



Town of Southborough

Rent/Mortgage Assistance Guidelines

In response to the loss of income to households due to COVID-19, this program has been created and funded by the CARES Act funds granted to the Town of Southborough. This program seeks to be efficient and responsive. It is temporary in nature. Applicants that have been residents of Southborough for at least six (6) months are eligible for:

- Up to six months rental or mortgage assistance, subject to available funding.
- Assistance can be used to pay current rent/mortgage or pay rent/mortgage that is past due since 3/1/2020 through 12/1/2021.
- Mortgage assistance can be used to pay the mortgage principal and interest, it cannot be applied to escrow or homeowner's insurance.
- Amounts available are:
 - \$1200 / month for an efficiency/studio
 - \$1400 / month for a 1-bedroom
 - \$1600 / month for a 2-bedroom
 - \$2000 / month for a 3+-bedroom

Please visit <https://www.southboroughtown.com/town-administrator/covid-19-information-center>, or contact Chelsea Malinowski at cmalinowski@southboroughma.com for an application.

All applications must be received by Monday, December 1, 2021.

Household Eligibility

"Eligible" Household

An eligible household is one that:

- Has reduced income because of COVID-19
- Earns less than 80% of Area Median Income
- Households currently receiving government-funded rental assistance such as Section 8, MRVP, ERAP are not eligible. Households that have received RAFT assistance since April 1, 2020 are not eligible. Households living in units subsidized with Project Based Section 8 shall not be eligible.

A "household" shall mean an individual or two or more persons who will live regularly in the unit as their principal residence and who are related by blood, marriage, law, or who have otherwise evidenced a stable inter-dependent relationship.



Town of Southborough

Income Eligibility

The total income of the applicant and all other members of the applicant’s household **over the age of eighteen (18)** may not exceed 80% of the Area Median Income for the greater Boston area adjusted for family size. An applicant’s total household income cannot exceed the following limits:

	<i>Persons in Family</i>							
	<i>1</i>	<i>2</i>	<i>3</i>	<i>4</i>	<i>5</i>	<i>6</i>	<i>7</i>	<i>8</i>
Income Limit: 80% Area Median	\$67,400	\$77,000	\$86,650	\$96,250	\$103,950	\$111,650	\$119,350	\$127,050

Exception: A member of the household that is over the age of eighteen (18) and is pursuing post-secondary education on a full-time basis is exempt from being included in the total household income. Please provide proof of enrollment with application.

Process

- All potential participants must complete an application and attach requested documents prior to the deadline. The applications will be processed on a rolling basis.
- If you need a copy of the information contact Selectman Chelsea Malinowski at cmalinowski@southboroughma.com or call 508-485-0710 ext. 3000 and leave a message.
- Applicants have the right to request a reasonable accommodation(s), which may include a change to a rule, policy, procedure or practice to afford a person with a disability an equal opportunity to participate fully in the housing program or to use and enjoy the housing.

Affirmative Marketing Methods

The Town of Southborough does not discriminate on the basis of race, color, religion, national origin, disability, familial status, sex, age, marital status, children, sexual orientation, genetic information, gender identity, ancestry, veteran/military status or membership.

Marketing Activities

Marketing activities will be conducted beginning March 15, 2021 – December 1, 2021.

Efforts consist of:

1. Town COVID-19 Response website pages
2. Notices on Town social media
3. Press releases to local newspaper
4. Utilizing the distribution lists for schools, Recreation Department, Library, and Youth and Family Services.



Town of Southborough

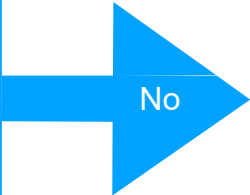
Applications will be available online at the Town of Southborough website, or a hard copy may be requested by emailing Chelsea Malinowski at cmalinowski@southboroughma.com or calling 508-485-0710 ext. 3000 and leaving a message.

To submit an application, please email all documents to Chelsea Malinowski at cmalinowski@southboroughma.com or email her to coordinate a hand off of it.

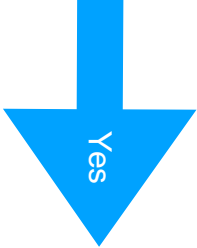
Once the completed application is received including all required documents, Chelsea Malinowski will review all materials and confirm with the applicant whether it is complete or requires more information. Once a determination is made a secondary review will be made by Youth and Family Services Director Sarah Cassell. Upon approval, the documents will be submitted to the Town Accountant, Carla McAuliffe. The entire process is expected to take 4-6 weeks to complete if all documents are present at the time the application is filled out. Chelsea Malinowski will communicate with each applicant during the various stages of the process.

Eligibility Chart
COVID Rent/Mortgage Relief
Options Southborough

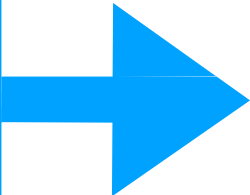
1. Is there a Financial Hardship
and/or loss of income Due to
COVID 19?



Not Eligible



2. Is the household receiving
government-funded rental
assistance such as Section 8
or ERAP?



Not Eligible



This household is eligible for Rent/
Mortgage Relief Options



Town of Southborough

Rent / Mortgage Assistance Application

Applicant's First Name _____ Last Name _____

Co-Applicant's First Name _____ Last Name _____

Street Address _____

City/Town _____ State _____ Zip Code _____

Applicant's

Telephone: Home _____ Work _____ Cell _____

Co-Applicant's

Telephone: Home _____ Work _____ Cell _____

Applicant's

E-Mail Address _____ Re-enter E-mail: _____

Co-Applicant's

E-Mail Address _____ Re-enter E-mail: _____

Language Preference (if other than English): _____

How long have you been a Southborough resident _____ (must be at least 6 months)

Total number of people in household (including yourself) _____

Total number in household 18 years or older _____

Total number in household under 18 years _____

Total number in household 18 years or older AND enrolled full-time in post-secondary education _____

Are you self-employed? _____ yes _____ no

This program is for people who have lost income due to COVID-19 related circumstances. Does your household meet this eligibility? _____ yes _____ no

What is your household's current monthly income (please include all income types from all household members 18 years and older) \$ _____

Number of bedrooms in your home? _____

Do you have a Section 8 Voucher or other housing assistance such as RAFT? ____ yes ____ no
If yes, what type of assistance _____

Have you applied or plan to apply for the Emergency Rental Assistance Program (ERAP), which is a separate program, for the period March 2020 through December 2021?
____ yes ____ no

Have you applied for this program (Rent and Mortgage Assistance) previously? ____ yes ____ no

If you have a MORTGAGE:

Is your mortgage currently under forbearance? ____ yes ____ no

What is your current mortgage payment each month, excluding escrow and homeowner's insurance? \$ _____

Do you owe past mortgage payments? ____ yes ____ no If yes, how much \$ _____

If you are RENTING:

What is your current rent payment each month? \$ _____

Do you owe back rent? ____ yes ____ no If yes, how much \$ _____

I have an application for Unemployment Assistance pending ____ yes ____ no

Types of income being received by the household:

Yes| No

____ ____	Wages
____ ____	Unemployment Benefits
____ ____	Social Security
____ ____	SSI/Disability
____ ____	Child Support
____ ____	Alimony
____ ____	Pension/Retirement
____ ____	TANF
____ ____	Other

Lender / Landlord* Contact Information:

Name: _____

Street Address _____

City/Town _____ State _____ Zip Code _____

Best Phone Number _____ Email _____

*Landlord MUST be willing to provide W-9 to participate in this program.

Certifications

Certification of Information

- I/We certify that all information furnished in this application for affordable housing assistance is true and complete to the best of my/our knowledge.
- I/We certify that our household is not receiving any other government-funded rental or mortgage assistance, including but not limited to the Emergency Rental Assistance Program (ERAP) between March 2020 and December 2021.
- I/We certify that our household does not have access to other resources sufficient to cover the mortgage.
- I/We understand that any false statement, made knowingly and willfully, will be sufficient cause for rejection of my/our application.
- I/We understand that ANY false information on this application or statements given are punishable by law and will lead to cancellation of this application and mortgage assistance.

Applicant's Signature _____ Date _____

Co-Applicant's Signature _____ Date _____

Release of Information

I/We understand that this authorization or the information obtained with its use may be given to and used to administer and enforce program rules and policies in compliance with HUD or Massachusetts DHCD or any other federal or state housing program guidelines

I/We agree that a photocopy or facsimile or other electronic transmission of this authorization may be used for the purposes stated above.

I/We understand that all decisions made by the Town of Southborough are final.

Applicant's Signature _____ Date _____

Co-Applicant's Signature _____ Date _____

APPLICATION CHECKLIST

Application

Income Verification – provide ALL of the following (ignore last item if not self-employed):

- One most recent paystub for all employed household members over the age of 18.
 - *If overtime is a part of the household income, please provide the most recent three months of paystubs. Income will be calculated based on the average monthly income.*
- Evidence of any other income sources (unemployment, child support, alimony, pension/retirement, etc.)
- Most recent bank statement for all bank accounts for all household members over the age of 18.
 - *If a member of the household is over the age of eighteen (18) and is pursuing post-secondary education on a full-time basis, please provide proof of enrollment. Any income from this household member will not be included as a part of the income verification.*
- Only if Self-Employed, please provide 6 months of sequential bank statements including the month prior to loss of income.

Residence Verification – provide ONE of the following:

- Rent/Mortgage receipt/cancelled check
- Current utility bill

Evidence of Reduced Income – provide ONE of the following:

- A second paystub showing reduced hours
- A lay-off notice from your employer
- Multiple month's bank statements
- Notices from Unemployment Assistance
- Statement from employer stating reduction in hours

Rent/Mortgage Payment Verification – provide ONE of the following:

- Copy of lease or letter from landlord evidencing monthly rent amount
- Current mortgage statement

Rent/Mortgage W-9:

- W-9 form for mortgage company/lender or landlord

THESE MUST BE INCLUDED WITH YOUR APPLICATION OR IT WILL BE DEEMED INCOMPLETE