

Winslow Building

Preliminary Application

9 Wells Street

Greenfield, MA 01301

HOUSEHOLD INFORMATION:

Applicant Name: _____

Date of Birth: _____ Social Security # _____

Street Address: _____ Apt # _____

Mailing Address: _____

Telephone # (Home) _____ (Work) _____

(Cell) _____ (Email) _____

Are you a full time college student? _____ Yes / No

Name of College _____

HOUSEHOLD INCOME:

Do you have any income from the following sources?

EMPLOYMENT _____ Yes / No
Average Weekly Amount \$ _____

UNEMPLOYMENT _____ Yes / No
Average Weekly Amount \$ _____

SOCIAL SECURITY, SSDI or SSI BENEFITS (Circle Type) _____ Yes / No
Soc. Sec. / SSDI / SSI Monthly Amount \$ _____
Soc. Sec. / SSDI / SSI Monthly Amount \$ _____

TAFDC, EADC, WELFARE and/or PUBLIC ASSISTANCE _____ Yes / No
Monthly Amount \$ _____

VETERANS BENEFITS or MILITARY BENEFITS _____ Yes / No
Monthly Amount \$ _____

WORKER's COMP and/or DISABILITY INSURANCE BENEFITS _____ Yes / No
Amount \$ _____ Weekly / Bi-Weekly / Monthly

PENSIONS and/or ANNUITY _____ Yes / No
Amount \$ _____ Weekly / Bi-Weekly / Monthly

ALIMONY _____ Yes / No
Amount \$ _____ Weekly / Bi-Weekly / Monthly

INCOME FROM OWN BUSINESS or SELF EMPLOYMENT _____ Yes / No
Annual Income \$ _____

REGULAR CONTRIBUTIONS from FRIENDS/RELATIVES _____ Yes / No
Amount \$ _____ Weekly / Bi-Weekly / Monthly

COMMISSIONS, TIPS, BONUSES

Amount \$ _____ **Yes / No**
Weekly / Bi-Weekly / Monthly

OTHER INCOME (real estate, lottery winnings, etc.)

Amount \$ _____ **Yes / No**
Weekly / Bi-Weekly / Monthly

HOUSEHOLD ASSETS

Do you have any of the following assets?

CHECKING ACCOUNTS

Name of Bank _____ **Yes / No**
Estimated Balance \$ _____
Name of Bank _____ Estimated Balance \$ _____

SAVINGS ACCOUNTS

Name of Bank _____ **Yes / No**
Estimated Balance \$ _____
Name of Bank _____ Estimated Balance \$ _____

RETIREMENT FUNDS (IRA's, 401K, Keogh, etc.)

Name of Bank _____ **Yes / No**
Estimated Balance \$ _____

ANNUITIES/STOCKS/BONDS

Name of Bank _____ **Yes / No**
Estimated Balance \$ _____

MUTUAL FUNDS

Name of Bank _____ **Yes / No**
Estimated Balance \$ _____

TRUST ACCOUNTS

Name of Bank _____ **Yes / No**
Estimated Balance \$ _____

DO YOU OWN ANY REAL ESTATE?

If yes, Type of Property _____ **Yes / No**
Fair Market Value \$ _____
Property Location _____
Mortgage or outstanding loan balance \$ _____ Annual Insurance Cost? _____
Amount of most recent annual Real Estate Taxes? _____

Do you have any asset(s) owned jointly with another person? Yes / No

If yes, describe: _____

Do they have access to that asset(s)? Yes / No

Have you or any household member sold, disposed of, transferred ownership or given away any real property or assets in the past two (2) years? Yes / No

If yes, type of property _____ Date of transaction _____
Value of the sold, disposed, transfer or gifted asset \$ _____

APPLICANT CERTIFICATION

I have answered all of the questions and that the information given on this application regarding household income and assets is accurate and complete to the best of my knowledge. I understand that submission of false information or misrepresentations may result in the loss of eligibility. I acknowledge that is a preliminary application for the purpose of placement on the waiting list for the Winslow Building. At the time of selection from the waiting list all information contained in this application will be subject to third party verification to determine eligibility requirements prior to approval for occupancy.

Applicant Signature

Date