

Rental Assistance Funds

Eligibility Criteria

The City of Boston-SEIU Local 888 Housing Trust will provide members with up to a maximum of \$5,000 to help pay with the costs of renting a new apartment. The award consists of a grant portion of a maximum of \$2,500 and a 0% interest loan up to a maximum of \$2,500.

I. Explanation of Benefit

This benefit is designed to help qualified SEIU Local 888 Members with the cost of maintaining residence within the City of Boston. The award is to be used to pay for first, last, and security deposit when renting a new apartment as well as moving expenses and/or outstanding utility bills.

II. Member Qualification

- a) Member must be part of one of the following departments:
 - Boston Centers for Youth & Families
 - Boston Public Health Commission (Clerk and Tech, Programs, Counselors and Coordinator)
 - Boston Public School (Administrative Guild and Planning & Engineering)
 - Clerks and Tech (Boston City Hall and Boston Police Department)
 - Department of Neighborhood Development
 - Elderly Commission
- b) SEIU Local 888 member must be in good standing for one year.
- c) Must rent an apartment/home within the City of Boston.
- d) Application must be made within 90 days of move or signing of new lease to the new residence
- e) You must be a member in good standing with the credit union and with no outstanding Housing Trust loan. Members who have received any benefits from the Trust, excluding Fuel Assistance, must wait one (1) full year from the date of their receipt of the benefit before they are eligible to apply for Rental Assistance. Homeowners who have received the Trust's Homebuyer Benefit must have paid mortgage in full.
- f) The maximum amount of funding (for those who qualify) depends on program funding and may change monthly.

III. Loan Application Process

- a) As a first step, member must pick up an application form, which is available at the Union Hall or can be downloaded from www.SEIU888.org/htf/.
- b) Member completes the application form.
- c) Member submits application by:

Mail to:
SEIU Local 888
Housing Trust Fund
25 Braintree Hill Office Park,
Suite 306
Braintree, MA 02184

Fax to:
(617) 241-3303

EMail to:
MyUnion@seiu888.org

- d) The Trust Program Administrator reviews the application for completeness and forwards the application and letter of good standing to the Trustees.
- e) The Trustees review the application upon receipt of a complete, accurate application along with any necessary supporting documentation. Depending on the type of assistance you are requesting, it may take approximately 4 to 8 weeks for funds to be made available.
- f) Applications that are inaccurate, incomplete, unsigned, or missing supporting documentation, may result in denial of application.
- g) If the application is not approved, the Trustees inform the member in writing of the reason(s) the application was denied.

The following only applies for approved applications:

- h) If the application is approved, the Trustees will issue a Determination of Eligibility letter to the member.
- i) The **GRANT** portion of \$2,500 maximum will be issued by the City of Boston Treasury Department. Please note: the Treasury Department can take up to 4 to 8 weeks to mail your check.
- j) The **LOAN** portion of \$2,500 maximum will be disbursed by the Credit Union to the member. Visit any Credit Union location to complete your loan.

City of Boston Credit Union Branch Offices

1010 Morrissey Blvd.
 Dorchester, MA 02122
 (617) 635-1313
 Fax (617) 635-1324

Office Hours:
 Monday-Friday:
 8:00 am to 5:00 pm
 Saturday:
 8:00 am to Noon

Room 242 City Hall
 Boston, MA 02201
 (617) 635-4545
 Fax (617) 635-3168

Office Hours:
 Monday-Friday:
 9:00 am to 4:00 pm

77 Spring Street
 West Roxbury, MA 02132
 (617) 635-2300
 Fax (617) 635-1432

Lobby Hours:
 Monday-Friday 8:00 am to 5:00 pm
 Saturday 8:00 am to Noon

Drive-Up Hours:
 Mon., Tues., Wed. & Fri. 8:00 am to 5:00 pm
 Thursday 8:00 am to 7:00 pm
 Saturday 8:00 am to noon

IV. Credit Union

Once approved, if the member belongs to the Credit Union, he/she will complete the Credit Union application. If the member does not belong to the Credit Union, he/she must join. There is a \$25 minimum balance requirement. The Credit Union will work with the member will to develop a repayment plan and the member will arrange for a payroll deduction to repay the loan. The check is issued by the Credit Union, payable to the member.

V. Loan Repayment

- a) The Rental Assistance funds will be in the form of 0% interest loan up to a maximum of \$2,500.
- b) The loan must be repaid within three (3) years. However, the Credit Union may recommend extending the repayment period beyond the three (3) years based upon the applicant’s ability to repay.
- c) The SEIU member agrees to repay the loan in its entirety regardless of his/her employment status with the City of Boston.
- d) All loans become due and payable if the member leaves SEIU Local 888 and/or leaves City of Boston employment.
- e) Default of this loan prohibits the undersigned from receiving any other benefits from the Trust for five years or upon payment in full of the loan.



City of Boston—SEIU Local 888 Housing Trust

Application for Rental Assistance Funds

Qualified SEIU members in good standing who reside in the City of Boston are eligible to apply for assistance to help pay with the costs of renting a new apartment. If you have received any benefit from the Trust, excluding Fuel Assistance, you must wait one full year before applying for this rental assistance benefit. If you have previously received the Home Buyer benefit from the Trust, you may not apply for rental assistance until prior loans have been repaid.

Please note that rental funds consist of a grant and loan award, with a **maximum total award of \$5,000**. The **grant award is a maximum of \$2,500**; the **loan portion is a maximum of \$2,500**. Loans are provided through the City of Boston Credit Union. The Trust requires repayment through payroll deductions to the Credit Union.

Name: _____

Date: _____ City of Boston Employee ID Number (*found on check stub*): _____

CONTACT INFORMATION: *(Required)*

Home Address: _____

City: _____ State: _____ Zip: _____

Primary Phone: _____ Work Phone: _____

EMAIL: (*Please indicate best e-mail to reach you*)

Home Email: _____

Work Email: _____

EMPLOYMENT INFORMATION:

Job Title: _____

Current base weekly salary (*before taxes*), excluding overtime: _____

Grade : _____ Step: _____

Department/Work Site: _____

HOUSING TRUST INFORMATION:

In the past, have you received assistance from the Housing Trust? Yes No

If yes, when did you receive assistance? _____

For what purpose?

Are you still repaying the Credit Union for a Housing Trust Fund loan? Yes No

(If yes, this debt must be repaid before you submit an application for additional funds.)

Please describe need for financial assistance.

Provide documentation; for example:

- Previous lease or a utility bill showing address. (**required**)
- New signed lease along with any other documentation stating the amount you will be paying for rent at your new address. (**required**)
- Outstanding utility bills for transfer of service
- Receipts for moving expenses

Move in Date: _____

Description: <i>(attach additional pages if needed)</i>

List Expenses and Amounts (Required**):** *(Request must be housing-related; the following are examples of ineligible requests: cable, car expenses, child care, credit card, food, phone, student loans, etc. Applications that include requests that are not housing-related will be denied.)*

_____	\$ _____
_____	\$ _____
_____	\$ _____
_____	\$ _____
_____	\$ _____
_____	\$ _____

Amount requested: \$ _____ *(up to a maximum of **\$5,000**)*

Of this amount, **\$2,500** will be a grant to you and up to **\$2,500** will be a no-interest loan from the City of Boston Employees Credit Union. You must be a member of the Credit Union and repay the loan portion to the Credit Union through payroll deduction.



**City of Boston - SEIU Local 888 Housing Trust Fund
Application and Affidavit for Rental Funds**

As an applicant to the City of Boston – SEIU Local 888 Housing Trust Fund (“Trust”), I authorize the City of Boston Credit Union (“Credit Union”) to release to the Trust information regarding my membership standing with the Credit Union. The Trust requires that applicants for loan funds be members in good standing with the Credit Union, defined as a member who is not currently in default of obligations to the Credit Union and has no record of unresolved charge-offs with the Credit Union.

Applicant Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Department/Work Site: _____

Last four digits of Social Security Number: _____

Signature : _____ Date: _____

For Credit Union Use Only
(this portion to be submitted by HTF only)

Prepared by: _____

Please Check All Applicable Regarding Applicant:

Is a member in Good Standing

Is currently repaying the Trust for the assistance received? Yes No

If yes, Outstanding balance: \$ _____

Is not a Credit Union member but is not currently in default of obligations to the Credit Union and has no record of unresolved charge-offs with the Credit Union.

Is currently in default of obligations to the Credit Union and/or has a record of unresolved charge-offs with the Credit Union that must be resolved.

Signature : _____ Date: _____
Credit Union Official

Please fax form to (617) 241-3303 attention Housing Trust Fund



The undersigned hereby certifies to the Trust that the preceding information is accurate, truthful, and correct and acknowledges that the Trust is relying upon this certification to provide Trust funds.

Default of this loan prohibits the undersigned from receiving any other benefits from the Trust for five years or upon payment in full of the loan.

I understand and agree to repay the loan in its entirety regardless of my employment status with the City of Boston.

I understand that should this form be deemed incomplete or inaccurate it will be denied.

I hereby certify under pains and penalties of perjury that any and all funds awarded to me from the SEIU Housing Trust shall be used for housing-related expenses as described in this Application.

ATTENTION: It is critical that you follow and initial the checklist below. (no checkmarks)

_____ I understand that should this form be deemed incomplete it will not be reviewed and approved by the Trust.

_____ List all expenses and amounts on Page 4

_____ Sign Page 5 and complete the top portion of the form only

_____ Sign Page 6 and initial the checklist

Required Documentation: (initial only)

_____ Your most recent pay stub

_____ Proof of address change (*with current address as stated on application*)

_____ Previous lease or a utility bill showing address.

_____ New signed lease along with any other documentation stating the amount you will be paying for rent at your new address.

_____ Moving expenses (*optional*)

STATEMENT BY APPLICANT: I hereby affirm that the facts in this application are true, correct and complete and that I have not knowingly withheld any information. I understand the Trust Administrator has the right to verify any information necessary to determine my eligibility and hereby give my consent. I understand if I refuse to give my consent it may result in my not being eligible to receive assistance; therefore, I hereby give my express permission for the Trust Administrator to contact the following specific sources or persons to verify any or all information material to the determination of eligibility, including by not limited to: past, present and/or future landlord; persons/vendors to whom I owe housing-related money (i.e., utility provider)

Initials _____

Signature: _____ Date: _____

*** Further documentation may be required. Your documentation must provide evidence to support the amount you have requested from the Trust (e.g., rental agreement, other receipts).