CHECKING _____ \$ _____

SAVINGS _____ \$ _____

LOANS _____ \$ _____

OTHER ASSETS: DESCRIBE _____

REAL ESTATE: _____

THE VALUE OF ANY BUSINESS OR HOUSEHOLD ASSETS DISPOSED OF BY A MEMBER OF THE HOUSEHOLD FOR LESS THAN FAIR MARKET VALUE (INCLUDING DISPOSITION IN TRUST, BUT NOT IN A FORECLOSURE OR BAKRUPTCY SALE) DURING THE TWO YEARS PRECEDING THE DATE OF APPLICATION, IN EXCESS OF THE CONSIDERATION RECEIVED THEREFOR. IN THE CASE OF A DISPOSITION AS PART OF A DIVORCE SETTLEMENT THE DISPOSITION SHALL NOT BE CONSIDERED TO BE FOR LESS THAN FAIR MARKET VALUE IF THE HOUSEHOLD MEMBER RECIEVES IMPORTANT CONSIDERATION NOT MEASURABLE IN DOLLAR TERMS.



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ARE YOU REQUESTING A DISABILITY ADJUSTMENT TO INCOME? YES _____ NO _____

DO YOU CERTIFY THAT THE UNIT YOU ARE APPLYING FOR WILL BE YOUR PERMANENT RESIDENCE AND THAT YOU WILL NOT MAINTAIN A SEPARATE SUBSIDIZED RENTAL UNIT IN A DIFFERENT LOCATION? { } YES { } NO _____

MEDICAL PAYMENTS **MONTHLY** (OUT OF POCKET EXPENSES):

MEDICARE \$ _____

SUPPLEMENTAL HEALTH INSURANCE(S) \$ _____

OTHER: \$ _____

Please list any child care payments:

CASE OF EMERGENCY, WHOM SHOULD WE CONTACT?

NAME: _____ RELATIONSHIP _____

ADDRESS: _____ TELEPHONE _____

CITY/STATE/ZIP _____

References:

Name of current landlord _____ Telephone: (____)-_____

Address of Landlord: _____ Length of time _____

City/State/Zip _____

Monthly Rent: \$ _____ Average Monthly Utility Bill: \$ _____

(Exclude Telephone and cable costs)

Name of Previous Landlord _____ Telephone: (____)-_____

Address of Landlord: _____ Length of time there: _____

City/State/Zip: _____

Monthly Rent: \$ _____ Average Monthly Utility Bill: \$ _____

Personal Reference #1

Name: _____ Telephone: (____)-_____

Address: _____

Relationship: _____

Personal Reference #2

Name: _____ Telephone: (____)-_____

Address: _____

Relationship: _____



Oak Hill Apartments

Please note that this is a preliminary application and in no way insures occupancy.

Additional information may be requested to complete processing of your application.

I/ We do hereby authorize Oak Hill Apartments and E.P. Management and its staff or authorized representative to contact any agencies, local police departments, court records, credit bureaus, groups or organizations to obtain and verify any information or materials which are deemed necessary to complete my application for housing in programs administrated/ managed by E.P. Management I/ We further authorize Oak Hill Apartments to verify all information listed on this application and run a credit and criminal background check.

I/ We give written consent to the management to verify information in this application. A False Statement or misrepresentation on your application will affect approval or residency. Your signature below also gives your consent for the utilization of wage matching.

DATE: _____ SIGNATURE: _____

PRINTED NAME _____

DATE: _____ SIGNATURE: _____

PRINTED NAME _____

The following information will be required by the Federal Government to monitor the owner's compliance with Equal Housing Opportunity and Fair Housing Laws. The law provides that an applicant may not be discriminated against on the basis of the information supplied below or whether or not the information is furnished.

"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 applications 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 / Latino _____ Non-Hispanic Latino _____

Race: (mark one or more)

American Indian/Alaska Native _____ Asian or Pacific Islander _____ Black (not of Hispanic origin) _____

White (not of Hispanic Origin) _____ Hispanic _____

Gender: Male _____ Female _____

"This institution is an equal opportunity provider and employer.

"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).

If you wish to file a Civil Rights program complaint of discrimination, complete the USDA Program Discrimination Complaint form found at: http://www.ascr.usda.gov/complaint_filing_cust.html, or any USDA office, or call (866) 632-9992 to request a form. You may also write a letter containing all the information requested in the form. Send your completed complaint form to us by mail at U.S.



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Department of Agriculture , Director, Office of Administration, 1400 Independence Avenue, S.W., Washington, D.C. 20250-9410 or fax (202) 690-9410, or email at program.intake@usda.gov."

Gives written consent to the management to verify information in this application. A False Statement or misrepresentation on your application will affect approval or residency.

SIGNATURE: _____ **DATE:** _____

FOR OFFICE USE ONLY

Income: \$ _____
Date and time application received completed: _____ Manager initials _____
Added to wait list on: _____
Date Preliminary Eligibility Letter sent: _____
Date Acceptance Letter sent: _____
Date Rejected Letter sent: _____



Frequently asked questions:

Q. Can I have some Assets (money in the bank, stocks, bonds, CD, real estate?)

A. Yes you are allowed to have assets. We do take the value of your assets into consideration, but it almost never prevents you from admission. See next page for example.

Q. How much income is too much to live at Oak Hill?

A. The complex is for low income individuals who are 62 or older or disabled.

The income limits are as follows:

Very Low Income: For one person you can earn an annual income up to \$34,500, for two persons you can earn up to \$39,400

Low Income: (Has lower priority on the waiting list) for one person you can earn an annual income up to \$48,800 for two persons \$55,800.

We do take into consideration medical expenses and they can be deducted off your income.

Q. Can I move in before I sell my home?

A. Yes, it may make your relocation easier to move first and then sell your home.

Q. How much will my rent be?

A. Rent is determined by calculating income and expenses. 30% of adjusted gross income.

Example: SS Income: \$13,000
Medicare: \$1,260
=\$11,740 x %30=\$3522
Monthly rent =\$294



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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.	

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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.