

R F R P S

\$2,000 CHECK NO. _____

L.I.F.E. Incorporated
 101 Essex Village
 Lynnfield, MA 01940-1269
LIFE.Inc@Verizon.Net
 Telephone & FAX +1.781.334.6066

DATE ENTERED ON LIST AT NUMBER _____

Center Village

Essex Village

Housing Wait List Application - page 1 of 2 pages

Please **PRINT** or **TYPE** your information

Applicant / Resident Name: _____ YEAR BORN 19 _____

Second Name if couple: _____ 19 _____

Contact information: (make sure we can find you when your name comes up!)

PRIMARY RESIDENCE ADDRESS:	ALTERNATE (SEASONAL) ADDRESS:
	<u>DURING MONTHS OF:</u>

Telephone numbers:

Home: [() -] Home: [() -]

Work: [() -] Other: [() -]

Cell: [() -] Other: [() -]

Email address: [_____]

Unit Preference: Select **any** and **all** units that you would **consider** accepting.

Essex Village,	2 bedrooms –	<input type="checkbox"/> 1 st floor	<input type="checkbox"/> 2 nd floor
Center Village,	2 bedrooms –	<input type="checkbox"/> 1 st floor	<input type="checkbox"/> 2 nd floor
Center Village,	1 bedroom –	<input type="checkbox"/> 1 st floor	<input type="checkbox"/> 2 nd floor

When would you be ready, willing, and able to move in? Select the best response.

I am “Anxiously Waiting” to hear from L.I.F.E., Inc., and:

If you called me I would accept a unit and move in ASAP.

I do not reach the eligible resident age of 60 until the year _____

I can not move in right away but I think I could move in the year _____

Please don't call me, I'll call you if and when I am ready, because:

My plans are for the future, I think I might be ready in the year _____

I am not sure that I will ever move in, this is “Just in Case” I need it.

Other: _____

Complete 2-page application, make \$2,000 check for refundable, non-interest bearing application fee payable to L.I.F.E., Inc., and mail to above address. You will receive a confirmation letter back with your wait list number. The information you provide on your application is considered confidential and is for L.I.F.E., Inc. files.

Housing Wait List Application – page 2 of 2 pages

Eligibility: You may apply at any age but one resident must be 60 to move in
Select the best response.

(R) Current Lynnfield resident for at least two years, at above address since [_____]

(FR) Former Lynnfield resident for at least two years, from [_____] to [_____] at Lynnfield address: [_____]

(P) Parent of current or former Lynnfield resident for at least two years
 son's daughter's name: [_____] at Lynnfield address: [_____] from [_____] to [_____] telephone number [(_____) _____ - _____]

(S) Sibling of current or former Lynnfield resident for at least two years
 brother's sister's name: [_____] at Lynnfield address: [_____] from [_____] to [_____] telephone number [(_____) _____ - _____]

We currently own rent our residence

We would have to first sell our residence to buy a unit? yes no

Two non-relative references [_____]

[_____]

Next-of-kin emergency contact: [_____]

Name, Address, and Telephone

I/we understand that it could be several years before my/our name(s) move far enough up the waiting list to be called. L.I.F.E., Inc. goes down through the waiting list in the first come first serve order. I/we will keep L.I.F.E., Inc. informed of any changes to my/our contact information. When I/we do get called, I/we have the option to accept any one of the available units for the price that is in effect at that time if I am/we are ready, willing, and able to move. Otherwise, I/we may “pass” and wait for another unit at a later time while maintaining my/our position on the waiting list. If my/our needs change, I/we may request in writing a refund of my/our \$2,000 application fee. I/we also understand that L.I.F.E., Inc. does not provide any form of living assistance and that I/we must be able to live independently. All of the information that I/we provided is true and accurate to the best of my/our knowledge.

Applicant signature: _____ DATE _____/_____/_____

Second if couple: _____/_____/_____

For information call: +1.781.334.6066
Stefan Taschner, Executive Director