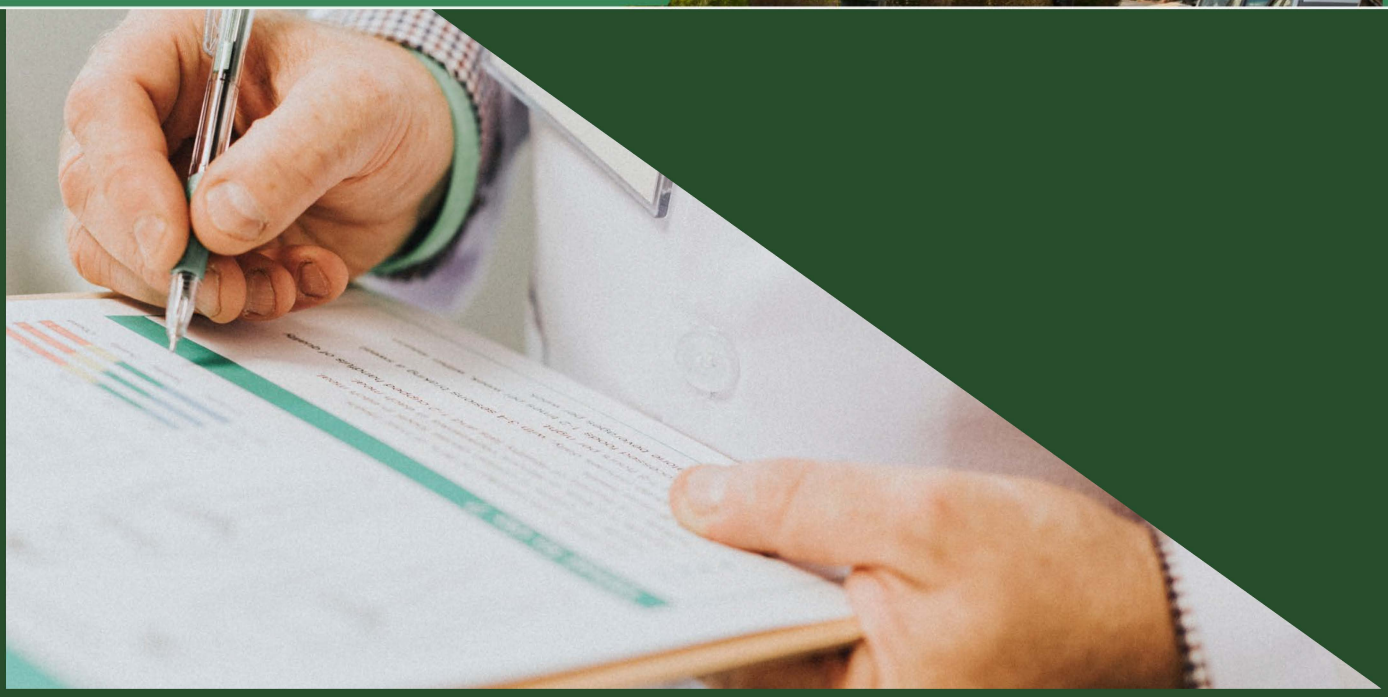
Executive Office of Housing and Livable Communities (EOHLC)





Homeless Priority 1-4(A-C)

Housing Situation Priority/ Preferences

Eligibility Checklist

EQUAL HOUSING OPPORTUNITY

9/26/2025



Housing Situation Priority

Priority 1- Displacement by Natural Forces: Fire, Flood, Earthquake, Natural Disaster

Priority 1
Natural
Forces

EQUAL HOUSING OPPORTUNITY

All applicants must fully document the following:

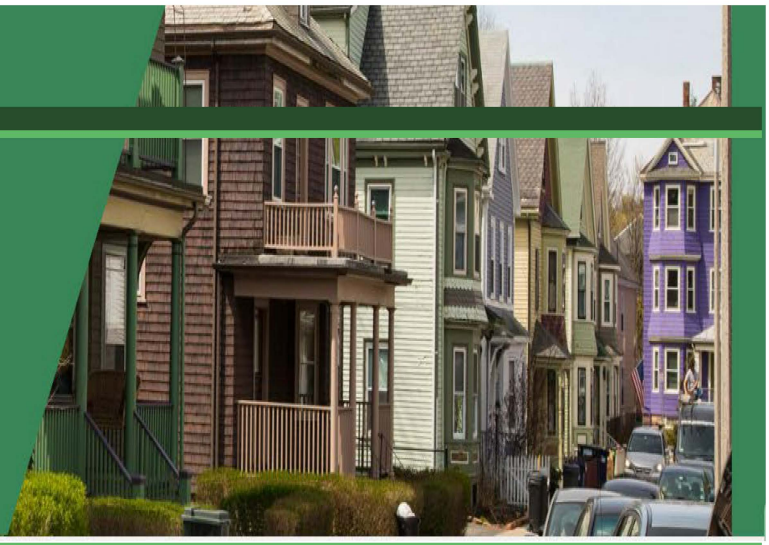
☐ **Proof of Displacement or Imminent Displacement from Primary Residence on the basis of Natural Forces: Fire, Flood, Earthquake or Natural Disaster**:

Required: Description of current situation. Applicant response in Required Verification of Priority and Preference Screening Package.

Required: One of the following verification documents:

Fire: Copy of the Official Fire Report verifying address and indicating that the unit is uninhabitable.

Guidance: If the Official Fire Report does not confirm Primary Residence is uninhabitable, a letter or report indicating that the unit is not habitable from a Board of Health or similar local agency is required. Applicant should be listed as occupant of fire damaged property. (If not, rent receipts, lease, or rental agreement or other document showing residency at the property at time of the fire is required.)



Flood/Earthquake/ Other Natural Disaster: Copy of the official report from The Red Cross or Federal Emergency Management Agency (FEMA). The report must show the address. Federal Disaster Declaration.

Guidance: P1 Applicants of Natural Disaster may not have all the documentation that is needed to determine eligibility. Applicants may be eligible for Priority 1 – Displaced by Natural Forces, provided CSO can make a ***reasonable determination*** regarding displacement.

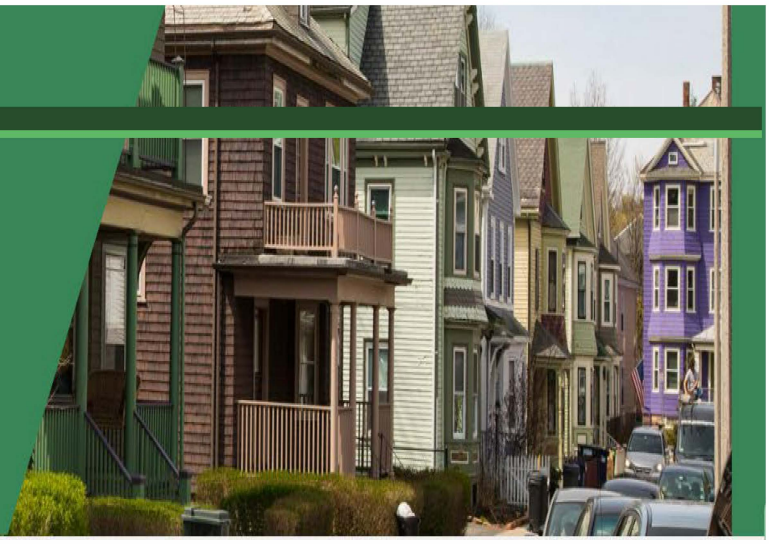
Forms of documentation that may be accepted per PHN 2017-23 (not all required):

- An airline ticket from the affected area to the City they flew to.
- Driver's license or any other government identification
- Utility bill
- Credit Report will provide information about address
- FEMA identification card. Applicant may or may not have this. It will depend on their having gone through the application process with FEMA. All evacuees should apply as it makes them eligible for various federal benefits.
- Verification from the Red Cross or other disaster aid organizations.

☐ **Proof of Primary Residence (verification that applicant is/was a resident of the affected property).**

Required: 1 of the following verification documents:

- **Official Fire Report with applicant identified as primary resident**
- **Rent Receipts**
- **Lease/Rental Agreement**
- **Written statement of the property owner.**
- **Other- Official mail or other documentation confirming residence including but not limited to:**
  - **RMV documents**
  - **Utility Bill**
  - **Bank statement**



- **School records**
- **Voter Registration**
- **Medical records**
- **Public benefits records**
- **Paystubs, etc.**

Guidance: CSO may request additional documents if the document submitted does not sufficiently verify Primary Residence.

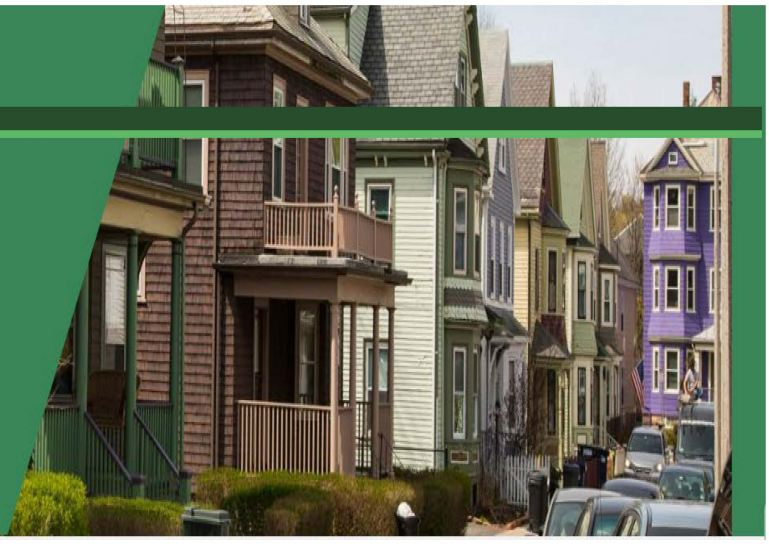
☐ **Proof of Current Temporary Living Situation:**
If already displaced from Primary Residence, to verify eligibility for this Priority, the applicant must provide documentation of their current temporary living situation from a third party with knowledge of the situation.

Required: ***Description of current situation. (Source: Applicant response in Priority and Preference Screening Package*).**

Required: Third-party verification of current temporary housing
May Include, but is not limited to, a letter from:

- **shelter provider**
- **friends with whom the applicant is staying temporarily**
- **relative with whom the applicant is staying temporarily**
- **statement by police or individual with first-hand knowledge that Applicant is sheltering in vehicle or on street.**

Guidance: Applicants who are living in homeless or domestic violence shelters, transitional housing programs, and nursing homes or other medical facilities are considered to be “without a place to live” and temporarily housed.



☐ **Proof the Applicant has not caused or substantially contributed to the safety-threatening or life-threatening situation.**

Fire: Copy of the Official Fire Report verifying the cause of the fire, if known. Information provided in the report does not support the conclusion that the fire is due to the negligence or intentional act of applicant or a household member.

Flood/Earthquake/Other Natural Disaster: Copy of the official report from the Red Cross or Federal Emergency Management Agency (FEMA) or similar agency. Report must show the address. Federal Disaster Declaration.



Housing Situation Priority

Priority 2
Public Action
(Type A)

EQUAL HOUSING OPPORTUNITY

Priority 2- Displacement by Public Action- Urban Renewal (Type A):

☐ **Proof of Displacement/Imminent Displacement from Primary Residence on the basis of Public Action-Urban Renewal**:

The applicant must document that they were displaced from their Primary Residence within the previous 3 years or are facing displacement by a date certain due to:

1. any low rent housing project as defined in M.G.L. c. 121B, § 1 (public works); or
2. a public slum clearance or urban renewal project initiated after January 1, 1947; or
3. other public improvement (public works or usage).

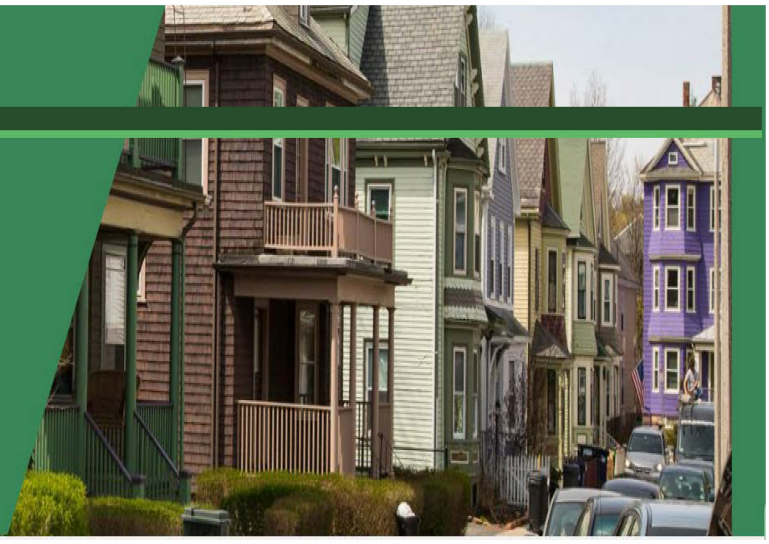
Required: Description of current situation. Applicant response in Required Verification of Priority and Preference Screening Package.

Required: Copy of the official notification of land/property taking and the stated purposes thereof from the public agency involved.

Notification should include legislative authority exercised and date of displacement.

Date of displacement must be within past 3 years (from date of CSO Priority claim review).

Guidance: Priority 2 includes relocation due to public housing redevelopment.



☐ **Proof of Primary Residence (verification that applicant is/was a resident of the affected property).**

Required: 1 of the following verification documents:

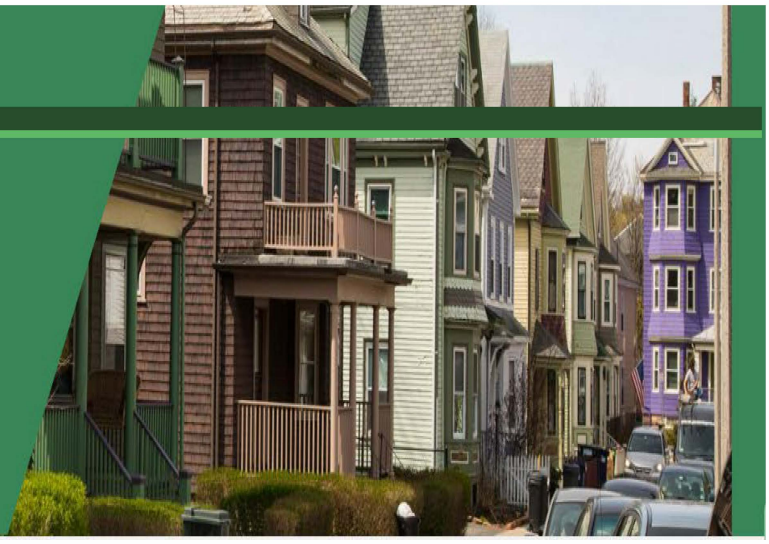
- **Copy of the official notification of land/property taking and the stated purposes thereof from the public agency involved with property and residents identified.**
- **Rent Receipts**
- **Lease/Rental Agreement**
- **Written statement of the property owner**
- **Other- Official mail or other documentation confirming residence including but not limited to:**
  - RMV documents
  - Utility Bill
  - Bank statement
  - School records
  - Medical records
  - Public benefits records
  - Paystubs, etc.
  - Voter Registration

Guidance: CSO may request additional documents if the document submitted does not sufficiently verify Primary Residence.

☐ **Proof of Current Temporary Living Situation:**
If already displaced from Primary Residence, to verify eligibility for this Priority, the applicant must provide documentation of their current temporary living situation from a third party with knowledge of the situation.

Required: ***Description of current situation. (Source: Applicant response in Priority and Preference Screening Package*).**

Required: Third-party verification of current temporary housing. May Include, but is not limited to, a letter from:



- **shelter provider**
- **friends with whom the applicant is staying temporarily**
- **relative with whom the applicant is staying temporarily**
- **statement by police or individual with first-hand knowledge that Applicant is sheltering in vehicle or on street.**

Guidance**:** Applicants who are living in homeless or domestic violence shelters, transitional housing programs, and nursing homes or other medical facilities are considered to be "without a place to live" and temporarily housed.

☒ **Proof the Applicant has not caused or substantially contributed to the safety-threatening or life-threatening situation.**

Presumed with verification of Displacement by Public Action- Urban Renewal (Type A).



Housing Situation Priority

Priority 3: Displaced by Public Action: Sanitary Code Violations (Type B)

Priority 3
Public
Action
(Type B)

EQUAL HOUSING OPPORTUNITY

☐ **Proof of Displacement/Imminent Displacement from Primary Residence on basis of Sanitary Code Violations**:

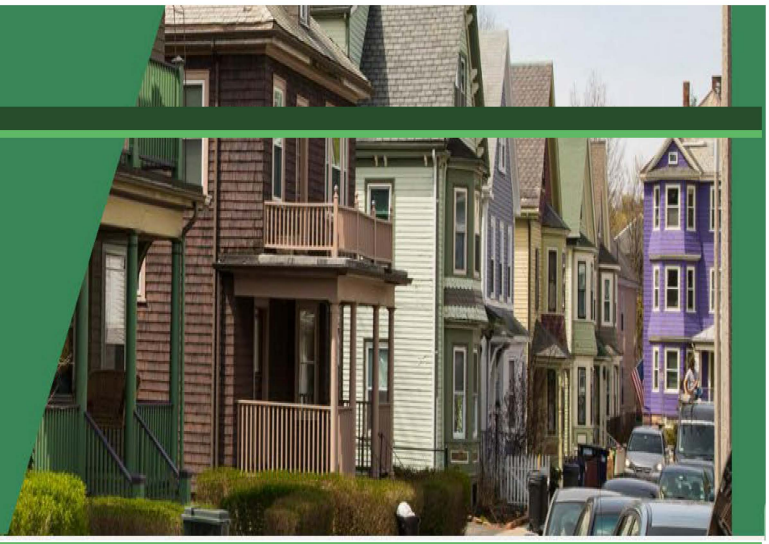
The applicant must document that they were displaced from their Primary Residence or are facing displacement with a date certain, due to minimum standards of fitness for human habitation established by the State Sanitary Code (105 CMR 410.000), Massachusetts State Building Code and other local ordinances, by-laws, rules or regulations, provided that:

1. neither the applicant nor a household member has caused or substantially contributed to the cause of enforcement proceedings; and

2. the applicant has pursued available ways to remedy the situation by seeking assistance through the courts or appropriate administrative or enforcement agencies.

Required: Description of current situation. Applicant response in Required Verification of Priority and Preference Screening Package.

Required: Copy of the official order of displacement due to code enforcement, such As a Declaration of Condemnation and Notice to Vacate. Notification should identify the address of the premises and does not indicate that the reason for the displacement or imminent displacement was a tenant caused violation.



☐ **Proof of Primary Residence (verification that applicant is/was a resident of the affected property).**

Required: 1 of the following verification documents:

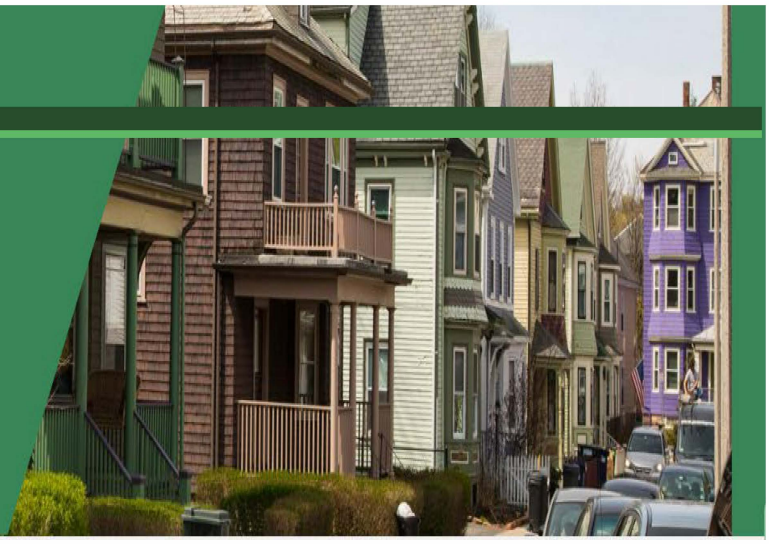
- **Copy of the official notification of land/property taking and the stated purposes thereof from the public agency involved with property and residents identified.**
- **Rent Receipts**
- **Lease/Rental Agreement**
- **Written statement of the property owner**
- **Other- Official mail or other documentation confirming residence including but not limited to:**

  - RMV documents
  - Utility Bill/ Bank statement
  - School records
  - Medical records
  - Public benefits records
  - Paystubs, etc.
  - Voter Registration

Guidance: CSO may request additional documents if the document submitted does not sufficiently verify Primary Residence.

☐ **Proof of Current Temporary Living Situation:**
If already displaced from Primary Residence, to verify eligibility for this Priority, the applicant must provide documentation of their current temporary living situation from a third party with knowledge of the situation.

Required: ***Description of current situation. (Source: Applicant response in Priority***



***and Preference Screening Package*).**

Required: Third-party verification of current temporary housing may include but is not limited to, a letter from:

- **shelter provider**
- **friends with whom the applicant is staying temporarily**
- **relative with whom the applicant is staying temporarily**
- **statement by police or individual with first-hand knowledge that Applicant is sheltering in vehicle or on street.**

Guidance**:** Applicants who are living in homeless or domestic violence shelters, transitional housing programs, and nursing homes or other medical facilities are considered to be "without a place to live" and temporarily housed.

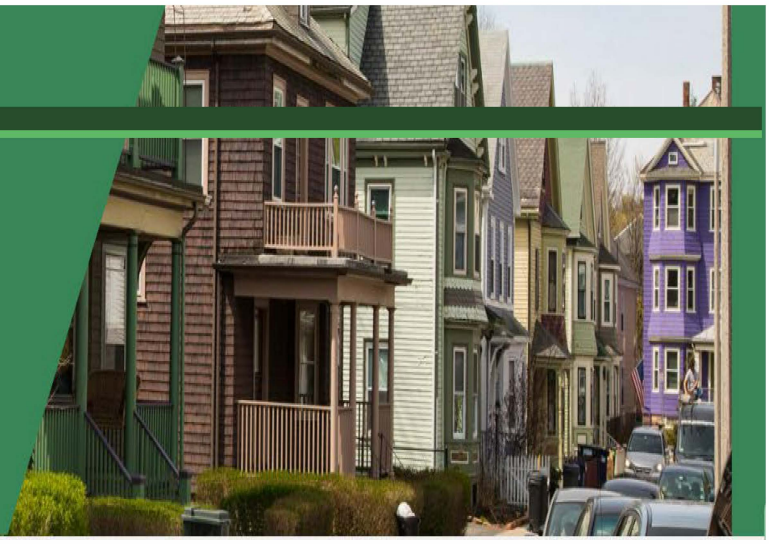
☐ **Proof the Applicant has not caused or substantially contributed to the safety-threatening or life-threatening situation.**

Required: **Copy of the official order of displacement or imminent displacement due to code enforcement, such as a Declaration of Condemnation and Notice to Vacate.**

Notification should identify the address of the premises and does not indicate that the reason for the displacement or imminent displacement was a tenant caused violation.

Examples of Tenant Caused Sanitary Code Conditions might be:

- overcrowding the premises
- accumulations of hazardous, or flammable materials in the premises
- unhealthy condition of the premises due to lack of hygiene.



☐ **Proof the Applicant has pursued available ways to prevent or avoid the safety-threatening or life-threatening situation by seeking assistance through the courts or appropriate administrative or enforcement agencies**.

Required: **Written statement:** A statement of efforts taken by the applicant to remedy the situation prior to the imminent displacement and subsequent to the displacement.

Required: Document(s), if available, demonstrating action(s) taken to prevent or avoid the Situation including but not limited to:

- letters to the landlord
- previous board of health notices
- court records



Priority 4: Homeless for Reasons in Housing Situation

Priority Policy:

- **Court Ordered Eviction**
- **Severe Medical Emergency**
- **Abusive Situation**

Priority 4
Court
Ordered
Eviction

EQUAL HOUSING OPPORTUNITY

☐ **Proof of displacement or imminent displacement from primary residence on basis of Court Ordered Eviction.**

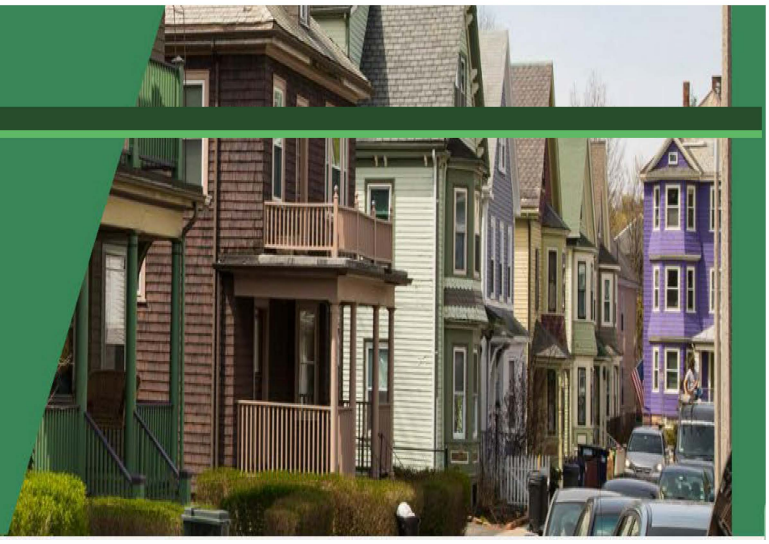
Required: **Description of current situation. Applicant response in Required Verification of Priority and Preference Screening Package.**

Required: Copy of the official Eviction Order or Housing Court, District Court or Boston Municipal Court Judgement or other court document requiring the tenant to vacate, including but not limited to, an Agreement for Judgement (tenant and landlord agree to terms) or Agreement of the Parties, that shows applicant is required to vacate the premises for a no-fault reason.

A "Notice to Quit" alone is not sufficient documentation.

"Imminent displacement" is demonstrated by a known vacate date from a Primary Residence listed on a Judgement or other court documents.

Judgement or other court document should identify the address of the premises, vacate date, and show that the reason for the eviction is not the fault of the applicant.



☐ **Proof of Primary Residence (verification that applicant is/was a resident of the affected property).**

Required: 1 of the following verification documents:

- **Rent Receipts**
- **Lease/Rental Agreement**
- **Written statement of the property owner**
- **Other- Official mail or other documentation confirming residence including but not limited to:**
  - **RMV documents**
  - **Utility Bill**
  - **Bank statement**
  - **School records**
  - **Medical records**
  - **Public benefits records**
  - **Paystubs, etc.**
  - **Voter Registration**

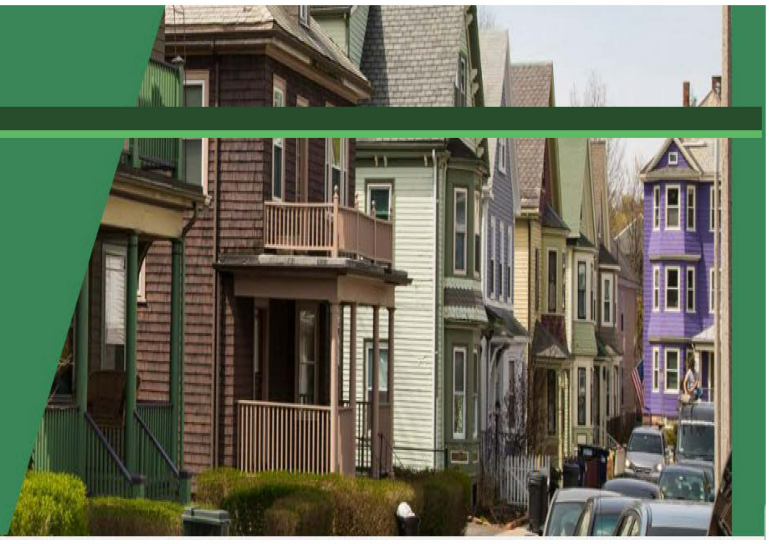
Guidance: CSO may request additional documents if the document submitted does not sufficiently verify Primary Residence.

☐ **Proof of Current Temporary Living Situation:**
If already displaced from Primary Residence, to verify eligibility for this Priority, the applicant must provide documentation of their current temporary living situation from a third party with knowledge of the situation.

Required: ***Description of current situation. (Source: Applicant response in Priority and Preference Screening Package*).**

Required: Third-party verification of current temporary housing
May Include, but is not limited to, a letter from:

- **shelter provider**
- **friends with whom the applicant is staying temporarily**
- **relative with whom the applicant is staying temporarily**



- **statement by police or individual with first-hand knowledge that Applicant is sheltering in vehicle or on street.**

Guidance**:** Applicants who are living in homeless or domestic violence shelters, transitional housing programs, and nursing homes or other medical facilities are considered to be "without a place to live" and temporarily housed.

☐ **Proof the Applicant has not caused or substantially contributed to the safety-threatening or life-threatening situation.**

Required: Copy of the official Eviction Order or Housing Court, District Court, or Boston Municipal Court Judgement or other court document requiring the tenant to vacate, including but not limited to an Agreement for Judgement (tenant and landlord agree to terms), that shows applicant is required to vacate the premises for a no-fault reason.

Judgement should identify the address of the premises and show that the reason for the eviction is not the fault of the applicant.

Guidance: If Judgement or court document requiring the tenant to vacate does not indicate applicant is at fault through non-payment, assessment of damages or non-compliance with the written terms of the tenancy, CSO will determine the applicant has not substantially contributed to the safety threatening or life-threatening situation.

Reasons for no-fault eviction might include:

- Eviction because of a condominium conversion or rehabilitation of the property or landlord wants the unit for his own or family use.



Priority 4: Homeless for Reasons in Housing Situation Priority Policy:

- **Court Ordered Eviction**
- **Severe Medical Emergency**
- **Abusive Situation**

Priority 4
Severe
Medical

EQUAL HOUSING OPPORTUNITY

☐ **Proof of displacement or imminent displacement from Primary Residence on basis of Severe Medical Emergency.**

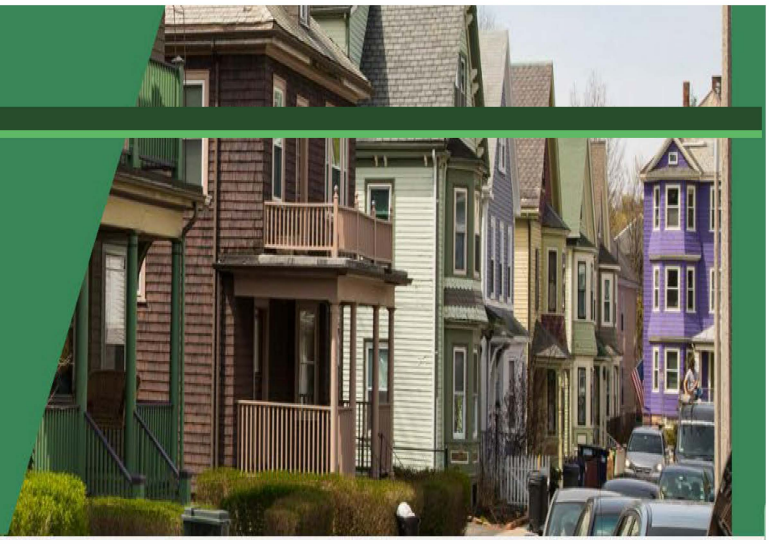
Required: **Description of current situation. Applicant response in Required Verification of Priority and Preference Screening Package.**

Required: A completed Physician's or other medical provider's Verification of Severe Medical Emergency Form. The form must verify (1) that the applicant or a member of the applicant's household suffers from an illness or injury which poses a severe and medically documented threat to life or safety and (2) that the applicant's Primary Residence is or was a cause of the illness or injury or is a substantial impediment to treatment or recovery.

☐ **Proof of Primary Residence (verification that applicant is/was a resident of the affected property).**

Required: 1 of the following verification documents:

- **Rent Receipts**
- **Lease/Rental Agreement**
- **Written statement of the property owner**



- **Other- Official mail or other documentation confirming residence including but not limited to:**
  - **RMV documents**
  - **Utility Bill**
  - **Bank statement**
  - **School records**
  - **Medical records**
  - **Public benefits records**
  - **Paystubs, etc.**
  - **Voter Registration**

Guidance: CSO may request additional documents if the document submitted does not sufficiently verify Primary Residence.

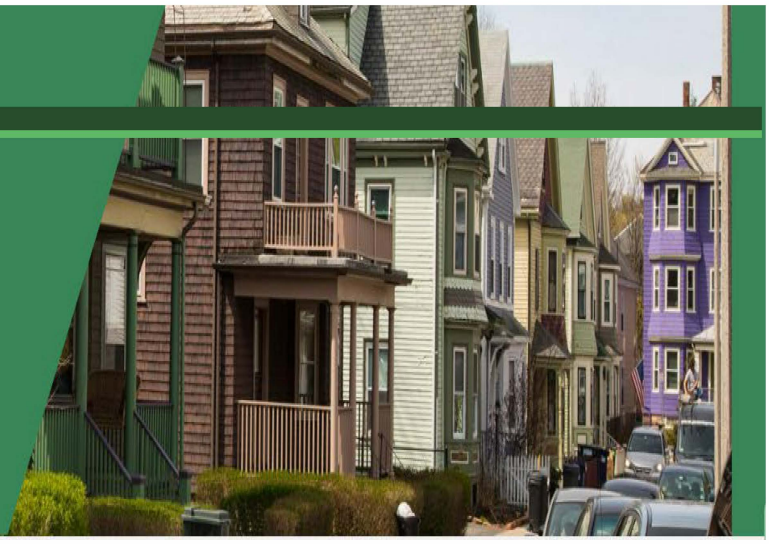
☐ **Proof of Current Temporary Living Situation:**
If already displaced from Primary Residence, to verify eligibility for this Priority, the applicant must provide documentation of their current temporary living situation from a third party with knowledge of the situation.

Required: ***Description of current situation. (Source: Applicant response in Priority and Preference Screening Package*).**

Required: Third-party verification of current temporary housing
May Include, but is not limited to, a letter from:

- **shelter provider**
- **friends with whom the applicant is staying temporarily**
- **relative with whom the applicant is staying temporarily**
- **statement by police or individual with first-hand knowledge that Applicant is sheltering in vehicle or on street.**

Guidance: Applicants who are living in homeless or domestic violence shelters, transitional housing programs, and nursing homes or other medical facilities are considered to be “without a place to live” and temporarily housed.



☐ **Proof the Applicant has not caused or substantially contributed to the safety-threatening or life-threatening situation.**

Required: Description of current situation. Applicant response in Priority and Preference Screening Package.

Required: A completed Physician's or other medical provider's Verification of Severe Medical Emergency Form. The medical provider must complete the form in a manner that reliably documents that the applicant's Primary residence is or was the cause of the medical emergency or is an impediment to treatment or recovery from this illness or injury.

Applicant may also provide:

- **Photographs**
- **Board of Health Citation that documents the condition.**
- **Other evidence of a housing situation that is dangerous for the applicant's or other household member's medical condition.**



Priority 4: Homeless for Reasons in Housing Situation Priority Policy:

- **Court Ordered Eviction**
- **Severe Medical Emergency**
- **Abusive Situation**

Priority 4
Abusive
Situation

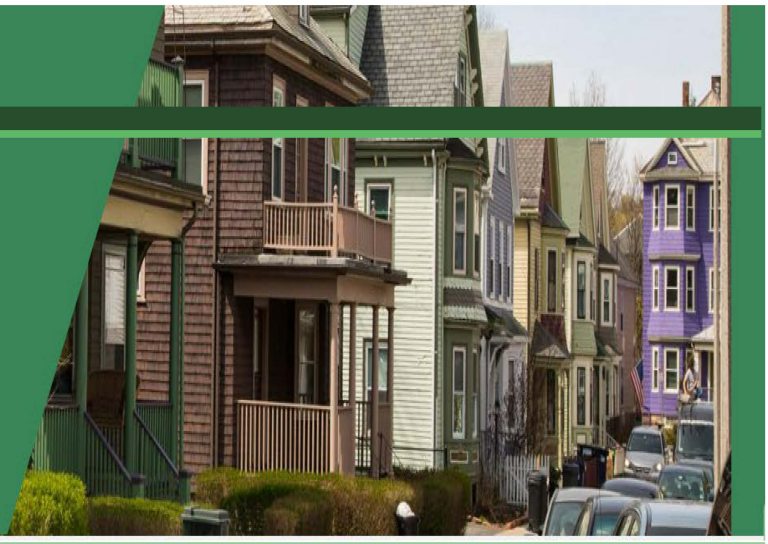
EQUAL HOUSING OPPORTUNITY

Guidance on Priority 4 – Homeless Due to Abusive Situation

Priority for Homeless Applicants is granted for applicants in an Abusive Situation under the Housing Situation Priority Policy. The Policy grants Priority 4 to applicants who have been displaced or are about to be displaced from their Primary Residence due to an Abusive Situation. (PHN 2020-39)

The Policy provides that an applicant is in an Abusive Situation if the applicant or member of the applicant household is determined by the LHA to be a victim of abuse as defined in the Abuse Prevention Act (G.L. c.209A, §1). General Law - Part II, Title III, Chapter 209A, Section 1 (malegislature.gov) (PHN 2020-39)

> ***Abusive Situation.*** An applicant is in an abusive situation if the applicant or member of the applicant household is determined by the LHA to be a victim of abuse as defined in the Abuse Prevention Act (G.L. c.209A, §1), which abuse constitutes a significant and direct threat to life or safety.
>
> The Abuse Prevention Act defines "abuse" as:
>
> > the occurrence of one or more of the following acts between **"family or household members"**:
> >
> > (1) attempting to cause or causing physical harm;
> >
> > (2) placing another in fear of imminent serious physical harm; or



(3) causing another to engage involuntarily in sexual relations by force, threat or duress.

(4) coercive control (defined in Chapter 118 of the Acts of 2024).

"Family or household members" are individuals who are related by blood or marriage, have a child together, or who now or formerly resided in the same household or dated each other.

General Guidance Related to Verification Abusive Situation:

Verification of Displacement: May use Applicant statement or other reliable source. In determining whether an applicant became displaced or is imminently facing displacement due to abuse, LHAs (CSO) may consider a detailed explanation from the applicant or other reliable source of the circumstances that led to the applicant being displaced or imminently facing displacement. (PHN 2020-39)

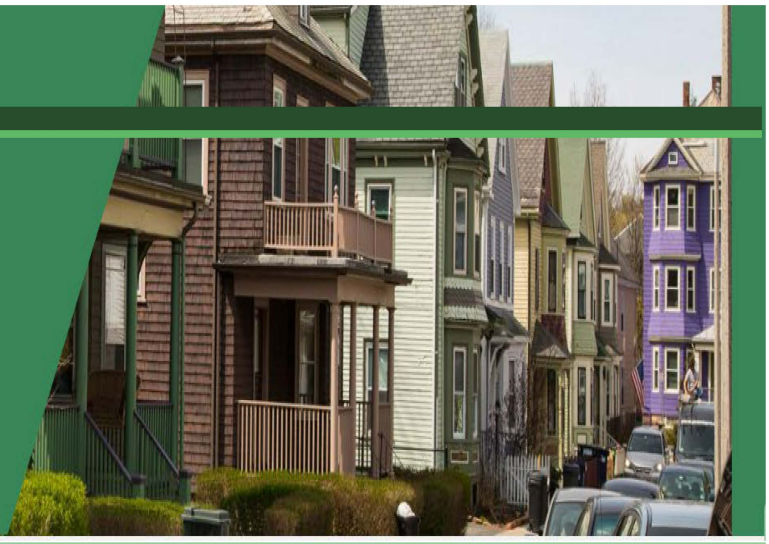
Guidance:

Verification that the Applicant did not Contribute to their Circumstances: There is a presumption that victims did not contribute to their circumstances. Therefore, victims must not be required to demonstrate that they did not cause/contribute to the Abusive Situation, or to demonstrate that they tried to prevent the Abusive Situation that caused their displacement or imminent displacement. (PHN 2020-39)

Guidance:

Qualification for P4 Abusive Situation for Victims of Sexual Assault or Stalking: While victims of sexual assault or stalking that does not constitute "abuse" as defined by the Abuse Prevention Act do not receive priority based on that situation alone, if the victim becomes displaced/faces displacement as a consequence of the sexual violence or stalking, the victim may be eligible for Priority 4 under the Housing Situation Priority Policy. As in cases of domestic violence, there should be a presumption that victims did not contribute to their circumstances. (PHN 2020-39)

Therefore, Abusive Situation may include victims of sexual assault or stalking perpetrated by individuals who do not qualify as family or household members" as defined in Abuse Prevention Act (G.L. c.209A, §1).



☐ **Proof of displacement or imminent displacement from primary residence on basis of Abusive Situation**

Documentation of Displacement:

Required: **Description of current situation. Applicant response in Required Verification of Priority and Preference Screening Package.**

Guidance: Verification of Displacement: May use Applicant statement or other reliable source In determining whether an applicant became displaced or is imminently facing displacement due to abuse, LHAs may consider a detailed explanation from the applicant or other reliable source of the circumstances that led to the applicant being displaced or imminently facing displacement. (PHN 2020-39)

Documentation of Abusive Situation:

Since certain actions on the part of victims of domestic violence can trigger violent acts by the offenders, no particular item can be mandated as the required form of verification.

Required: **Abusive situation needs to be documented through at least one or more of the following based upon the Applicant's individual circumstances:**

- **medical reports**
- **police reports**
- **court reports**
- **applicant has attempted to get restraining order**
- **applicant has filed a civil or criminal complaint against accused**
- **letter from attorney stating case**
- **letter from counselor**
- **psychological report**
- **letter from social service agency**



- **detailed 3rd part written explanation of the circumstances that led to Applicant's present housing situation**

Guidance: If any verification appears vague, CSO may obtain additional documentation until CSO determines that a reasonable showing of the abusive situation has been made.

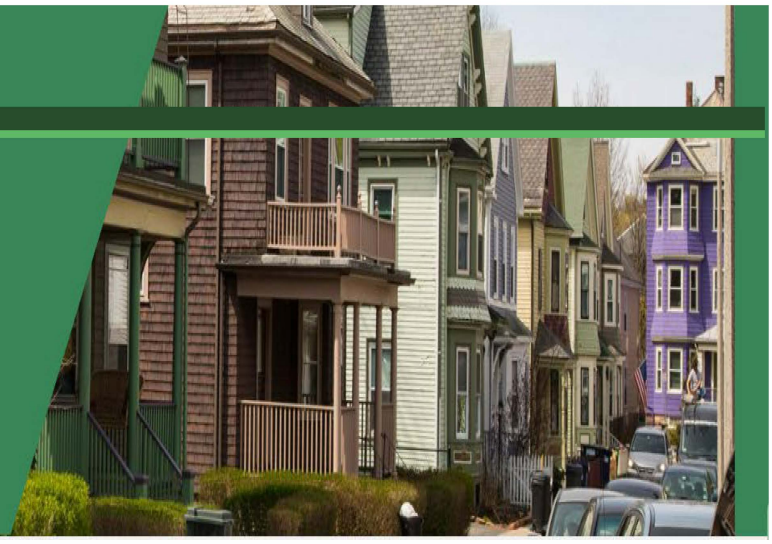
Guidance: Abusive Situation may include victims of sexual assault or stalking perpetrated by individuals who do not qualify as family or household members" as defined in Abuse Prevention Act (G.L. c.209A, §1).

☐ **Proof of Primary Residence (verification that applicant is/was a resident of the property the applicant was displaced or will be displaced from due to Abusive Situation).**

Required: 1 of the following verification documents:

- **Rent Receipts**
- **Lease/Rental Agreement**
- **Written statement of the property owner**
- **Other- Official mail or other documentation confirming residence including but not limited to:**
  - **RMV documents**
  - **Utility Bill**
  - **Bank statement**
  - **School records**
  - **Medical records**
  - **Public benefits records**
  - **Paystubs, etc.**
  - **Voter Registration**

Guidance: CSO may request additional documents if the document submitted does not sufficiently verify Primary Residence.



☐ **Proof of Current Temporary Living Situation:**
If already displaced from Primary Residence, to verify eligibility for this Priority, the applicant must provide documentation of their current temporary living situation from a third party with knowledge of the situation.

Required: ***Description of current situation. (Source: Applicant response in Priority and Preference Screening Package*).**

Required: Third-party verification of current temporary housing
May Include, but is not limited to, a letter from:

- **shelter provider**
- **friends with whom the applicant is staying temporarily**
- **relative with whom the applicant is staying temporarily**
- **statement by police or individual with first-hand knowledge that Applicant is sheltering in vehicle or on street.**

Guidance: Applicants who are living in homeless or domestic violence shelters, transitional housing programs, and nursing homes or other medical facilities are considered to be “without a place to live” and temporarily housed.

☒ **Proof the Applicant has not caused or substantially contributed to the safety-threatening or life-threatening situation.**

Presumed with verification of Homeless Due to Displacement by Abusive Situation.



Housing Preferences:

- **Local Preference**

Preferences

Local

EQUAL HOUSING OPPORTUNITY

Applicants for Public Housing and Alternative Housing Voucher Program (AHVP):

Definition: Local Resident. A person who has a principal residence or a place of employment in a city or town at the time of application. (760 CMR 5.03)

Each applicant may select up to 2 cities or towns for the purpose of Local Residence:

- **1 for residency**
  - Homeless Applicants Choose Either:
    - Community from which they are displaced through no fault of their own, **or**
    - Community in which they are temporarily housed.
- **1 for employment.**

Guidance: Employment: In the event that the applicant is employed in more than one city or town, the applicant may select one community for local preference on the basis of employment. (May select based upon employment of household members or head of household)

If an applicant is not homeless, temporary residence with relatives or friends in the city or town is not sufficient unless the person's last residence and domicile were in the city or town.



Applicants for Massachusetts Rental Voucher Program (MRVP):

Each MRVP applicant may select up to 3 cities or towns for the purpose of Local Residence:

- **1 for residency**

  Homeless Applicants Choose Either:

  - Community from which they are displaced through no fault of their own, **or**
  - Community in which they are temporarily housed.

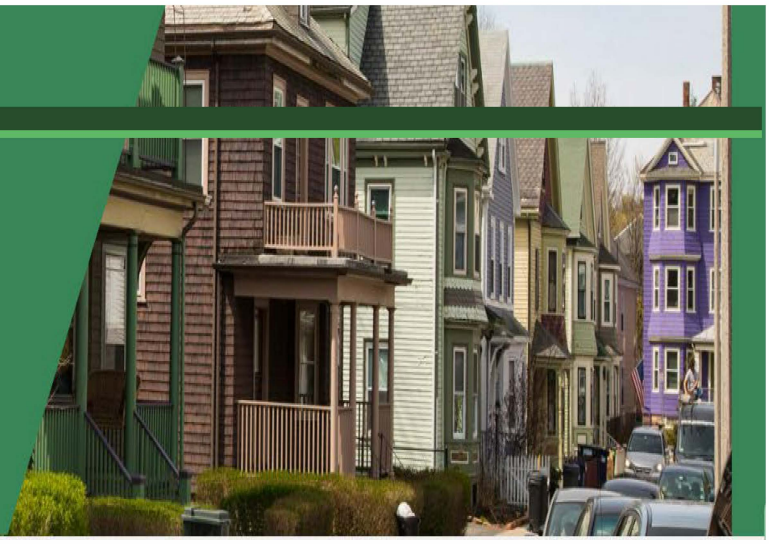
  Guidance: If an applicant is not homeless, temporary residence with relatives or friends in the city or Town is not sufficient unless the person's last residence and domicile was in the city or town

- **1 for employment.**

  Guidance: In the event that the applicant is employed in more than One city or town, the applicant may select one community for local preference on the basis of employment. (May select based upon employment of a household member or of the head of household).

- **1 for child's school attendance:**

  MRVP Applicants may claim local preference in the community in which they have a child (who qualifies as a household member), who is enrolled in school.



☐ **Local Preference Based upon Proof of Residence in Community Displaced From: (Verification that applicant is/was a resident of the affected property).**

Homeless Applicants who are claiming local preference based upon community in which they were displaced from their primary residence through no fault of their own must provide documentation of their residence in the community.

Required: **1 of the following verification documents:**

- **Rent Receipts**
- **Lease/Rental Agreement**
- **Written statement of the property owner**
- **Other- Official mail or other documentation confirming residence including but not limited to:**

  - RMV documents
  - Utility Bill/ Bank statement
  - School records
  - Medical records
  - Public benefits records
  - Paystubs, etc.

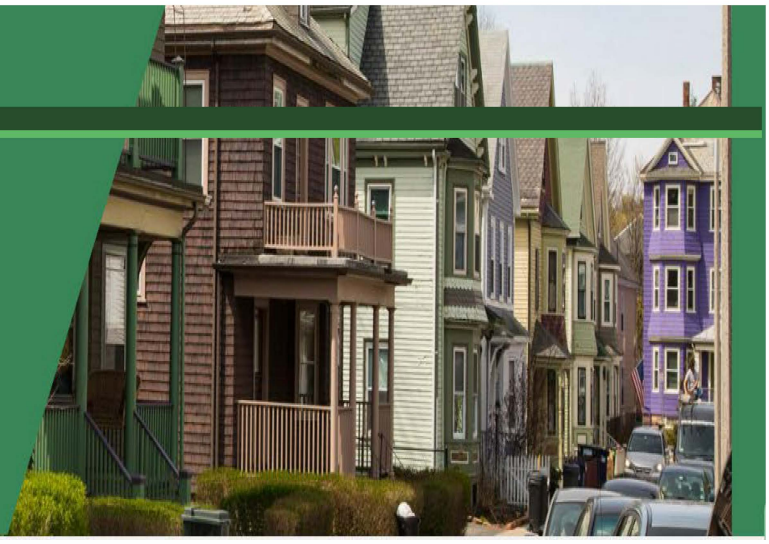
Guidance: CSO may request additional documents if the document submitted does not sufficiently verify Primary Residence.

☐ **Local Preference Based upon Current Temporary Residence:**

Homeless Applicants who claim local preference based upon current temporary residence must provide documentation of their current temporary living situation from a third party with knowledge of the situation.

Required: Third-party verification of current temporary housing. May Include, but is not limited to, a letter from:

- **shelter provider**



- **friends with whom the applicant is staying temporarily**
- **relative with whom the applicant is staying temporarily**
- **statement by police or individual with first-hand knowledge that Applicant is sheltering in vehicle or on street.**

Guidance**:** Applicants who are living in homeless or domestic violence shelters, transitional housing programs, and nursing homes or other medical facilities are considered to be "without a place to live" and temporarily housed.

☐ **Local Preference Based Upon Employment:**

Applicants who claim local preference based upon employment must provide documentation of their current employment.

Required: **One of the following documents:**

- Copy of a paystub that displays your employment address.
- Letter from employer that displays employment address.

Guidance**:** In the event that the applicant is employed in more than one city or town, the applicant may select one community for local preference on the basis of employment. (May select based upon employment of a household member or the head of household).

☐ **Local Preference Based Upon Child's Enrollment in School: (MRVP Applicants Only)**

Applicants who claim local preference based upon a child's enrollment in school must provide documentation of enrollment.

Required: One of the following, including but not limited to:

- report card identifying school and child enrolled
- a letter from the school verifying enrollment
- a school ID identifying school and child enrolled



Housing Preferences:

- **Veteran Preference**

Preference

Veteran

EQUAL HOUSING OPPORTUNITY

Definition (760 CMR 5.03): Person who is a veteran as defined as a Veteran in Massachusetts General Laws, clause forty-third of section seven of chapter four. The word "veteran'" as used herein shall also include the spouse, surviving spouse, parent or other dependent of such person.

Veteran can include:"

- **Veteran Applicant**
- **Spouse of a Veteran**
- **Surviving Spouse of a Veteran**
- **Dependent Parent of a Veteran**
- **Other Dependent of a Veteran**

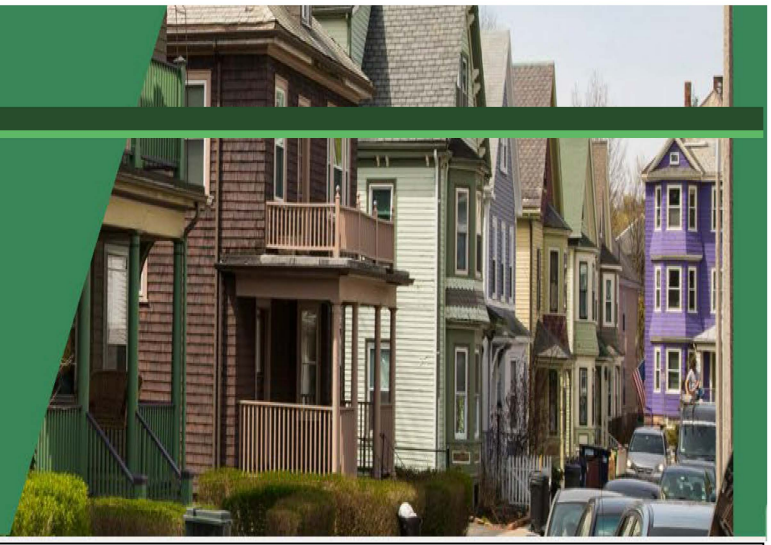
Proof of Verification of Veteran Status- Veteran Applicant:

Required: **DD214 *Certificate of Release or Discharge From Active Duty***

DD214 form is reviewed to determine if the Applicant Veteran meets the definition of Veteran contained in Massachusetts General Laws, Chapter 4, Section 7, clause 43 and reflected in the Veterans Status Chart.

Guidance: Veterans Status Chart is available at www.mass.gov/service-details/definition-of-a-veteran

Executive Office of Housing and Livable Communities (EOHLC)



☐ **Verification of Status as Dependent of a Veteran:**

Required: **DD214 *Certificate of Release or Discharge From Active Duty***

Required: **Additional Verification Based on Category of Dependency:**

Dependent of a Deceased Veteran:
Required: Death certificate or U.S. Veteran's Administration Benefit Award Letter identifying the applicant as receiving Veteran's Benefits as the dependent of a deceased Veteran.

Spouse or widow/widower of a Veteran:
Required: Marriage certificate or U.S. Veteran's Administration Benefit Award Letter identifying the applicant as receiving Veteran's Benefits as the dependent of a Veteran.

Dependent Child of a Veteran:
Required: Birth certificate or adoption record with name of eligible veteran as parent or U.S. Veteran's Administration Benefit Award Letter identifying the applicant as receiving Veteran's Benefits as the dependent of a Veteran.