REQUEST FOR PROGRAM PAYMENT MASSACHUSETTS RENTAL VOUCHER PROGRAM

for the dwelling unit located at:			MA
treet Address	Apt. #	City	, MA Zip
he unit consists of bedrooms a	and is proposed to be leased	at a total rent of \$_	
per month.			
IANDICAP ACCESSIBILITY: Sensory	□ Mobility □ N/A □		
IEAT (check appropriate box): Owner [□ Tenant □	YEAR BUILT:	
RESPONSIBILITIES The OWNER, by executing this Request: a) Agrees to provide, prior to the proposithe State Sanitary Code and is lead so by Agrees that the Owner's Lease will in contends to enter into a Voucher Paymed Understands that the AA has not screet the Owner's responsibility; and eyertifies that this unit is made available fair housing laws regarding race, ethic genetic information, sexual orientation receipt of public assistance, gender in	sed occupancy date, verification the safe (if applicable); include word-for-word all of the pronent Contract for this unit with the seened the Participant's suitability fole, managed, and operated in acconicity, color, creed, religion, sex, gin, ancestry, marital status, vetera	visions in the MRVP Le AA; for tenancy and that all cordance with applicabl ender, familial status, d	tenant screening is e federal and state lisability, age,
TI DADTICIDANT I			
The PARTICIPANT, by executing this finds it acceptable for habitation. DATES OF AVAILABILITY FOR OCC The dwelling unit will be available to	CUPANCY	·	
finds it acceptable for habitation. DATES OF AVAILABILITY FOR OCC	CUPANCY for occupancy by the PARTIC	CIPANT on	
finds it acceptable for habitation. DATES OF AVAILABILITY FOR OCC The dwelling unit will be available to the example of the e	CUPANCY for occupancy by the PARTIC and accurate. Signed under the	CIPANT on	of perjury.
finds it acceptable for habitation. DATES OF AVAILABILITY FOR OCC The dwelling unit will be available to the statements made herein are true at the statement a	CUPANCY for occupancy by the PARTIC and accurate. Signed under the	CIPANT one pains and penalties	of perjury.
finds it acceptable for habitation. DATES OF AVAILABILITY FOR OCC The dwelling unit will be available to a second and the second are true at the second are tr	for occupancy by the PARTIC and accurate. Signed under the nt Print Date Parti	CIPANT one pains and penalties	of perjury.
finds it acceptable for habitation. DATES OF AVAILABILITY FOR OCC The dwelling unit will be available to a second and the second are true at the second are tr	for occupancy by the PARTIC and accurate. Signed under the nt Print Date Parti	e pains and penalties ed Name of Participa	of perjury. nt Date

Mail to: Metro Housing|Boston, 1411 Tremont St, Boston, MA 02120-3401 Phone: (617) 425-6611 | Email: Gateway@metrohousingboston.org | Fax: (617) 532-7670