Initial Eligibility PRE-APPLICATION

The Elohim, 13 Nahant Street, Lynn

DEADLINE: Friday, July 18, 2025, at 12:00 noon

Please contact Stefanie Petersen at stefanie@metrowestcd.org or 617-923-3505 x109 if you are mailing the pre-application. Mailed pre-applications should be post-marked by deadline.

Where did you learn about this lottery? _____

Household Information

Applicant's First Name	Last Na	me	
Street Address			
City/Town	State	Zip Code	
Telephone: Home	Work	Cell	
E-Mail Address			
Language preference (if other thar	n English):		
Household Composition			
List all persons who will be moving	ng with you in the table be	elow:	
Name		ionship to head of d (spouse, child, aunt, etc.)	Date of birth
, and the second		SELF	
TOTAL number of people mo	ving in if selected (inc	luding vourself):	
Does any member of your househousehousehousehousehousehousehouse	old require a reasonable a	ccommodation or modifica	ition based on a disability?
Has any member of the household years? YES NO	l owned a home or had a j	oint interest in a home/real	estate in the past three
Local Preference The income-restricted units at The	Elohim are made availabl	e first to Lvnn residents. F	Please attach proof of Lynr



residency (for example: current utility bill, current signed lease, most recent paycheck).

Mortgage Pre-Approval Information

You must include a copy of your mortgage pre-approval letter with your application; the loan must meet the criteria listed on page 3 of the information packet that accompanied this Pre-Application.

Certifications

- 1. I certify that all information provided in this application is true and complete to the best of my/our knowledge.
- 2. I understand that any false statement, made knowingly and willfully, will be sufficient cause for rejection of my/our application, or for legal action against ownership once acquired.
- 3. I understand that this is an application for a lottery and does not guarantee the opportunity to purchase the unit.
- 4. I understand that any material change in the income or assets of my household that occurs after the submission of this application may make me ineligible to move forward with the purchase and I must report any changes immediately.
- 5. I understand that mortgage co-signers are not permitted unless they will reside in the unit.
- 6. I understand that the property will be subject to an affordable housing covenant that restricts its use, requires the purchaser to maintain the property as their primary residence, limits its resale price, and restricts property transfers to income-eligible purchasers (exception: surviving spouse's principal residence) when I/we sell the unit.
- 7. The undersigned give consent to Metro West CD to verify the information provided in the application.
- 8. I certify that my/our household meets the definition of a first-time homebuyer and I/we do not own a home OR have documented eligibility based on one of the listed exceptions.
- 9. I certify that our household income is within the established program income limits.

10. I certify that our household does not ha	ve assets in excess of \$ <u>150,000</u> .	
Applicant's Signature	Date	
Incomplete pre-applications will not be entered into the lottery		