EA ADVOCACY GUIDE

About MLRI

Massachusetts Law Reform Institute (MLRI) provides statewide advocacy and leadership in advancing laws, policies, and practices that secure economic, racial, and social justice for low-income people and communities. MLRI furthers its mission through impact litigation, policy advocacy, coalition building, community lawyering, and public information. In addition, it serves as the poverty law support center for the Massachusetts civil legal aid and advocacy community, providing expertise and support to local legal aid programs, social service, health care and human service providers, and community organizations that serve low income people throughout the state. www.mlri.org.

Acknowledgments

MLRI dedicates this Emergency Assistance (EA) Advocacy Guide to the low-income children and their families for whom it was written.

MLRI also dedicates this Guide to our former colleague and friend Ruth Bourquin, who was the original author of this publication, and to all of the advocates in Massachusetts who help children and their families obtain the benefits for which they are eligible, and who work to preserve and protect basic supports for people living in poverty.

We also honor Michaelann Bewsee, longtime Executive Director of Arise for Social Justice. Michaelann was a powerful Springfield community organizer, activist, and a force of nature. Her tough, relentless, passionate commitment to justice, fairness, equality, and the poorest in the community never wavered.

The 2019 edition of this Guide was updated by Andrea Park of MLRI, Kelly Turley of Massachusetts Coalition for the Homeless, Elizabeth Alfred of Central West Justice Center, and Laticia Walker-Simpson of Greater Boston Legal Services.

Special thanks go to Lena Wilson of MLRI for her work on the production of the Guide.

September 2019
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Introduction

Emergency Assistance (EA) is the Massachusetts program providing emergency shelter and re-housing services for homeless families with children.

In 2009 the Massachusetts Legislature transferred responsibility for administering EA from the Department of Transitional Assistance (DTA) to the Department of Housing and Community Development (DHCD). In fiscal year 2012, the Patrick-Murray Administration implemented a program of temporary rental assistance, household assistance, and moving assistance called HomeBASE as an alternative to emergency shelter. HomeBASE currently provides up to $10,000 per year of household assistance or moving assistance to help EA-eligible families obtain housing instead of shelter, or to exit emergency shelter for housing.

In fiscal year 2013 strict new eligibility criteria were implemented for the EA program, forcing many families – including children – to sleep in cars, parks, emergency rooms, and other dangerous places before being eligible for shelter. See “Out in the Cold,” MLRI policy paper, available at https://www.mlri.org/publications/out-in-the-cold/. In fiscal year 2020 the Legislature amended the EA budget language to say that families should be placed “but for having spent 1 night” in a place not meant for human habitation. It is not yet clear how this policy change will be implemented, and there is legislation pending to make this change permanent.

Families who are denied shelter are not guaranteed any other assistance, although they can apply for up to $4,000 of Residential Assistance for Families in Transition (RAFT). See Question 21.

As required by the Legislature, families experiencing homelessness are able to apply for EA in local DTA offices. In spite of this mandate, DHCD has reduced the number of offices where they will take EA applications. Appendix A of this Guide includes the locations of the local DTA offices where DHCD staff are taking applications as well as a telephone number families can call to apply for EA remotely. Appendix B includes the names, phone numbers and fax numbers of the DHCD staff assigned to cover the various offices.
Introduction

The EA, HomeBASE, and related DTA regulations are cited in this Guide. Some regulations may change before this Guide is updated, so always check to be sure you have the most up-to-date version of the regulations and rules.

The EA regulations refer to some Department of Transitional Assistance (DTA) regulations that apply to the TAFDC (family cash assistance) program, including those that govern counting of income. The DTA regulations are available at https://www.mass.gov/lists/department-of-transitional-assistance-regulations.


If you think you are eligible for EA but have problems getting services, or if you receive a notice from DHCD saying your EA or HomeBASE services are being terminated or that you have violated EA shelter or HomeBASE rules, you may want to consult a legal advocate. Appendix C includes a list of legal services offices that may be able to help you. Contact the office in your local area.

HomeBASE and RAFT are administered by several regional nonprofit housing organizations under contract with DHCD. A list of those organizations can be found in Appendix D.

If you are experiencing homelessness or are at risk of homelessness and need help finding new housing or staying in your housing, you can also contact the regional housing agencies for your area listed in Appendix E.
Part 1
Emergency Assistance Eligibility

1

What is Emergency Assistance (EA)?

Emergency Assistance (EA) is a state program that provides certain families with children and pregnant people experiencing homelessness with:

- emergency shelter, and

- help finding housing.

Currently, most families eligible for EA are also eligible for housing-related assistance called HomeBASE, or the Short-Term Housing Transition (STHT) program.

HomeBASE benefits include:

- up to $10,000 per year for rent or utility arrears, payments to allow a family experiencing homelessness to stay with another household, first and last month’s rent and security deposit, moving expenses, and other costs to allow a family to become or remain housed.

To get HomeBASE you must first be found eligible for Emergency Assistance, so it is important to complete an EA application even if you only want HomeBASE. HomeBASE is available to help you avoid going into shelter or is available to help you leave shelter.

See 760 CMR 67 (EA regulations, under the Code of Massachusetts Regulations):
2 Where can you apply for EA?

The Department of Housing and Community Development (DHCD), through its Division of Housing Stabilization (DHS), runs the EA program, but DHCD workers are located in Department of Transitional Assistance (DTA) offices and take EA applications there. In addition, DHCD has a telephone line that families can call to apply for EA remotely, if they cannot make it to a local office.

The EA application phone number is **866-584-0653**. See Appendix A.

You can apply for EA at the local DTA offices listed in Appendix A between 8 a.m. and 4 p.m. each weekday. You may want to call the office to confirm the hours for that day. Note: as of the time of publication the Lowell office is only taking in-person applications on Tuesdays and Thursdays, and other offices may not be consistently open. The state budgets for FY19 and FY20 require DHCD to maintain office locations in the ten cities and towns that had local offices as of January 1, 2018.

**Advocacy Tips:**

✓ You should go to your local DHCD/DTA office as early in the morning as possible since the application process often takes all day.

✓ DHCD should take your application the same day you go to apply. If someone tries to send you away without taking your application and you need a place to stay right away, ask to speak to a DHCD Supervisor or contact an advocate immediately.

✓ DHCD should ask you which language you prefer to communicate in when you apply. If they do not ask, tell the DHCD worker your preferred language. If you speak Spanish or another common language, you have the right to receive important documents,
including the application, in your language. You have the right to get 
free oral interpretation from DHCD.

✓ DHCD may try to discourage you from applying for EA by suggesting 
that you stay with friends or relatives. If you have no safe place to go 
and you appear to meet eligibility rules based on your own statements 
and other information DHCD has, you have a right to be placed in EA 
shelter right away. See Questions 12 and 13.

✓ If you apply for EA but DHCD says you are not eligible, DHCD 
should give you a written denial notice that explains why you were 
denied and that you have a right to appeal. See Question 21.

✓ DHCD does not take EA applications at every DTA office. This may 
violate state law. St. 2009, c. 27, § 142. If this causes a problem for 
you, contact an advocate.

3 Which families experiencing homelessness 
are eligible for EA?

EA is available for some:

- children under age 21 who are experiencing homelessness and their 
families, including parents, stepparents, other close relatives or legal 
guardians who are primary caretakers of the child/ren, and/or

- pregnant people at any stage of pregnancy who are experiencing 
homelessness, and the pregnant person’s spouse, See 760 CMR 
67.02(1),

- who meet financial and other eligibility rules. See Questions 4-11.

Note: DHCD has said that you do not need to be married to qualify as a 
“spouse” or “step-parent”; they can include persons with whom the parent 
or pregnant person is “involved as a couple in an inter-dependent 
relationship that is intended to be long-term.” See Housing Stabilization 
Notice 2011-02 available at 
What is the EA income limit?

For applicants. To be eligible for Emergency Assistance as an applicant, your family’s gross monthly income must be below 115% of the federal poverty limit for your family size. The federal government usually increases the amount slightly in January or February of each year. As of January 2019 the EA eligibility standards for applicants were:

<table>
<thead>
<tr>
<th>Household Size</th>
<th>EA Eligibility Standard (monthly)</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>$1,197</td>
</tr>
<tr>
<td>2</td>
<td>$1,621</td>
</tr>
<tr>
<td>3</td>
<td>$2,044</td>
</tr>
<tr>
<td>4</td>
<td>$2,468</td>
</tr>
<tr>
<td>5</td>
<td>$2,891</td>
</tr>
<tr>
<td>6</td>
<td>$3,15</td>
</tr>
<tr>
<td>7</td>
<td>$3,738</td>
</tr>
<tr>
<td>8</td>
<td>$4,162</td>
</tr>
<tr>
<td>Each additional household member</td>
<td>$424</td>
</tr>
</tbody>
</table>


Remember: These limits usually change each January or February so be sure you are using the most recent numbers. You can check for updates at https://www.mass.gov/service-details/housing-stabilization-notices
EA Eligibility

EA looks at your gross income, which is your total income before any tax withholdings or other deductions. See 760 CMR 67.02(5). If you are working, DHCD usually asks for your last 4 pay stubs if you are paid weekly, or last 2 pay stubs if you are paid every other week. Since most months are not exactly 4 weeks long, to calculate your income DHCD takes your last 4 weekly pay stubs, adds them together, divides by 4, then multiplies that amount by 4.333; or, it takes your last 2 biweekly pay stubs, adds them together, divides by 2, and then multiplies that amount by 2.167. This is the number they generally will use for your monthly gross income.

<table>
<thead>
<tr>
<th>Weekly pay:</th>
<th>Biweekly pay:</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Add together last 4 pay stubs</td>
<td>1. Add together last 2 pay stubs</td>
</tr>
<tr>
<td>2. Divide total by 4</td>
<td>2. Divide total by 2</td>
</tr>
</tbody>
</table>

Note: If you expect your income to go down soon, DHCD should use the best estimate of income for the next month. See 106 CMR 702.920, DTA regulations incorporated into the EA regulations through 760 CMR 67.02(5)(b) and 106 CMR 204.290. If you expect your hours or pay rate to decrease, tell DHCD and get a letter from your employer that states what your future pay will be.

See Question 5 for a list of what income does and does not count for EA.

Families receiving EA who go over income. If you are receiving EA shelter benefits and your gross income goes over the EA eligibility standard for 90 consecutive days or more, you can continue to receive benefits for six more months from the day you went over income before being terminated from the program (unless you become ineligible for another reason). In the FY20 budget, the Legislature changed the income limit for families who are already receiving EA shelter to 200% of the federal poverty level. You will not be subject to the over-income termination if your income goes back under 200% of the poverty level within 90 days. See HSN 2019-2 at https://www.mass.gov/files/documents/2019/09/06/200%25%20of%20FPG%202019.pdf
Part 1 • EA Eligibility

If you are over income for 90 consecutive days or more, in order to receive shelter for six months from the date you went over income, you:

- must save the amount of income that is over the income limit (this is in addition to what you must save under your EA Rehousing Plan; see Question 16),

- may not withdraw the saved money until you leave shelter (except to pay costs directly related to getting permanent housing or for other purposes approved by your DHCD worker), and

- must follow all other EA rules. See 760 CMR 67.02(5)(d)-(f).

In special situations, DHCD may extend your EA benefits beyond the six months, even if your income is over the limit for more than 90 days. See 760 CMR 67.02(5)(g). Ask your DHCD worker if you need more time to find housing.

For families receiving HomeBASE. If you are receiving HomeBASE benefits and your gross income goes over the EA eligibility standard, you can continue to receive HomeBASE benefits until your income goes over 50% of the area median income for your area, as long as you are complying with your stabilization plan (see Question 16). Annual income equal to 50% of area median income for your area can be found on the “very low income” lines on the “Income Limits” chart available at https://www.huduser.gov/portal/datasets/il.html.

Advocacy Tips:

✓ Before you use any of the money you are required to save while in shelter, ask your DHCD worker or your shelter provider if the spending is allowed and try to get approval in writing.

✓ One-time “lump sum” income, such as a personal injury settlement, does not cause a period of ineligibility for EA as it does for Transitional Aid to Families with Dependent Children (TAFDC). See 760 CMR 67.02(5)(b).
What income is and is not counted for EA?

The EA income rules are generally based on the income rules for the Transitional Aid to Families with Dependent Children (TAFDC) program, but some things count as income for EA that do not count for TAFDC. See 760 CMR 67.02(5)(b), citing portions of 106 CMR 204.

- Income that is counted for EA includes:
  - Earned income includes:
    - wages
    - tips
    - salary
    - self-employment income minus business expenses, see 106 CMR 204.210(A), and
  - Unearned income, including:
    - Social Security
    - unemployment compensation
    - veteran’s benefits
    - income from trusts. See 106 CMR 204.210(B).

Note: Income that is counted for EA but not for TAFDC includes Supplemental Security Income (SSI), TAFDC, Emergency Aid to the Elderly, Disabled and Children (EAEDC), and all child support actually received by the household. See 760 CMR 67.02(5)(b).

- Income that is not counted for EA includes:
  - foster care payments you receive for a foster child,
Part 1 • EA Eligibility

➔ food stamps (SNAP),

➔ federal higher education (college level) grants, loans and work study,

➔ other higher education grants and scholarships that cannot be used to meet current living expenses,

➔ any loan that cannot be used to meet current living expenses,

➔ training stipends up to $130 per month,

➔ reimbursements for training expenses,

➔ Youthbuild or AmeriCorps earnings or payments to participants,

➔ earnings of a child under 14,

➔ certain restricted cash gifts from persons who are not financially responsible for anyone in the EA household, and

➔ assistance from social service or other organizations.

Historically, when DTA administered EA, it took the position that the following payments were non-countable (since DHCD relies on the DTA regulations, DHCD should now take the same position):

➔ up to $7,500 in relocation payments received by a tenant to leave a foreclosed property plus additional amounts you can verify are being used for relocation expenses, see DTA Transitions, January 2008, p. 7, available at http://www.masslegalservices.org/content/2008-dta-transitions,

and

➔ payments from a reverse mortgage (a loan that allows a homeowner to withdraw equity from property). See DTA Transitions, April 2007, pp. 4-5, available at http://www.masslegalservices.org/content/2007-dta-transitions.

This is not a complete list of non-countable income. The regulations describe over 30 types of non-countable income, so check the regulations
What is the asset limit for EA?

The asset limit for EA is $5,000. That means you generally must have less than $5,000 of “countable assets” to qualify for EA.

- Some families are not subject to (or automatically meet) the EA asset limit. These include:
  - Families in shelter who have saved the money required by their EA Rehousing Plans (see Question 16), and
  - Households in which all members receive TAFDC.

For families subject to the asset limit, some assets count and others do not.

- Assets that do count include:
  - cash on hand,
  - bank accounts you have access to,
  - as of July 1, 2019, the value of vehicles owned by the household except for the value of one non-recreational vehicle,
  - the cash surrender value of life insurance and burial insurance,
  - real estate other than a home you live in, unless it qualifies for a six-month exclusion because you are trying to sell it.

- Assets that do not count include:
  - the value of one non-recreational vehicle owned by the household,
  - household and personal belongings,
Part 1 ▪ EA Eligibility

- assets you do not have ready access to (such as assets tied up in court proceedings or real estate you cannot immediately sell),

- Earned Income Tax Credit in the month of receipt and the following month,

- Assets used to produce income, such as a vehicle used for self-employment,

- up to $7,500 in relocation payments received by a tenant to leave a foreclosed property, DTA Transitions, January 2008, p. 7,

- the assets of an SSI recipient or a recipient of state or federal foster care payments. Note: Assets of an SSI recipient do not count toward the EA asset limit, even though the income of an SSI recipient does count toward the EA income limit. See Question 4.

- Savings required during the 6-month period for families who went over income (see Question 4) are not countable for EA.

This is not a complete list of non-countable assets. Check the regulations for a complete list. See 760 CMR 67.02(6)(a), relying on 106 CMR 204.120 through 204.140. Note: Assets that cannot be sold, for instance because they are under the control of another person or tied up in legal proceedings, are “inaccessible” and should not be counted. 106 CMR 204.125.

Advocacy Tips:

✓ If you are in EA shelter and have saved the money required by your Rehousing Plan, you should not be terminated for going over the asset limit -- even for assets other than those savings. 760 CMR 67.02(6)(b). Contact an advocate if you get a termination notice for being over the asset limit.

✓ The EA regulations incorporate the TAFDC rules on what are countable assets. The TAFDC car value exclusion rule was updated and improved in 2019.106 CMR 704.120(G).
7 What are the EA transfer of asset rules?

- Under DHCD regulations, you are not eligible for EA if you transferred real or personal property within the previous year for the purpose of becoming eligible for EA. 760 CMR 67.02(8). If you did not know about EA at the time of the transfer, or there was another reason you transferred the property, this rule should not bar you from being eligible for EA.

8 Which families qualify as “homeless enough” for EA?

To be eligible for EA you must have no “feasible alternative housing,” which means you must not have “any currently available living situation including temporary housing with relatives, friends or charitable organizations.” 760 CMR 67.06(1)(b).

In addition, you must fall into one of four fairly narrow categories to be eligible:

1. Your household is:
   a. at risk of domestic abuse in the current housing situation; or
   b. experiencing homelessness because you fled domestic violence and the household has not had access to safe, permanent housing since leaving the housing situation from which you fled. 760 CMR 67.06(1)(a)1.

   **Note:** Under b., families do not have to prove current risk of domestic violence, but they must show they have no other place to stay now.
2. Your household is experiencing homelessness due to fire, flood or natural disaster, through no fault of its members. 760 CMR 67.06(1)(a)2.

3. Your household has been subject to eviction from its most recent housing due to:
   
a. foreclosure, through no fault of the members of the household;

b. condemnation, through no fault of the members of the household;

c. conduct by a guest or other household member who is not part of the household seeking emergency shelter, and the remaining household members had no control over his/her conduct;

   **Note:** This could include an eviction due to incidents of domestic violence where the abuser is not part of the household seeking shelter, as well as situations where the primary breadwinner did not pay the rent but is no longer part of the household;

d. nonpayment of rent, caused by:

   (i) a documented medical condition;

   (ii) a diagnosed disability, or

   (iii) a documented loss of income within the past 12 months directly as a result of

      i. a change in household composition, or

      ii. a loss of income source through no fault of the household. 760 CMR 67.06(1)(a)3.

   **Note:** The regulations at 760 CMR 67.06(1)(f)5 say that this category applies only if the family loses more than 10% of its income and the new, lower income means the family is paying over 50% of their income for rent and utilities.

e. a pure no-fault reason, such as the expiration of a lease without renewal or termination of a month-to-month tenancy (tenancy at-will) for no stated reason.
Note: No-fault evictions include evictions because the owner is selling the building, wants to move a family member into the apartment, or wants to make significant renovations to the unit or building.

4. Your household is in a housing situation where the [EA] household members:

   a. do not include the primary lease holder,

   Note: This includes families who are “doubled up” with others and not on the lease or individuals who are on the lease but who are not either the head of household or the intimate partner of the head of household.

   or

   b. the child(ren) of the household are in a housing situation not meant for human habitation,

   Note: Housing “not meant for human habitation” is narrowly defined in 760 CMR 67.06(1)(f)6.d.(ii) and 8. to cover only housing that: i) does not have hot and cold water for personal use, ii) does not have heat from September 16th through June 14th, iii) does not have electricity or lighting, or you do not have access to control lighting or electricity, iv) does not have operable toilet facilities, or v) has unsanitary conditions that result in the accumulation of garbage. See Question 9, d. (ii).

   and where

   c. there is a substantial health and safety risk to the family that is likely to result in significant harm if the family remains in the housing situation. 760 CMR 67.06(1)(a)4.

Note: DHCD has issued policy memos regarding the four categories: how to verify domestic violence for purposes of Category 1, Housing Stabilization Notice 2013-07B, https://www.mass.gov/files/documents/2016/07/ww/hsn201307b.pdf; how to determine whether an eviction is for “fault” for
purposes of Categories 2 and 3, Housing Stabilization Notice 2012-09A, 
https://www.mass.gov/files/documents/2016/07/wa/hsn2012-09a.pdf; and two policy memos discussing the terms used and how to verify the health and safety risk required to qualify under Category 4, Housing Stabilization Notices 2016-03, 
https://www.mass.gov/files/documents/2016/10/vk/hsn2016-03.pdf and Notice 2012-10, 

**Advocacy Tip:**

√ Former homeowners who were evicted following a foreclosure for failure to make mortgage payments generally will not be considered eligible for EA on the basis of a “no fault” eviction. However, if the family can prove that its failure to make mortgage payments was the result of one of the excused reasons for nonpayment of rent listed above (a documented medical condition, disability, or loss of more than 10% of income resulting in a payment of 50% of the family’s income toward the mortgage and utilities), then the family will be eligible for EA on the basis of an “excused fault eviction.” See Housing Stabilization Notice 2012-09A, page 6, available at https://www.mass.gov/files/documents/2016/07/wa/hsn2012-09a.pdf

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9

**What kind of health and safety risk is serious enough to be eligible under category 4?**

Under the regulations, 760 CMR 67.06(f)6, children who are sleeping in a doubled-up housing situation are at a significant enough health and safety risk to qualify under 760 CMR 67.06(1)(a)4.c only if the family is subject to:

a. Exposure to felony or misdemeanor crimes by a member of the primary tenant’s household that cannot be addressed by law enforcement or alternative dispute resolution, or repeated exposure
to such conduct by a regular guest of the primary tenant, that is likely to result in significant harm to the EA household;

b. Exposure to mental health issues by a member of the primary tenant’s household that are likely to result in significant harm to the EA household and cannot be addressed by a referral to mental health treatment before such harm occurs;

c. Exposure to substance abuse by a member of the primary tenant’s household that is likely to result in significant harm to the EA household and cannot be addressed by a referral to substance abuse treatment before such harm occurs; or

d. (i) Condemnation of the unit due to presence of physical conditions through no fault of the EA household; or

(ii) The housing situation is not meant for human habitation, which means it has physical conditions that the landlord cannot or will not remedy before significant harm occurs to the family members; those conditions are:

   i. Lack of a supply of hot and cold water or inability to access water for personal use;

   ii. Lack of heat from September 16th through June 14th;

   iii. Lack of, or inability to control, electricity or lighting for personal use, or inability to dim lights for nighttime sleeping;

   iv. Unsanitary conditions that result in the accumulation of garbage that may draw rodents, cause accidents, or otherwise create or spread disease; or

(iii). The housing situation is only an irregular overnight sleeping situation, and the irregularity of the family’s sleeping situation is persistent.

   Note: An “irregular housing situation” based on frequent moves is sometimes referred to as “chronic couch surfing.” An irregular overnight sleeping situation also includes staying in a non-EA funded, time-limited shelter. These
families should be eligible for EA at the end of their time-limited stay.

*See generally* 760 CMR 67.06(1)(a) – (f) and policy memos discussed at the end of *Question 8*.

The presence of a significant health and safety risk must be verified by the Department of Children and Families (DCF) or other agency. 760 CMR 67.06(1)(e)3 and 4. However, if the family appears eligible based on their own statements, the family should be placed in shelter pending the health and safety assessment and collection of other verifications. *See Questions 12 and 13*.

**Note:** A DHCD policy memo from October 2016 states that if child(ren) stayed the previous night with the primary tenant and the family provides written proof that the children cannot stay another night with the primary tenant, or other “persuasive evidence” that they have no feasible alternative housing, DHCD should request an urgent health and safety assessment and provide a non-EA placement until the health and safety assessment is complete. *See Housing Stabilization Notice 2016-03 at* [http://www.mass.gov/hed/docs/dhcd/hs/hsn/See hsn2016-03.pdf](http://www.mass.gov/hed/docs/dhcd/hs/hsn/See hsn2016-03.pdf).

**Advocacy Tips:**

✓ Many families are not eligible for EA under categories 1 – 3 of 760 CMR 67.06(1)(a) (current or former domestic abuse, fire, flood or natural disaster, or narrow categories of qualifying evictions) and therefore must show that the housing situation in which they are doubled up with others exposes them to crimes, violent physical conduct, or mental health or substance abuse; that the place they are staying qualifies as a “housing situation not meant for human habitation;” or that they have been engaged in “irregular housing” or chronic couch surfing.

✓ The Legislature included language in the FY20 budget that directs DHCD to provide shelter to otherwise eligible families who have not yet stayed in places not meant for human habitation. As of the time of this printing DHCD had not issued guidance about how field offices should follow this requirement, but if a family is otherwise eligible
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and has nowhere to go they should be placed in shelter pending a DCF health and safety assessment. G.L. c. 23B, § 30(B), as amended by St. 2020, c. 41, § 2 at 7004-0101.

✓ To qualify for “irregular housing” a family must provide verification that it has recently moved from place to place in an irregular pattern, not staying in any one place for more than a week or two. See Housing Stabilization Notice 2016-03 at http://www.mass.gov/hed/docs/dhcd/hs/hsn/ See hsn2016-03.pdf.

✓ If you were denied for not meeting one of the four categories of EA eligibility, you may become eligible once your family has had “irregular housing” (engaged in chronic couch surfing), or once your family will have to stay (or has stayed) in a place not meant for human habitation because you have no place to go that night. Under the budget language for FY 2020, DHCD should not deny you if staying in a place not meant for human habitation would make you eligible AND you have nowhere to go that night. You may reapply for EA at any time.

✓ Families who are doubled-up with a host family should be cautious about encouraging the host’s landlord to issue a Notice to Quit because it will not necessarily lead to EA eligibility and may put the host family at risk of eviction. If possible, families who are couch-surfing should provide a letter from their host stating that the family can no longer stay with them. A letter from the landlord is not necessary.

✓ Waivers. EA regulations allow the DHCD Undersecretary to approve a waiver of the rules based on “good cause.” 760 CMR 67.10. Families at risk of staying in a place not meant for human habitation can ask for a waiver to be placed earlier by emailing DHCD’s Undersecretary, Janelle Chan (janelle.chan@state.ma.us), Associate Director Ita Mullarkey (ita.mullarkey@state.ma.us), and Legal Counsel Adrian Walleigh (adrian.walleigh@state.ma.us).

✓ Many families report that when they tell DHCD that they are sleeping in a place not meant for human habitation, such as a car, DHCD threatens to report them to DCF by filing a “51A” petition against them for “abuse and neglect.” DCF cannot lawfully take your children
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away from you just because you are experiencing homelessness. 110 CMR 1.00. If you are threatened in this way, contact an advocate.

√ Tell your family and friends that someone from DHCD or DCF may call or visit them to find out if you can stay with them. DHCD may find you ineligible for EA or HomeBASE if your family or friends say you can stay with them.

√ DHCD may deny your application if you refuse to let DCF contact the family or friend you have been staying with. If you agree to the visit but the other family refuses to talk to DCF, you should not be denied EA. See DCF and DHCD Health and Safety Initiative Administrative Plan (2012), https://www.mass.gov/files/documents/2016/07/oe/healthandsafetyassessmentinitiativeadministrativeplan.pdf.

10 Can you be denied emergency shelter even if you are “homeless enough” and are financially eligible for EA?

Even if your family is experiencing homelessness that is covered by one of the four categories of affirmative eligibility (see Question 8) and you meet the EA income and asset rules, DHCD may still deny your application for a disqualifying reason.

You may be denied for a disqualifying reason if:

■ your family was in EA shelter (or was approved for an EA shelter placement that you did not go to) within the past 12 months (this is known as the “12-month rule”).

Note: The 12-month rule should not apply to you if the last time you were in shelter, you:

➔ left shelter for temporary housing that was approved by DHCD on a Temporary Emergency Shelter Interruption (TESI) form,
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- left shelter for housing that was supposed to be safe and permanent but turned out not to be,

- received re-housing assistance and cooperated with your re-housing plan, or

- were temporarily placed in shelter pending receipt of verifications (see Question 12) but were then found ineligible.

- your family was terminated from the HomeBASE program for “cause” within the past 12 months, or DHCD finds that you did not make a good faith effort to comply with your HomeBASE housing stabilization plan in ways that could have caused you to be terminated for cause (see 760 CMR 65.03(4)(a) and Part 6),

- your family made itself homeless to become eligible for EA or to get a housing subsidy,

- the reason you are experiencing homelessness now is that you abandoned public or subsidized housing in the past year without good cause (good cause includes leaving housing for a job, medical care, or other housing, or fleeing the housing because of a direct threat to a member of your household),

- the reason you are experiencing homelessness now is that you were evicted from (or entered into an agreement for judgment to leave) public or subsidized housing in the past three years for not paying rent or for fraudulent behavior, unless the person who caused the eviction is not part of the household seeking EA,

- the reason you are experiencing homelessness now is that you were evicted from (or entered into an agreement for judgment to leave) private, public or subsidized housing for criminal conduct or destruction of property, unless the person who caused the eviction is not part of the household seeking shelter, or unless the criminal conduct was by a domestic abuser who is no longer part of the household,

- the reason you are experiencing homelessness now is that you did not cooperate with EA housing search or other housing assistance activities. If you had HomeBASE and were terminated for violating rules listed in 760 CMR 65.05(1)(a)-(r), DHCD will bar you from
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receiving more help for 12 months from the date your HomeBASE assistance was terminated,

- you (or an adult seeking shelter with you) quit a job, reduced work hours, or refused to accept increased work hours within 90 days before your application, unless you had “good cause” (good cause includes that you had to attend to a family crisis, emergency or other compelling circumstance, or did not have state-licensed child care), or

- you are a teen parent who was asked to leave 3 or more teen living programs because of rules violations or for any behavior-related reasons, or you refused a teen living placement.

760 CMR 67.06(2) and 760 CMR 65.03(4)(a)2

Note: Consult an advocate if you are denied shelter for any reason and have no safe place to stay.

Advocacy Tips:

✓ You should not be denied EA based on losing housing for a disqualifying reason if, since losing that housing, you had “intervening housing” that you lost for a reason that does not make you ineligible. In other words, you may be eligible for shelter if your current homelessness was not caused by a disqualifying reason. In general, “intervening housing” means that you paid some rent for at least two months in another housing situation and your presence did not violate the lease. See Housing Stabilization Notice 2012-05, http://www.mass.gov/hed/docs/dhcd/hs/hsn/hsn201205.pdf.

✓ DHCD should not deny you EA benefits based on the 12-month rule if you left shelter for permanent housing that you later discovered was not safe and affordable when you moved in. See 760 CMR 67.06(1)(d)1.b.

✓ DHCD should not deny you EA benefits based on the 12-month rule if you left shelter for HomeBASE and you have been out of shelter for at least three months. However, you must establish EA eligibility and be in good standing with the HomeBASE program. See Housing Stabilization Notices 2013-03 and 2013-03A.
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√ The Americans with Disabilities Act (ADA) may require DHCD to disregard reasons for denial that are related to disability (for example, you were evicted for destruction of property that happened because of disability-related conduct). See Question 18 and ask an advocate for more information about the ADA.

√ If you want to leave shelter for temporary housing (for example, to stay with family or friends) and you may want to return to shelter within 12 months, first get DHCD to sign a Temporary Emergency Shelter Interruption (TESI) form that approves your leaving. DHCD takes the position that a TESI can only be granted in particular circumstances and that they can only be granted for 30 days, with one 30 day extension, for a total of 60 days. If you do not return by the expiration date of your TESI, DHCD may still find you are barred by the 12 month rule. See HSN 2016-02. Consult an advocate if you cannot get DHCD’s approval or if you are later denied shelter because you left for temporary housing.

11 Can you get EA if you are not a United States citizen or not a Massachusetts resident?

Immigration Status

EA is available to many immigrants with legal status including refugees, lawful permanent residents and persons residing in the U.S. under color of law. For a full definition of eligible non-citizens, see 106 CMR 203.675.

If any member of your household has one of these statuses or is a U.S. citizen, your entire household meets this requirement. 760 CMR 67.02(7). For example, if a mother and one child are undocumented but the youngest child is a legal permanent resident, the entire household has eligible immigration status for EA shelter.

For EA shelter purposes, a household consists of at least one child, parents, step-parent or caretaker relatives, legal guardians, and siblings (including half- and step- siblings) of the child. For example, a family
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consisting of a child, her mother, stepfather, and stepsister are seeking EA, but only the stepsister is a U.S. citizen or has eligible status, the entire household has eligible immigration status for EA.

State Residency

In July 2012, DHCD began verifying that all members of a family seeking shelter are residents of the Commonwealth. 760 CMR 67.02(1)(c).

Any third-party verification that shows you are in the Commonwealth with an intention to reside should be good enough to prove Massachusetts residency.

The preferred forms of verification for adults are a Massachusetts ID or driver’s license or a current utility bill, but a good alternative is proof that any of the children in the family are registered for school in Massachusetts or proof of voter registration in Massachusetts. A letter from a child’s primary care doctor listing a Massachusetts address is also acceptable, as is mail from a state or federal agency that is addressed to you at a Massachusetts address.

Registration in school can be verified by a transcript or in a letter on the school’s letterhead, which should be able to be obtained quickly.

If you are denied for lack of proof of Massachusetts residency and you intend to remain in Massachusetts and need emergency shelter, contact an advocate.

For a complete list of documents DHCD says it will accept as proof of eligible immigration status and Massachusetts residency (and identity) see pages 4-6 of Housing Stabilization Notice 2012-08, http://www.mass.gov/hed/docs/dhcd/hs/hsn201208.pdf.

What if you do not have proof of your eligibility when you apply for EA?

When you go to a DTA/DHCD office to apply for EA, you should bring as many documents as you have that may help show you are eligible for EA.
But if you need shelter right away, DHCD should not deny you shelter just because you do not have all the proof (verification) at the time you apply.

If you appear to be eligible based on your own statements and other information available to DHCD (such as information in the DTA and DHCD computer systems), DHCD must place you in shelter and give you 30 days to get necessary verifications. This is known either as “presumptive eligibility,” “presumptive placement” or “placement pending verifications.” 760 CMR 67.06(1)(c). See also Housing Stabilization Notice 2012-08, http://www.mass.gov/hed/docs/dhcd/hs/hsn201208.pdf. If you need help getting verifications, your DHCD worker or shelter provider should help you get them. 760 CMR 67.04(c).

**Advocacy Tip:**

DHCD says that the presumptive eligibility rules do not apply to documents that prove the identity, relationship, or Massachusetts residency, and that such documents must be provided before an eligibility determination and placement will be made. See Housing Stabilization Notice 2012-08, http://www.mass.gov/hed/docs/dhcd/hs/hsn201208.pdf. This is inconsistent with the statutory requirement of placement pending verifications. You should always try to provide as many verifications as you can at the time of application, but if you do not have needed verifications readily available and have no place safe to stay and DHCD refuses to place you due to lack of any verification, contact an advocate.
Part 2
EA Placements and Terminations

13 How long does it take to be placed in EA shelter?

If your family has no place to stay and you appear to meet the other EA eligibility rules, you should be placed immediately. Recent policy changes mean that families should be placed “but for not having spent 1 night” in a place not meant for human habitation. However, it is not yet clear exactly how this policy change will be implemented.

In addition, DHCD may refuse to take an application, or may delay taking or finalizing an EA application and making a decision. So it is important to go to DHCD and begin the process of applying in advance of when you are actually eligible, so that you can be placed as soon as possible once your family has no safe place to stay.

Advocacy Tips:

✓ DHCD should not delay placing you in shelter if you qualify for EA. Contact an advocate if DHCD tries to postpone placing you and you have no safe place to stay.

✓ DHCD has an agreement with the Department of Children and Families (DCF) to do health and safety assessments of housing arrangements that families claim are not safe or no longer available. The assessments should not delay placements in EA shelter. If the assessment cannot be done immediately or if you can no longer stay in the housing that is to be assessed or it is not safe and you are otherwise eligible for EA, you should be placed presumptively until
the assessment can be completed (see **Question 12**). Contact an advocate if you feel discouraged from applying for shelter because of an assessment or if you have nowhere to stay and DHCD is delaying your placement pending a health and safety assessment.

14 Where can you be placed if you qualify for EA shelter?

If you qualify for EA shelter, DHCD can place you in:

- a shelter with other families (congregate shelter),
- an apartment (scattered site shelter),
- an apartment with another family (co-housing scattered site shelter),
- a substance abuse shelter if you or another adult in the family have a substance abuse problem,
- a teen living program if you are a teen parent or a pregnant teen under age 20 and space is available, or
- another DHCD-approved temporary shelter, such as a motel. If you are placed in a motel, DHCD can transfer you to a family shelter as soon as space is available. 760 CMR 67.06(3).

In certain circumstances, DHCD may choose to place an adult child (21 or older) or a second parent in a separate shelter, including a shelter for single adults. 760 CMR 67.07(3)(b)2.

If you are placed in EA shelter, DHCD must place you in a shelter within 20 miles of your home community if there are any openings in the area. However, there often are no openings within 20 miles and you could be placed very far away. If you are placed more than 20 miles from your home community, DHCD is required to transfer you to a shelter placement within 20 miles of your home community as soon as there is an opening, unless you do not want to move back. 760 CMR 67.06(3)(c) and (e).
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DHCD can transfer you from one shelter to another shelter if it thinks it would be “efficient” to transfer you. 760 CMR 67.06(4)(c).

**Advocacy Tips:**

- ✓ Even if you think you have a good reason for refusing a shelter placement that is offered to you (either as a first placement or as a transfer), you should accept the placement if possible and then appeal the placement; otherwise you may be terminated and barred from receiving further help. See Questions 10 and 16.

- ✓ DHCD is supposed to make every effort to ensure that children placed in EA shelter can continue going to school in their home communities. 760 CMR 67.06(3)(d). If you are in EA shelter and want to be placed where your children can continue going to school in their home community, make a written request to your DHCD worker. You may also contact the school’s McKinney-Vento Homeless Education Liaison, or contact the Homeless Education State Coordinator Sarah Slautterback at sslautterback@doe.mass.edu.

- ✓ DHCD must consider disability-related reasons why you need to be placed near your home community, or why you need a particular type of shelter or housing. For example, if you or a family member uses a wheelchair, you should be placed in a wheelchair-accessible unit. If a family member has mental health problems and needs privacy, you should be placed somewhere that provides more privacy. Tell your DHCD worker that you need a “reasonable accommodation.” See Questions 18 and 19 for more information about the Americans with Disabilities Act (ADA) or contact an advocate.

- ✓ DHCD should place you in an area that does not cause you to lose your job. Tell DHCD if you think an offered placement would interfere with your keeping a job. If possible, make a written request explaining the reasons to DHCD. Shelter placements are made by DHCD Central Staff; you can contact Contracting and Performance Manager Barbara Duffy at barbara.j.duffy@state.ma.us.
15 What if you are denied EA shelter but have no safe place to sleep?

If you are denied EA shelter and have no place to sleep you will be given a list of non-EA shelters, but those have very few available beds. If you live in the City Boston you may call the Mayor’s hotline (dial 3-1-1, available 24 hours a day, or 617-635-4500). You may also want to call your State Representative and/or State Senator for help. You can find their names and numbers at https://malegislature.gov/People/Search. Or you can contact a local legal services advocate.

16 What are Re-housing and Stabilization Plans?

A Re-housing Plan (formerly called a Self-Sufficiency Plan) is a plan that the adults in your family must follow while you are in EA shelter. The plan is made by the DHCD worker, the shelter provider and the adults in the family. A child age 18 to 21 may be part of the plan. Failure to cooperate in creating or following the plan can lead to a finding of noncompliance, and three findings of noncompliance can lead to termination of shelter benefits. See Question 17.

A Re-housing Plan may require your family, among other things, to:

- search for safe, permanent housing;
- attend all scheduled meetings with a housing search worker;
- set goals to keep permanent housing;
- provide proof of applications for public, subsidized and private housing and provide documentation needed to get public or subsidized housing;
save 30% of your household’s net income (after taxes and other withholdings). This requirement should not be applied to families in hotels and motels. It should also be lifted or reduced if a change would lead to more rapid re-housing, if the income is necessary to access transportation to medical appointments, if it is not reasonable for an individual family, or if the family needs the money to reduce debts, such as past rent or utilities, in order to get permanent housing; and

take part in work, education, training, community service, or substance abuse activities for 30 hours per week. This requirement must be reduced or lifted to accommodate a disability, lack of transportation or child care, to address medical, mental health and/or domestic violence issues, lack of a site identified by the department to do the activity, or the need to care for a child under the age of 3 months old. 760 CMR 67.06(4)(b).

A Stabilization Plan is a plan that the adults in your household must follow while you are in HomeBASE-supported housing. The plan is created by your HomeBASE provider with input from the family. Refusal to cooperate in developing a Stabilization Plan and failure to comply with a Stabilization Plan can lead to termination of your HomeBASE assistance and bar your family from receiving additional assistance for 12 months.

A Stabilization Plan may require you, among other things, to:

do the same things as in a Re-housing Plan discussed above, except you will not have to save 30% of your income;

pay your share of rent and utilities and comply with your lease;

repay arrearages and damages owed to any housing authority or HomeBASE provider;

report any changes in income or household members within 10 days;

not engage in criminal conduct or let your guests do so;

not possess a firearm in or around HomeBASE housing;

not abandon HomeBASE housing or let unauthorized persons stay with you;

not reject an offer of safe, permanent housing without good cause;
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- not miss more than 2 scheduled meetings or phone calls with your stabilization worker;
- not leave any child under the age of 12 unattended in the HomeBASE unit;
- comply with all service plans from other agencies; and
- take steps to address “financial responsibility; job training, work search and employment; educational attainment; and well-being of children in the family.” 760 CMR 65.03(6) and 65.05.

Advocacy Tips:

✓ If you are asked to sign a Re-housing Plan or a Stabilization Plan that you do not understand or is not reasonable for you or your family, ask DHCD or the shelter or your HomeBASE provider to explain it or change it. If you cannot fully understand the Plan in English, tell DHCD or the shelter or your HomeBASE provider that you need an interpreter. If you still have questions or concerns, consult an advocate.

✓ If you have signed a Plan that you no longer think is workable or reasonable, ask your worker for a reassessment of your plan and make a record of that request. If your worker refuses to change the Plan, consult an advocate.

✓ If you receive a notice saying you failed to comply with your Re-housing Plan and you disagree or think you had good reasons for not fulfilling the Plan, file an appeal and contact an advocate for help. See Question 20. It is important to appeal a finding that you did not follow your Re-housing Plan because three such findings can cause you to be terminated from shelter; see Question 17.
When can your emergency shelter benefits be terminated?

DHCD can terminate your family’s EA shelter benefits if:

- a family member engages in criminal activity that threatens the health, safety and security of themselves, other family members, other shelter residents, or shelter staff;

- your family refuses a shelter placement or transfer or fails to appear at a designated placement without good cause (good cause for this purpose includes lack of transportation, lack of state-licensed child care, and a family crisis, emergency or other compelling situation that requires a family member’s attention);

- your family abandons shelter (“abandonment” means you were absent without permission from shelter for at least 2 nights in a row or you had “repeated absences” without permission from authorized shelter staff or DHCD and without good cause);

- your family now has feasible alternative housing;

- your family’s gross monthly income goes over the EA income limit for 90 consecutive days (although you can remain in shelter for six months to look for housing, unless you are terminated for another reason). See Question 4;

- a family member quits a job, refuses additional work, or reduces earnings from employment, unless you have good cause (good cause for this purpose includes lack of child care, a family crisis or emergency or other extraordinary circumstances); or

- your family rejects an offer of safe, permanent housing without good cause (good cause for this purpose includes, but is not limited to, that the housing would require the parent to leave a job that is part of his or her Re-housing Plan; the housing would interfere with access to critical medical needs of household members, including access to specialty medical providers; the housing would interfere with the...
special education needs of a child; or the housing is in an area in proximity to a domestic abuser, or in an area the household was forced to leave because of safety concerns directed at any member of the household).

DHCD can also terminate your family’s shelter benefits if a family has three noncompliances that were either not appealed or that were upheld after appeal. Any of the following could lead to issuance of a noncompliance:

- a family member poses a threat to the health, safety or security of herself, other family members in shelter, other shelter residents, or shelter staff;

- a family member misses a family shelter interview without good cause (good cause for this purpose may be limited to a death in your immediate family, a personal injury or illness, or another sudden and serious emergency as determined by DHCD);

- a family member does not cooperate in developing a Re-housing Plan, which may impose obligations such as work, housing search, debt-reduction, savings, or other requirements intended to improve your ability to get and keep permanent housing;

- a family member does not comply with the Re-housing Plan without good reason;

- a family member or a guest violates the Uniform Shelter Program Rules one time.

760 CMR 67.06(5) and (6).

**Advocacy Tips:**

✓ The Uniform Shelter Program Rules were revised on January 2, 2015 to provide more “good cause” exceptions to certain rules, to excuse some minor \( (de\ minimis) \) violations of some rules, to require 24-hours’ notice of non-emergency room inspections, to allow families in motels to get permission for another resident to babysit their children, and to create new forms to allow requests for babysitting and
overnights away from the shelter. See Uniform Shelter Rules available at [http://www.mass.gov/hed/docs/dhcd/hs/ea/s-ea-forms-ea-uniform-shelter-program-rules-january-2015-english.pdf](http://www.mass.gov/hed/docs/dhcd/hs/ea/s-ea-forms-ea-uniform-shelter-program-rules-january-2015-english.pdf). The new Rules are available in several languages at [https://www.mass.gov/service-details/emergency-housing-assistance-resource-information](https://www.mass.gov/service-details/emergency-housing-assistance-resource-information). You may be entitled to have a noncompliance or termination notice rescinded if you could not understand the rules because you did not receive them in your preferred language. The Rules changes were the result of a lawsuit brought by MLRI called Hayes v. DHCD. Be sure you have a copy of the Rules and understand them since three rules violations can lead to termination.

- A noncompliance for failing to create or follow a rehousing plan or for violating a shelter rule without good cause will be deemed rescinded if there are no further violations within the following six months. 760 CMR 67.06(5)(e).


- For absences of more than 4 nights in a month, ask your DHCD worker to give you written permission to be absent from shelter on a Temporary Emergency Shelter Interruption (TESI) form, and get the written approval before you leave the shelter. A TESI allows families to leave shelter and then return to the shelter system within 30 days, without having to re-prove their eligibility or be blocked by the 12-month rule. TESIs last a maximum of 30 days, but families may ask for one extension for a total of 60 days. Families who become categorically ineligible because DCF has temporarily removed all children from the household are eligible for a TESI. See Housing Stabilization Notice 2016-02, available at [http://www.mass.gov/hed/docs/dhcd/hs/hsn/hsn2016-02.pdf](http://www.mass.gov/hed/docs/dhcd/hs/hsn/hsn2016-02.pdf).

- Families who must take a TESI because of DCF removal, but for whom reunification takes longer than 60 days, can ask for a waiver from the 12-month bar when DCF is ready to reunify. Waiver requests should be sent to Associate Director Ita Mullarkey, ita.mullarkey@state.ma.us and Legal Counsel, Adrian Walleigh,
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adrian.walleigh@state.ma.us. Families who are ready to reunify but for having no shelter should follow the process set out in the Memorandum of Understanding (MOU) between DCF and DHCD, available at https://www.mass.gov/files/documents/2019/02/27/DCFMOU.pdf.

- Decisions on shelter noncompliances and terminations based on alleged rules violations are made by the DHCD Central Office in Boston. Before the shelter asks DHCD to issue the notice it is supposed to give you 24 hours to write up your side of the story for DHCD to consider. As a result of the Hayes lawsuit, families in motels also now have a right to respond before a noncompliance is issued. See Housing Stabilization Notice 2015-02, available at http://www.mass.gov/hed/docs/dhcd/hs/hsn/hsn2015-02.pdf.

- Consult an advocate and/or file an appeal right away if your shelter benefits are terminated or you get a noncompliance notice for any reason you think may be wrong. See Question 21 on appeals.

- The Americans with Disabilities Act (ADA) may make it unlawful for DHCD to terminate your shelter or cite you for noncompliance if the reason for the termination or noncompliance is related to a disability (for example, you violated a rule because of your disability or you left a placement because the shelter did not accommodate your disability). See Question 18 or ask an advocate for more information about the ADA.

- The DHCD regulation saying that an individual is not eligible for shelter if an outstanding warrant is not resolved in 30 days may violate a statute that says the warrant rule applies only to “non-shelter” EA benefits. G.L. c. 23B, § 30(C), as amended by St. 2009, c. 27, § 15. If you receive a termination notice from DHCD for not resolving a warrant in 30 days, appeal the termination and consult an advocate. If the termination is appealed within 10 days, the family can stay in shelter during the appeal process.
Part 3
Disability Accommodations

18 What if a disability makes it hard for you to meet DHCD rules or use DHCD services?

The federal Americans with Disabilities Act (ADA) requires DHCD to provide equal access to programs and services to qualified people with disabilities. 42 U.S.C. § 12132.

Under the ADA you are a person with a disability if you have a physical or mental disability that substantially impairs a major life activity, such as learning, understanding, walking, working, breathing, or caring for yourself. You do not have to be receiving any disability benefits to be qualified as disabled under the ADA. A temporary health problem like a broken leg may not be a disability under the ADA.

If a disability makes it hard for you to meet DHCD rules or use DHCD services, you can ask DHCD and/or your shelter to grant exceptions to the rules or modify the services. These are called “reasonable modifications” or “reasonable accommodations” under the ADA.

Example 1: Because of your disability, you need extra time or help getting information to DHCD. DHCD should give you the extra time or help.

Example 2: You have trouble reading because of a learning disability. DHCD and its providers should regularly explain the rules and notices to you, and, if they did not explain a notice on a timely basis, give you more time to take action in response to it.

Example 3: You use a wheelchair. DHCD should place you in a shelter where you can use your wheelchair and the shelter should not make you do activities that you cannot do because of your disability.
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Example 4: Your child has an anxiety disorder that makes it hard for him to be around other people. DHCD should place you in a shelter where he does not have to be with many other people, such as a motel or a scattered site.

Example 5: You have a disability that prevents you from getting or keeping a job and as a result, you have no money to save after paying for medicine, clothes and other basic needs. DHCD should not terminate your shelter benefits if you cannot save 30% of your net income.

If you need special help or an exception because of a disability, you should tell your DHCD worker or the worker’s supervisors. The worker should then fill out a form called a “Request for an ADA Accommodation.” DHCD may ask for a copy of medical records or other evidence of the disability, or permission to contact a doctor or other professional who can verify your disability. You may also need for the doctor or other professional to document the connection between the disability and the special help or exception you are requesting.

Advocacy Tips:

✓ If you need special help or an exception to rules because of a disability, be sure you or your DHCD worker fills out a “Request for an ADA Accommodation” form, or write a letter to DHCD asking for the help you need. You can find a copy of the ADA Request form at www.masslegalservices.org/content/ada-accommodation-form-ea-dhcd. ADA requests can be sent directly to ADA Coordinators by email at dhcdeaada@state.ma.us, or by fax at 617-573-1578.

✓ Shelter providers are also required to make accommodations for your disability. Ask your shelter provider for reasonable accommodations or modifications as needed. Tell your DHCD worker if you think the provider is wrongly denying your request and consult an advocate.
What are your rights if DHCD denies your reasonable accommodation request?

The DHCD local office or DHCD ADA Coordinators should give you a written decision on your request for reasonable accommodation no later than 30 days from your request. If you do not receive any response to your request within 30 days you can email the ADA Coordinators by email at dhcdeaada@state.ma.gov. If the local office denies your request in whole or in part you can ask for reconsideration from the DHCD Central Office Accommodation Appeal Committee by filling out the back of the form and giving it to your worker. Ask your worker to give you a copy of the completed form.

If the DHCD Central Office Accommodation Appeal Committee denies your request for accommodation in whole or in part or does not make a decision within 10 days of your request for a decision, you can request a fair hearing by faxing or mailing a copy of an appeal request to the Division of Hearings. See Question 21.

Advocacy Tips:

- If you did not get an ADA denial from the Central Office Accommodation Appeal Committee, you may need to ask your DHCD worker for a copy of an appeal form.

- Try to get a legal advocate to help you with your request for reconsideration and your appeal. See Appendix C for a list of legal services offices.
Part 4
Language Access

20 What if you prefer to communicate in a language other than English?

You are entitled to language assistance that will allow you to access documents and other communications in your language at every stage of the EA program.

Federal and state civil rights laws require DHCD to make sure that EA families with limited English proficiency can access the EA program. You are limited English proficient if you do not speak, read, write or understand English very well, and prefer to communicate with DHCD in your primary language. When you apply for EA, DHCD should ask you which language you prefer to communicate in. If you are not asked, tell the worker if you prefer to communicate in a language other than English. DHCD will have cards that allow you to point to your language. You will also be given a one page sheet with language access information in other languages.

If you speak Spanish, Haitian Creole, Arabic, Amharic, Portuguese or Cape Verdean Creole, you have the right to receive important EA documents in your language, such as application materials, shelter rules, and noncompliance and termination notices. DHCD will only translate the standardized portions of the documents into your language. You may ask DHCD or shelter workers for interpretation of any untranslated portions of important documents.

All EA families have the right to free oral interpretation for important EA communications and documents no matter what language they speak. DHCD will provide free oral interpretation in its field offices, Main Office, and Hearings Division. All EA shelters should provide free oral interpretation as well, either through staff that speak your language.
Part 4 ▪ Language Access

fluently or through a telephone interpreter service. If a DHCD or shelter staff member is not available to connect you with an interpretation service, you may call DHCD at (617) 573-1528 to access free, over-the-phone interpretation. This phone number is also listed on a notice in 25 languages that will be attached to all important EA documents.

Advocacy Tips:

✓ DHCD and shelter staff cannot ask friends, family members, children, or other shelter residents to interpret, unless it is an emergency. You may ask for a professional interpreter even if you, a friend, or family member speaks some English.

✓ If your preferred language is one of the languages in which program documents are available and yet you still receive documents in English, tell a DHCD or shelter staff member that you would like to receive documents in your language, and they must provide it to you in the translated language. Otherwise you can let them know you would like the English document read to you in your preferred language.

✓ DHCD has issued a Language Access Plan with more detailed information about language services. The Plan (together with exhibits), rules for DHCD and shelter staff, complaint forms, and training materials, are available on DHCD’s website at https://www.mass.gov/service-details/emergency-housing-assistance-resource-information.

✓ DHCD has appointed a Language Access Coordinator who can answer any questions and resolve issues related to language services. You may also file a language access complaint with the Language Access Coordinator, using the form on the DHCD website.

✓ The Language Access Coordinator is:

   Brenda O’Donnell
   100 Cambridge Street Suite 300
   Boston MA 02114
   Phone: (617) 573-1381
   brenda.odonnell@state.ma.us
Part 5
EA Appeals

21 What are your EA appeal rights?

- You can appeal the following to the DHCD Hearings Division:
  - a DHCD decision that you are not eligible for EA;
  - DHCD’s failure to provide shelter or a denial of EA shelter;
  - termination of your EA benefits;
  - a noncompliance (a DHCD finding that you have not complied with the requirements for staying in shelter);
  - DHCD’s failure to make reasonable efforts to locate EA shelter that accommodates the size or composition of your family;
  - DHCD’s failure to place your family within 20 miles of your home community, or to transfer your family back within 20 miles at the earliest opportunity;
  - DHCD’s failure to make every effort to ensure that a child can continue in school in her home community; and/or
  - DHCD’s refusal to accommodate a disability (see Question 18).

760 CMR 67.09.

- In these cases you have 21 days to appeal.

**Important:** A termination notice should be appealed within 10 days. If DHCD’s Division of Hearings receives your appeal on a shelter termination notice within 10 days of the date on the termination notice, you can stay in shelter until a decision is made on your appeal. Otherwise you will have to leave shelter and wait for your appeal.
Part 5 • EA Appeals

- You can appeal by faxing or emailing both the notice and the appeal form on the back of your notice to DHCD’s Division of Hearings. The fax number is 617-573-1515. You can email the appeal to Hearings Coordinator Flavio Fiorini, flavio.fiorini@state.ma.us, or to DHCDEAhearings@state.ma.us.

- You can also mail the appeal form to DHCD, Hearings Division, 100 Cambridge Street, Boston, MA 02114, but the appeal must be received by DHCD by the deadlines discussed above, so it is safer to fax it and keep a copy of the fax report as proof. If you mail the form, keep a copy for your records and note the date you mailed it or get proof of mailing.

- If you are denied shelter and you file an appeal, the hearing is supposed to happen quickly but often takes a long time to be scheduled. This is the case even though a law mandates that denials of an EA benefit should be resolved by a decision after a hearing within 45 days of the application. See G.L. c. 23B, section 30(F). If your hearing date seems too far away and you have no place to stay, call the Hearings Division at 617-573-1528 or call the Division of Housing Stabilization (toll free 1-877-418-3308) and ask for a faster hearing, or contact an advocate. You can also reapply for EA, which may get a faster result than waiting for the appeal to be decided.

- In general, DHCD must send you notice at least 10 days before cutting off your shelter benefits. (Unless you gave them a different address in writing, DHCD will send notice to you at the shelter even if you are not there anymore.)

- Even if your shelter benefits have been continued during the appeal, DHCD may transfer you to another shelter during the appeal.

- You have a right to see your file as well as the evidence DHCD plans to use in the hearing. If there is evidence you believe may be helpful to your appeal but is held by a different agency, such as F.O.R. Families or DCF, you can ask for those documents directly from the other agency or ask DHCD to help you get them. See G.L. c. 66A.

- If possible try to get an advocate to help you with your appeal. See Appendix C for a list of local legal services offices. If you are appealing a shelter termination and you lose the appeal, DHCD may ask you to leave shelter in as few as two days.
Advocacy Tips:

✓ If your EA application has been denied you can file a new application and ask for a new decision. This may help you get into shelter faster than waiting for an appeal to be decided. This is especially true if you were denied for not meeting an eligibility category, since the denial may have forced you to experience homelessness in a way that now qualifies you for EA shelter. See Question 8.

✓ If you are being transferred from one EA shelter to another and you appeal the transfer, you should go to the new shelter while your appeal is being decided. If you win your appeal, you can transfer back. Refusing to transfer before your appeal is decided could cause your shelter benefits to be terminated.

✓ You should consider appealing a notice of noncompliance even if your shelter benefits are not being terminated. If you do not appeal a noncompliance finding when it is made, DHCD can later rely on the finding as part of the reason for terminating your shelter benefits.

✓ In appeals that are filed on time, DHCD has the burden of proving, by a “preponderance of the evidence” (more likely than not), that the allegations in the notice are true and warranted the proposed action. It is worth reminding Hearing Officers of this since DHCD often cannot meet its burden of proof.

✓ As a result of the Hayes lawsuit, a family being terminated for three noncompliances may appeal the noncompliances at the time the notice of termination is issued. However, the family will have the burden of proof on the noncompliances if they were not appealed within 21 days after they were issued. 760 CMR 67.09(2)(a)2.a.
Part 6
Finding New Housing

22 Can you get help keeping or moving to housing?

Families experiencing homelessness who are not in shelter. If your family is experiencing homeless or at “imminent risk” of becoming homeless but is not yet in EA shelter, you may be able to get help keeping your housing, or finding and moving to new housing, from:

- **The HomeBASE program.** You must be found eligible for EA shelter to get HomeBASE. You must apply for HomeBASE at one of the DHCD offices listed in Appendix A. If you are eligible for EA and you are age 21 or over, you will be referred to a HomeBASE provider listed in Appendix D. HomeBASE can provide you with up to $10,000 per year to help you move into new housing or stay with another family. This is called HomeBASE Household Assistance. HomeBASE requires families to participate in housing stabilization services for 12 months. The rights and responsibilities of HomeBASE families are individualized and outlined in the Program Participation Agreement.

- **The regional nonprofit agencies listed in Appendix E.** Contact the agency serving your local area. Among other resources, these agencies administer a program called RAFT (Residential Assistance for Families in Transition). The RAFT program helps eligible families keep housing, get new housing, or otherwise avoid homelessness. When funds are available, RAFT provides money for security deposits, first and last month’s rent, moving expenses, rent, utility, and mortgage arrears, and other housing-related expenses for homeless families and families at risk of homelessness. RAFT may also be able to provide funds to prevent an eviction (called “upstream” funds).
Families experiencing homelessness who are in shelter. If your family is in EA shelter, you may get help finding housing from:

- **Your shelter provider**, which is paid to help you find permanent housing. Shelter providers can connect you to HomeBASE Household Assistance. If you are in a motel, a HomeBASE worker should come to your motel and you can ask your F.O.R. Families worker for help. Families in shelter (including motels) may be eligible for the $10,000 in HomeBASE to help them move into housing.

  **Note:** If you have an EA termination notice pending, you may not be eligible for HomeBASE until the termination is removed. Contact your local legal services office for help.

- **The DTA Relocation Benefit Program.** DTA (separate from DHCD) will pay up to $1,000 to help get permanent housing for some families who are leaving a shelter or a teen living program. This benefit may be used for advance rent, security deposit, rent or utility arrears, moving expenses or other relocation costs. The relocation benefit is available through a DTA worker for:

  - a family receiving TAFDC or EAEDC who has been in emergency shelter for 60 days or more;

  - a family receiving TAFDC who has been in a domestic violence shelter for 60 days or more;

  - a teen parent age 18 or 19 who has been in a teen living program for 60 days or more and can live independently. 106 CMR 705.350.

You can only get the $1,000 relocation benefit once in a 12-month period. But it is not an EA benefit and will not disqualify you from receiving an EA benefit within the 12-month period. See Question 10.

**Other Relocation Resources for Families and Individuals Whether or Not in Shelter.** Individuals who receive Supplemental Security Income (SSI) may be eligible for state-funded Special Benefits of up to $150 in moving costs to move within the state if: the current living situation has been certified as substandard; a move is required due to health, safety or other conditions; or the individual is moving into subsidized housing. Special Benefits for SSI recipients may also be
available to cover the cost of replacing furniture, household equipment, food, clothing or supplies lost as a result of a fire or other natural disaster. Ask about Special Benefits at your local DTA office.

**Advocacy Tips:**

✓ Ask your shelter provider or DHCD worker to explain all of the re-housing services that may be available to you and your family and the effect they may have on your future eligibility for shelter and other benefits.

✓ If you reject an offer of housing that is affordable, even if it is affordable only for a limited time because of a short-term subsidy, DHCD may try to terminate your EA eligibility or shelter benefits. See Question 17 and consult an advocate about your options.

✓ You should ask your DTA worker for the DTA relocation benefit while you are still living in a shelter or a teen living program.

✓ DTA may give you less than $1,000 in relocation benefits unless you can show you need the full $1,000 for expenses related to getting permanent housing. Be sure to tell DTA why you need the full $1,000 before you leave shelter.

✓ DTA relocation costs in some circumstances may include furniture and appliances that you need in order to move into permanent housing. DTA Transitions, Feb. 2007, p. 3, at http://www.masslegalservices.org/content/2007-dta-transitions.
Part 7
HomeBASE Terminations and Appeals

23 What terminations from HomeBASE will bar you from shelter for 12 months?

You can be barred from getting into EA shelter for 12 full months (1 year) if you receive HomeBASE assistance and are terminated “for cause,” or you are later found by DHCD to have failed to make a “good faith effort” to comply your HomeBASE stabilization plan in ways that could have justified your being terminated from HomeBASE. 760 CMR 65.03(4)(a)2.

Terminations “for cause” include terminations:

For two or more incidents, without good cause, of:

(a) Failing to repay arrearages to a former landlord, if a repayment obligation is in the housing stabilization plan;

(b) Failing to repay damages to a former landlord, if a repayment obligation is in the housing stabilization plan;

(c) Failing to comply with your Program Participation Agreement, including compliance with all HomeBASE rules and regulations;

(d) Failing, substantially and materially, to comply with your lease, including paying your share of rent and utilities within five (5) days of due date;

(e) Failing, substantially and materially, to comply your Stabilization Plan, including to attend in-person or telephonic meetings with your
Part 7 • HomeBase Terminations and Appeals

Stabilization Worker if you had at least two days’ advance written notice of such a meeting;

Or,

For one or more incident(s), without good cause, of:

(f) Criminal conduct of a family member in the unit, in the building, or on the property on which the HomeBASE unit is located; except when the household member did not know or should not have known of the conduct and promptly took steps to exclude the person engaging in the conduct at issue;

(g) Criminal conduct of a guest of the HomeBASE family in the unit, in the building, or on the property on which the HomeBASE unit is located; except when the household member did not know or should not have known of the conduct and took steps to exclude the person engaging in the conduct at issue;

(h) Possession of lawful firearms in the unit, in the building, or on the property on which the HomeBASE unit is located; except when the household member did not know or should not have known of the conduct and took steps to exclude the person engaging in the conduct at issue;

(i) Destruction of property in the unit, in the building, or on the property on which the HomeBASE unit is located; except when the household member did not know or should not have known of the conduct and took steps to exclude the person engaging in the conduct at issue;

(j) Threats to health and safety of staff of the Department, the administering agency, the Owner or Owner’s Agent, or to persons lawfully in the building or on the property on which the unit is located;

(k) Failure of a household member to use the HomeBASE unit as a primary residence;

(l) Abandonment of the unit, which may be proved by showing your family removed its belongings, left its belongings in a disordered state indicating an intent to abandon and failed to respond within three (3) days to a written request by the administering agency to explain the
situation; did not reside in the unit for a period of five (5) consecutive days without notifying the Owner or the Owner’s agent and the administering agency; has abandoned the unit pursuant to 760 CMR 65.04(2)(i), which says that you must have good cause and give one calendar month’s advance notice before leaving a HomeBASE unit; or has chosen to leave a Contract Unit without good cause as determined by 760 CMR 67.06(2)(c) (good cause includes but is not limited to leaving a unit because of a direct threat to health or safety or accepting employment or permanent housing elsewhere). If you leave a HomeBASE unit with good cause and after proper notice, you must find another unit to rent within 30 days, although the administering agency can extend that time for up to another 60 days for good cause, 760 CMR 65.04(2)(j);

(m) Allowing a person who is not an authorized resident of the HomeBASE unit to share the unit without the permission of DHCD, the administering agency, and the Owner or the Owner’s Agent, including a person allowed to stay overnight as a guest for more nights than permitted by the lease or for longer than 12 days over a 12-month period, whichever is shorter, unless the administering agency concludes that the pattern of overnights demonstrates by clear and convincing evidence that the overnight guest is not an occupant;

(n) Not accurately reporting changes, including about material changes in income or assets or family composition, within 10 days of the change, or obtaining approval of an addition of a household member;

(o) Rejecting an offer of safe, permanent housing;

(p) Eviction for nonpayment of rent or other cause, including when a summary process action is commenced on behalf of the Owner, although a notice of termination must be rescinded if your household prevails in a summary process action or the Owner or Owner’s agent agrees to allow the family to remain in the unit so long as you comply with a repayment agreement or Agreement for Judgment allowing your family to remain;

(q) Failure to recertify, including by providing required verifications;

(r) Becoming categorically ineligible for EA, including by no longer having a child under age 21 in the household (unless the children simply aged out or custody was lost due to no fault of the family) or
going over the HomeBASE income limit. **Note:** You should not be deemed ineligible for a single violation of a self-sufficiency plan. 760 CMR 65.05(1)(a) – (r) and (2)(a) – (e).

**Advocacy Tips:**

☑ Families who have received HomeBASE Household Assistance that has run out should not be given a HomeBASE termination notice later, but HomeBASE providers sometimes do this to keep families from being able to go back into shelter. Contact an advocate if this happens to you.

☑ If you get a HomeBASE termination notice you should appeal it to the administering agency within 7 days and contact an advocate. **See Question 24** on HomeBASE appeals.

☑ Even if you do not want to stay in your HomeBASE unit or do not want to continue working with HomeBASE staff, you should appeal because you will be barred from EA shelter for one year if you are terminated.

☑ Each of the termination reasons listed above has many defenses to the termination built into it or supplied elsewhere in the HomeBASE rules, and there is often a good defense to a termination.

☑ The HomeBASE participation agreement and regulations require a family to be provided with stabilization services. If you can show that your stabilization worker was unavailable to help you, you may be able to show that you should not have been terminated.

☑ If DHCD tries to bar you from EA shelter for failure to make a good faith effort to comply with your HomeBASE stabilization plan, check to see if you had a stabilization plan, since many recipients of HomeBASE Household Assistance do not. If you did not have one tell DHCD, reapply for EA shelter, and contact an advocate.

☑ In some instances DHCD fails to translate vital documents, including the termination notice itself, into the family’s primary language. If you received a termination notice and it was not in your primary language, or if you were terminated but did not receive important documents such as the HomeBASE lease or Program Participation
Agreement in your primary language, contact an advocate. You may be able to get a new hearing or get placed back on the HomeBASE program. See Part 4.

24 How do I appeal a HomeBASE termination?

The HomeBASE regulations say that you must appeal a termination by giving a written appeal to the HomeBASE administering agency within seven (7) days. This may be illegal (see Advocacy Tips below) but it is important to try file the appeal within the 7 days. 760 CMR 65.07(1)(a).

The administering agency will then schedule an appeal in front of an employee of the agency who was not involved in the termination decision.

If you lose the hearing in front of the administering agency, you can ask DHCD to review the decision; but, under the HomeBASE regulations, you must ask for this review in writing within only 7 days. You must then make your arguments to DHCD, in writing, within the time frame that DHCD gives you. 760 CMR 65.07(6).
Advocacy Tips:

✓ Before the hearing at the administering agency you should consult an advocate and try to get legal representation. You should also ask to see the administering agency’s files to see what evidence they have about the termination and whether the termination decision is consistent with the HomeBASE regulations.

✓ The HomeBASE appeals process described above is likely illegal. The HomeBASE line item in the state budget says that HomeBASE appeals are supposed to be done through the same process that applies to EA appeals, pursuant to G.L. c. 23B, section 30(F), under which you are given 21 days to appeal and to be heard by a DHCD independent hearings officer. If you are being barred from EA shelter because of a HomeBASE termination, you and your advocate can argue that the termination was not lawful because you were denied the proper appeals process, although this argument will likely need to be made to a court.

✓ By allowing an appeal to DHCD only in writing, the HomeBASE regulations may unlawfully discriminate against persons with disabilities and persons with Limited English Proficiency who may have difficulty making arguments in writing.
Appendix A: DTA Offices Where There Are DHCD Staff Providing EA Benefits and Remote Application Number

Apply for shelter by calling 866-584-0653 to speak with a Homeless Coordinator.

Apply in person at a local DTA/DHCD office. Office hours are from 8:00 am - 4:00 pm:

- Boston – 1010 Massachusetts Avenue - New Market Square
- Brockton – 60 Main Street
- Chelsea – 80 Everett Avenue, 3rd Floor
- Hyannis – 181 North Street
- Lawrence – 280 Merrimack Street
- Lowell – 131 Davidson Street**
- New Bedford – 160 West Rodney French Boulevard
- Salem – 45 Congress Street, Suite 1176
- Springfield – 310 State Street
- Worcester – 13 Sudbury Street

For more information contact the Division of Housing Stabilization at 617-573-1100, or call toll free at 877-418-3308, TTY 617-573-1140.

** As of the date of publication the Lowell office was open only on Tuesdays and Thursdays.

Available at https://www.mass.gov/how-to/find-emergency-family-shelter
Appendices

Appendix B-1: DHCD Field Staff

Alvina Brevard
Director of Field Operations
Mobile: 857-272-4484

(updated June 2019)

Boston Family Housing/1010 Mass. Ave
Benny Troncoso, Assistant Director Field Operations / Boston/South Shore
Office: 617-989-2222/Mobile: 617-312-3304

<table>
<thead>
<tr>
<th>Name</th>
<th>Phone</th>
</tr>
</thead>
<tbody>
<tr>
<td>Anderson Diaz, Supervisor</td>
<td>617-989-2229</td>
</tr>
<tr>
<td>Nicole Dandy, Supervisor</td>
<td>617-989-2204</td>
</tr>
<tr>
<td>Grace Hartfield, Homeless Coordinator</td>
<td>617-989-2215</td>
</tr>
<tr>
<td>Jaisyn Melenciano, Homeless Coordinator</td>
<td>617-989-2223</td>
</tr>
<tr>
<td>Martha Smida, Homeless Coordinator</td>
<td>617-989-2218</td>
</tr>
<tr>
<td>Jean Sillice, Homeless Coordinator</td>
<td>617-989-2221</td>
</tr>
<tr>
<td>Iliana Ramirez, Homeless Coordinator</td>
<td>617-989-2220</td>
</tr>
<tr>
<td>Juna Enayo, Homeless Coordinator</td>
<td>617-989-2224</td>
</tr>
<tr>
<td>Katherine Lopez, Homeless Coordinator</td>
<td>617-989-2211</td>
</tr>
</tbody>
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North Shore (Salem, Chelsea, Lawrence)
Ezequiel Lopes, Assistant Director Field Operations / North Shore
Office: 617-551-1833/Mobile: 857-270-1150

<table>
<thead>
<tr>
<th>Name</th>
<th>Phone</th>
</tr>
</thead>
<tbody>
<tr>
<td>Jose Gonzalez, Supervisor</td>
<td>978-725-7270/Mobile: 617-429-3180</td>
</tr>
<tr>
<td>Melody Ruiz, Homeless Coordinator</td>
<td>978-224-3567</td>
</tr>
<tr>
<td>Flavia Salcedo, Homeless Coordinator</td>
<td>617-551-1707</td>
</tr>
<tr>
<td>Sean Wilson, Homeless Coordinator</td>
<td>978-725-7171</td>
</tr>
<tr>
<td>Claudia Peralta, Homeless Coordinator</td>
<td>978-446-2418</td>
</tr>
<tr>
<td>Evelyn Rivera, Homeless Coordinator</td>
<td>978-224-3552</td>
</tr>
<tr>
<td>Maria Polanco, Homeless Coordinator</td>
<td>978-725-7137</td>
</tr>
</tbody>
</table>
South Shore (Brockton, Hyannis, New Bedford)
Benny Troncoso, Assistant Director Field Operations / Boston/South Shore
Mobile: 617-312-3304

Jordan Thomas, Supervisor 508-895-7150/Mobile: 857-248-2886
Isabel Semedo, Homeless Coordinator 508-961-2166
Deborah Shields, Homeless Coordinator 508-895-7047
Medie Medina, Homeless Coordinator 508-895-7110
Ruth Ann Blake, Homeless Coordinator (Brockton) 508-895-7032
(Hyannis ) 508-862-6691
Amber Noyes, Hearing Specialist 508-895-7046

Central and Western MA
Bonnie Caldwell, Assistant Director Field Operations / Central & Western MA
Mobile: 413-276-5562

Central MA (Worcester)
Sheila Santelli, Supervisor 508-767-3330
Kim Lauder, Homeless Coordinator 508-767-3189
Barbara White, Homeless Coordinator 508-767-3329

Western MA (Springfield)
Twjana Williams, Supervisor 413-858-1313/617-945-6396
Penelope Trigilio, Supervisor 413-858-1226/413-265-9821
Laurel Fuller, Homeless Coordinator 413-858-1332
Tracey Burton, Homeless Coordinator 413-858-1250
Juanita Diaz, Homeless Coordinator 413-858-1376
Nilda Colon, Homeless Coordinator 413-858-1258
Waldemar Moreno, Homeless Coordinator 413-858-1394
Shariece Davis, Homeless Coordinator 413-858-1302
Maryanna Cevan, Hearing Specialist 413-858-1366

Rev. 3/6/18
## Appendix B-2: DHCD/DHS Central Office Staff

<table>
<thead>
<tr>
<th>Name</th>
<th>Position</th>
<th>Phone Number</th>
<th>Email</th>
</tr>
</thead>
<tbody>
<tr>
<td>Barbosa, Alberto</td>
<td>Compliance Assistant</td>
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<td><a href="mailto:alberto.barbosa@mass.gov">alberto.barbosa@mass.gov</a></td>
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<tr>
<td>Bartlett, Erin</td>
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<td>Barros, Veronica</td>
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<td>617-573-1528</td>
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<tr>
<td>Bartosch, William</td>
<td>Director of Data &amp; Evaluation</td>
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<td>Bowen, Joanna</td>
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<tr>
<td>Calkins, Gordon</td>
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<td>617-573-1373</td>
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<tr>
<td>Davis, Emilie</td>
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Appendices

Appendix C: Legal Services Intake Lines for EA/HomeBASE
Issues Sorted by Region

**Greater Boston**
Eastern Regional Legal Intake (ERLI)/ Greater Boston Legal Services
800-342-5297 or 617-603-1700

**North Shore**
Northeast Legal Aid and Northeast Justice Center
800-336-2262 or 978-458-1465

**South Shore and Cape Cod**
South Coastal Counties Legal Services/Justice Center of Southeastern Mass.
800-244-9023 or 508-586-2110

**Metro West**
MetroWest Legal Services
800-696-1501 or 508-620-1830

**Worcester County**
Community Legal Aid – Worcester
855-252-5342 or 508-752-3718

**Western Massachusetts**
Community Legal Aid – W. Mass.
855-252-5342 or 413-781-7814
Appendix D: HomeBASE and RAFT Administering Agencies

Berkshire Housing Development Corp. (BHDC) | 1 Fenn Street, Pittsfield, MA 01201
Phone 413-499-1630 / Fax 413-455-7633

Adams | Lanesborough | Richmond
Alford | Lee | Sandisfield
Becket | Lenox | Savoy
Cheshire | Monterey | Sheffield
Clarksburg | Mount Washington | Stockbridge
Dalton | New Ashford | Tyringham
Egremont | New Marlborough | Washington
Florida | North Adams | West Stockbridge
Great Barrington | Otis | Williamstown
Hancock | Peru | Windsor
Hinsdale | Pittsfield

Central Massachusetts Housing Alliance (CMHA) | 6 Institute Road, Worcester, MA 01609
508-752-5519

City of Worcester

Community Teamwork, Inc. (CTI) | 155 Merrimack Street, Lowell, MA 01852
Phone 978-459-0551/800-698-0551 / Fax 978-453-9128

Amesbury | Haverhill | Salisbury
Andover | Lawrence | Tewksbury
Billerica | Lowell | Tyngsborough
Chelmsford | Merrimac | Westford
Dracut | Methuen | West Newbury
Dunstable | Newburyport |
Groveland | North Andover |

Franklin County Housing and Redevelopment Authority (HRA) | 241 Millers Falls Road,
Turner Falls, MA 01376
Phone 413-863-9781 / Fax 413-863-9289

Ashfield | Greenfield | Orange
Bernardston | Hawley | Rowe
Buckland | Heath | Shelburne
Charlemont | Leverett | Shutesbury
Colrain | Leyden | Sunderland
Conway | Monroe | Warwick
Deerfield | Montague | Wendell
Eving | New Salem | Whately
Gill | Northfield |
### Appendices

#### Housing Assistance Corp. (HAC) │ 460 West Main Street, Hyannis, MA 02601
**Phone** 508-771-5400 / **Fax** 508-775-7434

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#### NeighborWorks Housing Solutions │ 169 Summer Street, Kingston, MA 02364
**Phone** 781-422-4200 / **Fax** 781-585-7483

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#### Lynn Housing and Neighborhood Development (LHAND) │ 20 Wheeler Street, Lynn, MA 01902
**333-883-2342**

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Appendices

Appendix E: Regional Non-Pros Administering Other Housing Services

**Region 1**
Berkshire Housing Development Corp (BHDC) (Berkshire County)
1 Fenn Street
Pittsfield, MA 01201
413-499-1630
www.berkshirehousing.com

**Region 2**
Community Teamwork, Inc. (CTI) (Lowell/Lawrence area)
Community Teamwork, Inc.
155 Merrimack Street
Lowell, MA 01852
978-459-0551
www.comteam.org

**Region 3**
Way Finders (Hampden and Hampshire)
322 Main Street
Springfield, MA 01105
413-233-1500
1-800-332-9667
www.wayfindersma.org

**Region 4**
Housing Assistance Corp. (HAC) (Cape Cod & the Islands)
1411 Tremont Street
Boston, MA 02120
617-859-0400
www.haconcapecod.org

**Region 5**
Franklin County Housing & Redevelopment Authority (HRA) (Franklin County)
241 Millers Falls Road
Turner Falls, MA 01376
413-223-5304
www.fchra.org

*In DHCD’s Section 8 program, Way Finders covers all communities in Hampden, Hampshire and Franklin counties. The Franklin County Regional Housing Authority (FCHRA) also administers its own Section 8 program in Franklin County communities.*

**Region 6**
Metro Housing Boston (Metro Boston)
1411 Tremont Street
Boston, MA 02120
617-859-0400
www.metrohousingboston.org

**Region 7**
RCAP Solutions (Worcester Area)
191 May Street
Worcester, MA 01602
800-488-1969
www.rcapsolutions.org

**Region 8**
South Middlesex Opportunity Council, Inc. (SMOC) (Framingham Area)
7 Bishop Street
Framingham, MA 01702
508-872-4853
www.smoc.org

**Region 9**
NeighborWorks Housing Solutions (South Shore)
169 Summer Street
Kingston, MA 02364
781-422-4200
www.nhsmass.org

**Metro|Boston covers Section 8 programs for the towns of Weymouth, Holbrook, and Randolph; for other programs, including RAFT and HomeBASE, they are covered by NeighborWorks Housing Solutions as indicated in Appendix D.**
### Appendices

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Appendices
Appendix F: Training Materials

- Training Slides
- EA Eligibility Screening Interview
- DHCD EA Application materials (English and Spanish)
- Uniform Shelter Rules (English)
- DHCD & DCF Memorandum of Understanding on Family Reunifications
- DHCD Monthly EA Report July 2019
What is Emergency Assistance (EA)?

- EA provides emergency shelter to families with children in Massachusetts who are experiencing homelessness.

- Families eligible for EA are generally also eligible for HomeBASE household assistance, which in state fiscal year 2020 (FY20) can be up to $10,000 per family.

- The Department of Housing and Community Development (DHCD) administers EA and HomeBASE.
The Numbers

• On July 31, 2019, the total EA caseload was 3,557 families. 17 (0.5%) of those families were in hotels/motels.
  — Source: DHCD EA Monthly Report Statewide Summary, July 2019

• The HomeBASE caseload between January-March 2019 was 3,599 families. This is down from 4,105 families at the end of March 2018.
  — Source: DHCD’s Emergency Assistance, HomeBASE, and RAFT Programs, Fiscal Year 2019, Third Quarterly Report

• There were 7,394 families who finished applications for EA shelter in FY19 (July 1, 2018-June 30, 2019); 4,297 (58%) of families were placed.
  — Source: DHCD EA Monthly Report, Statewide Summary, June 2019
  https://www.mass.gov/service-details/emergency-housing-assistance-resource-information

Step 1: Household Eligibility

See the EA regulations at 760 CMR 67.02

• Children under 21 and their caretaker relatives or legal guardians are eligible.
  — Step-parents and siblings under 21 (including step-siblings or half-siblings) are included by right.
  — Other family members need special permission to be included. Those people must be able to assist the family with rehousing or a critical medical need. HSN 2010-01

• Pregnant people and their partners are eligible.
  — “Spouse” is defined in HSN 2011-02 as the person with whom the pregnant person is in an inter-dependent, long-term relationship. Couples are not required to be married.
Eligibility (cont.)

• Households must also:
  – Verify identity and pregnancy or relationship to child;
  – Be income and asset eligible;
  – Verify Massachusetts residency;
  – Have one family member with eligible immigration status;
  – Meet the eligibility rules; and
  – Not be barred by their cause of homelessness, past behavior, or previous receipt of benefits.

Verifying Identity and Relationship

760 CMR 67.02(1)(a)3

• During intake, families must provide reliable information about identity and relationship.
  – State licenses or IDs, birth certificates, passports, or immigration documents.
  – A statement written on letterhead from a school administrator, doctor, or Department of Children and Families (DCF) worker.
  – Custody can be proven with sworn statements from relatives or neighbors saying that the child lives with a particular parent.
Income and Assets

760 CMR § 67.02(5), 760 CMR § 67.02(6), HSN UW-1

• Total income for the household must be equal to or less than 115% of the federal poverty level.
  – The Federal Poverty Level is re-established every year.
  – Weekly income x 4.333 weeks/month = monthly income.
  – Almost all earned and unearned income is counted.
  – There are no deductions for items like medical expenses.

• Total asset limit is $5,000.
  – This is a change by waiver from the prior limit of $2,500.
  – The first $15,000 in fair market value of one vehicle does not count toward the asset limit.

Income and Assets (cont.)

760 CMR § 67.02(5)

EA Eligibility for applicants and recipients, effective January 11, 2019.

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Note: These guidelines usually change in January or February each year.
MA Residency
760 CMR 67.02(1)(c)

• If applicant does not have a state ID or driver’s license, Massachusetts residency can be proven with:
  – Rent receipt or lease;
  – Voter registration card;
  – Letter from DTA or other government agency sent within the last 12 months;
  – School records or a letter from the school; or
  – Utility or other bill dated in the last 60 days.

• A list of acceptable documents can be found in HSN 2012-08.

Immigration Status
760 CMR 67.02(7)

• If any member of the household is a citizen or a qualified noncitizen, the entire household has eligible immigration status.
  – Qualified noncitizens include those with green cards or permanently residing under color of law (PRUCOL).
  – Families with pending VAWA applications are eligible noncitizens.
  – For additional types of eligible noncitizens, see 106 CMR § 203.675 or the TAFDC eligibility rules in DTA’s Noncitizen Desk Guide.
Step 2: Housing Need

760 CMR 67.06(1)

• Eligible families may qualify for EA when their housing need is caused by:
  – Risk of domestic violence or already having fled domestic violence;
  – Fire, flood, or natural disaster;
  – No fault eviction or condemnation; or
  – Substantial health and safety risk.

• To qualify, eligible families must also have no “feasible alternative housing.”

Domestic Violence

760 CMR 67.06(1)(a)1

• At risk in their current housing, or
• Already fled domestic violence (DV) and have not had access to safe, permanent housing since.
  – Verify DV with medical records of injuries, third-party professional documentation (including clergy), court or 209A paperwork, police reports, or similar verifications. HSN 2013-07B.
Fire, Flood, or Natural Disaster
760 CMR 67.06(1)(a)2

• Must have occurred through no fault of the family.

• DHCD is supposed to be “lenient” with applications for families in this situation.

  HSN 2012-08 and 2012-09A.

  – Presumptive placement with a letter from the Massachusetts Emergency Management Agency or Red Cross confirming names and relationship.

No Fault Eviction
760 CMR 67.06(1)(a)3, 760 CMR 67.06(1)(3)(2), 760 CMR 67.06(1)(f)3-5

• No fault evictions and non-renewal of lease.

• Includes when families are evicted due to:
  – Foreclosure or condemnation through no fault of the household;
  – Conduct by someone over whom current household members had no control;
  – Nonpayment of rent caused by:
    • A documented medical condition or disability;
    • Loss of income source within last 12 months through no fault of the family, including change in household composition.

  – There must be a firm “date of homelessness” within 48 hours.

• Families will be asked to provide proof of eviction and/or proof of no fault income loss.
Health and Safety Risk
760 CMR 67.06(1)(a)4, 760 CMR 67.06(1)(f)6.a-d, 760 CMR 67.06(1)(f)8, Budget Line Item 7004-0101 of FY2020

• Housing situations where there is a health or safety risk include when:
  — (1) The family are not the leaseholders, and
  — (2) Children are exposed to harmful mental health issues, bad housing conditions, criminal activity, physical violence, or ongoing substance abuse.

• Households may also qualify for EA if they would be eligible “but for not having spent one night” in a place not meant for human habitation (PNMFHH).
  — PNMFHH includes cars, emergency rooms, parks, police stations, church basements, the streets, or the hallways of buildings.
  — New language in the FY20 budget no longer requires families to prove they stayed in a PNMFHH.

Health and Safety Risk
760 CMR 67.06(1)(a)4, 760 CMR 67.06(1)(f)7

• Families may also qualify for EA if they are:
  — Experiencing an irregular sleeping situation (chronic couch-surfing).
  — Being discharged from a time-limited, non-EA shelter, such as a community room placement.
    • See http://www.mahomeless.org/statewide-family-shelter-community-rooms
Health and Safety Risk Assessment

760 CMR 67.06(1)(e)4, HSN 2016-03

• All families placed due to a health and safety risk must have a risk assessment by DCF or other designated agency.
• DHCD should request an urgent Health and Safety assessment when:
  – The children stayed the prior night with a primary tenant; **and**
  – The family presents written evidence or “other persuasive evidence” that the primary tenant will not permit the children to stay that evening, and that there is no feasible housing for that night; **then**
  – DHCD should find a non-EA placement or a presumptive EA placement until the assessment can be done.

Feasible Alternative Housing (FAH)

760 CMR 67.06(1)(b)

• “A household must be homeless due to lack of feasible alternative housing. Feasible alternative housing means any currently available living situation including temporary housing with relatives, friends or charitable organizations.”
Shelter Ineligibility:

What Makes Families Ineligible for EA?

• Families are not eligible if they became homeless:
  – For the purpose of becoming EA eligible;
  – For the purpose of getting a housing subsidy;
  – Because they were evicted from their most recent permanent housing because of:
    • Nonpayment from subsidized housing within the last three years; or
    • Criminal activity or destruction of property.
  • EXCEPTION: If the person who caused the eviction is no longer part of the household, a family may still be eligible for EA shelter. For criminal activity, an applicant must have been unaware of it.
Families are also not eligible if they became homeless:
- Because they abandoned subsidized housing without good cause.
  - Good cause includes, but is not limited to:
    - Accepting employment or permanent housing elsewhere; or
    - A direct threat to the household's safety.
- Because they failed to cooperate with a non-EA shelter or other housing assistance program; or
- Because they refused a placement at a Teen Living Program (TLP) or were asked to leave three TLPs for behavior-related issues.

*Good cause criteria: 106 CMR 701.380.*

Families are also not eligible if:
- Their need was caused by refusal of employment or training, without good cause.
- A member of the household reduced their earnings within the prior 90 days, without good cause.
- A member of the household transferred property within the last 12 months for the purpose of becoming eligible for Emergency Assistance.
LIHTC Units: Subsidized Housing?

*HSN 2012-11*

- LIHTC = Low-Income Housing Tax Credit
- Family must be below an income threshold to live there, but rent amount is not based on a percentage of their income.
- Not considered “subsidized” for EA purposes if rent amount is 50% or more of family’s income.

Intervening Housing

*HSN 2012-05*

- Disqualifying reasons for homelessness refer to the most recent permanent housing.
- To establish “intervening housing”, a family must have paid rent for at least one month (better if longer).
- Staying in someone else’s subsidized housing without being added to the lease is never intervening housing.
  - BUT, landlord-approved tenancies or sub-tenancies are intervening housing.
Bars to Shelter

760 CMR 67.06(d)1-4, HSN 2013-03 and 2013-03a

• Families that appear eligible can still be barred from EA shelter based on previous receipt of benefits.

• 12-Month Rule for EA shelter
  – Ineligible if family received EA or HomeBASE.
  – A family may still receive shelter benefits under the following exceptions:
    • Could not financially maintain a HomeBASE unit for 12 months
    • Exited shelter with a Temporary Emergency Shelter Interruption (TESI) form that has not expired
    • Only benefit received was a presumptive placement
    • Left for safe, permanent housing, but later found out the housing was never safe or permanent

• 12-Month Rule for HomeBASE
  – Only if family was terminated for cause.

Applying for EA Shelter:

The Application Process and Advocacy Tips
Where to Apply

• DHCD takes EA applications at certain DTA offices between the hours of 8 a.m. and 4 p.m. (See Appendix A of EA Advocacy Guide.)

• DHCD has established a phone line families can call to apply remotely if they cannot get to an office.
  – The number is (866) 584-0653

• Since 2017, DHCD stopped taking applications at several DTA offices including Framingham, Fitchburg, and Holyoke.
  – Call your state Legislators if DHCD’s office closures have resulted in difficulty accessing shelter in your area.
  – In the Boston area, DHCD takes applications at the Newmarket DTA office, 1010 Massachusetts Avenue, Boston.

What Should Families Expect?

• Arrive early in the day to apply; the process can take a long time.
• Only bring two bags of belongings per person.
• Bring as many verifications as possible.
  – IDs of adults, children, letters verifying relationship and custody of children, income information, confirmation of reason for homelessness (DV, Red Cross letter, eviction paperwork, letters from places family has stayed)
  – If DHCD asks for more verifications, families with nowhere to go should ask for presumptive placement.
• Try to be prepared to say which category they believe makes them eligible.
• Families should not refuse placement, even if it is far away from their home community. They can be terminated and barred for 12 months.
Advocacy Tips for Accessing EA shelter

• Email the staff at the field office with the family’s signed release form; let them know why you think they are eligible and attach all supporting documents.
• If there is a disability-related placement need, try to obtain medical documents before they apply.
• If the family provides verifiable information about identity and relationship, and their story, if true, would make them eligible, then they can be presumptively placed in shelter and given 30 days to submit other necessary verifications. 760 CMR 67.06(1)(c), HSN 2012-08

More Advocacy Tips

• Placement is supposed to be within 20 miles- if such a placement is available- but prepare the family that it could and likely will be further.
  – If a medical need, job, or school affect EA placement, bring proof.
  – A family can request a transfer back to the home community, but DHCD will prioritize ADA requests and even those take time.
• DHCD can waive some barriers to shelter “for a good reason.” 760 CMR 67.10
  – Waiver request must be requested in writing to Ita Mullarkey, Associate Director of Housing Stabilization.
    • ita.mullarkey@state.ma.us
  – DHCD takes the position that income eligibility and having a child under 21 in the household are fundamental program requirements that may not be waived.
• For school attendance questions, contact the school’s McKinney-Vento Homeless Education Liaison, or
  – Sarah Slatterback, Homeless Education State Coordinator.
    • sslatterback@doe.mass.edu
Key Players at DHCD
Housing Stabilization

• Ita Mullarkey – Associate Director/Acting Assistant Undersecretary
• Alvina Brevard – Director of Field Operations
• Barbara Duffy – Assistant Director for Placement and Non-Compliance
• Erin Bartlett – ADA Coordinator
• Adrian Walleigh – Legal Counsel for EA
• Elaine Leung – Legal Counsel for EA
• For contact info, see Appendix B of EA Advocacy Guide.

Applying for EA:
Types of Placements

• Congregate shelters
• Co-shares
  — Similar to a roommate situation; shared common space with one other family.
• Scattered sites
  — Family has its own apartment unit
• Hotel or motel units on an as-needed basis
• HomeBASE diversions (short-term rental assistance)
**Shelter Expectations:**  
Rules and Responsibilities  
While in EA Shelter

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**Shelter Responsibilities**  
760 CMR 67.06(4)

- Families must cooperate in developing and participating in a rehousing plan.
- The rehousing plan shall include:
  - Actively looking for “safe, permanent housing”;
  - Attending meetings with a housing stabilization worker;
  - Applying for public and subsidized housing;
  - Saving 30% of household net monthly income (not required in hotels); and
  - Participating in self-sufficiency activities.
Shelter Responsibilities (cont.)

760 CMR 67.06(4)(b)2.h

- Families are expected to do 30 hours per week of self-sufficiency activities.
- Activities can include jobs, education and training programs, housing search, and substance abuse programs.
  - Activities can be reduced for those who have a disability, or for good cause reasons.
  - Good cause includes transportation or childcare issues, domestic violence, caring for a newborn, or addressing medical or mental health issues.

Other Responsibilities

- Families must stay at the shelter every night, unless they have permission to be out.
- Families must return to shelter by curfew.
- Most shelters require families to do chores.
- No one but approved family members can stay in the shelter placement, and no unauthorized visitors are allowed.
  - Exceptions for other children with custody agreement.
- No alcohol or controlled substances are allowed on shelter property.
Noncompliances,
Terminations, and Appeals

Termination of EA Benefits

*760 CMR 67.06(6)*

- Families can lose EA benefits if they:
  - Engaged in criminal activity that threatened the safety of other residents, guests, or staff.
  - Refused shelter placement, failed to appear at placement, or abandoned shelter without good cause.
  - Refused an offer of safe, permanent housing without good cause.
  - Have feasible alternative housing became available.
  - Lost categorical or financial eligibility (200% of federal poverty guidelines).
  - Are issued a third noncompliance.
Termination: Abandonment

760 CMR 67.06(6)(a)5 and 106 CMR 701.380

• Families can also be terminated from shelter if the whole family was absent for at least two consecutive nights.

• Abandonment can be excused by a good cause reason, including:
  – a medical emergency;
  – a death in the family or other family crisis;
  – transportation issues; and
  – emergency situation or “other compelling circumstance” that is beyond the control of the family.

Termination: Abandonment (cont.)

• Before shelters can lock families out:
  (1) The entire family must have been out of shelter for at least 48 hours from the start of curfew;
  (2) The family must not have called the hotel or shelter before curfew on the day after the absence began to explain good cause reasons.

• If the family returns but the unit is not available, the shelter or hotel must:
  (1) inform the family of the right to appeal,
  (2) advise the family to go to DHCD during business hours, and
  (3) notify DHCD of the date and time the family returned.
Temporary Emergency Shelter Interruption (TESI)

HSN 2014-02

- If a family plans to be absent for more than four nights in a month, they should request a TESI so they are not issued noncompliances.
- TESIs are available for the following reasons:
  - Death in the family;
  - Other-area employment;
  - Medical treatment for an EA family member or extended family member;
  - Legal complications;
  - Re-housing likely in 30 days;
  - EA family loses custody of children under age 21.

TESI (cont.)

- TESIs allow families to re-access shelter without proving they are EA-eligible or being barred by 12-month rule.
- Once approved, TESIs last for 30 days.
- Family can request a TESI extension for an additional 30 days.
- Families with a TESI are not guaranteed to return to the same shelter.
Uniform Shelter Program Rules - USPR
https://www.mass.gov/service-details/emergency-housing-assistance-resource-information

• The USPR changed in January 2015 as a result of litigation by MLRI and now include “Good cause” and “de minimus” defenses to violations.
• The USPR are to be given to families when they are approved for EA. Families will be asked to sign that they have read and agreed to these rules.
• Copies of USPR are to be kept in shelter management offices and at the front desk of hotels.
• NOTE: Shelters will often rely on the Summary for enforcement, but the USPR and not the Summary control.
  – The USPR are available in several languages at website above. See the Advocacy Guide for a version in English.

USPR: Access to Units

• EA units may be checked for cleanliness and health or safety hazards:
  – With at least 24 hours’ written notice, or
  – According to a regular inspection schedule.
• Immediate access by shelter staff for:
  – Emergencies (health and facility-related)
  – Inspections by code-enforcement agencies
  – When shelter staff have (1) a reasonable, articulable suspicion of criminal behavior; smoking, unauthorized cooking, or unauthorized guests; or behavior that constitutes a disturbances of quiet enjoyment or a threat to health and safety; and (2) the situation cannot by remedied by a request to talk to those inside.
• Staff are not allowed to search personal belongings.
USPR: Curfew

- Curfews must be adjusted on a case-by-case basis for work or school schedule, for other rehousing plan obligations, to accommodate disabilities, or for good cause.
- Requests for adjustments made two business days before will be deemed approved unless expressly denied.

USPR: Drug Testing

- Drug testing shall not be conducted at random.
  - Includes urine screens and blood and breathalyzer tests.
- Staff are required to form an individualized and reasonable suspicion that an EA household member is abusing controlled substances.
“House Rules”

• Shelters can establish their own rules regarding day-to-day activities.
  — Examples include cleaning rotations, cooking duties, noise, TV or laundry hours, dress codes, or parking.
• House rules must not contradict USPR, EA regulations, or other legal requirements.
• Violations of “House Rules” can lead to transfer, internal warnings, or loss of privileges, but are not “rule violations” leading to noncompliance or termination.

Noncompliance

760 CMR 67.06(5)

• Families can be issued a noncompliance by DHCD if they:
  — Engaged in (non-criminal) conduct that threatened the safety of EA residents, visitors, or staff.
  — Failed to cooperate in rehousing efforts, including failing to follow the rehousing plan or to meet with a housing stabilization worker.
  — Violated a shelter program rule.
    • Some rules violations should not be the basis of a noncompliance if the violation is de minimus or excused by good cause.
    • IMPORTANT: Read the Rules, NOT the summary.
Noncompliances (cont.)
760 CMR 67.06(5)(e), 760 CMR 67.09(2)(a)2.a.

- Noncompliances will be deemed automatically rescinded if there are no further noncompliances in the following six months.
- A new noncompliance within that time period resets the clock.
- The third noncompliance will lead to a termination notice.
- NOTE: If a family faces termination based on a third noncompliance, they can contest the prior noncompliances at the termination hearing (if they haven’t contested them before).

Request for Noncompliance and Family Response

- Families may respond to a Noncompliance or Termination Request from a shelter before it goes to DHCD.
  - Families have 3 business days to respond.
  - If you are working with a family who is responding and there is documentation to submit, attach it.
  - The Request and Response will be sent to DHCD. DHCD will then decide whether or not to issue a Noncompliance/Termination.
- THIS RESPONSE IS NOT THE APPEAL. If DHCD issues a Noncompliance or Termination, the family will also have to submit an appeal.
Appeals

760 CMR 67.09

• A Notice of Noncompliance or Termination must be appealed within 21 days.
• A Notice of Termination must be appealed within 10 days for the family to stay in shelter during the appeal process.
  – This is called “aid pending” appeal.
• Families can also appeal denials of shelter and shelter placements (outside of 20 miles).
• Send appeal to:
  – DHCDDEAHearings@state.ma.us
  – Fax #: 617-573-1515

Appeal Hearings: How to Prepare

• Families have a right to see DHCD’s evidence against them prior to the hearing.
  – See Appendix B-1 for regional hearing specialists.
• Closely read the Notice being appealed to find the regulation or rule cited.
  – DHCD must prove the allegation in the notice.
  – Remember, many of the rules and regulations contain “good cause” or de minimus exceptions.
Appeal Hearings: What to Expect

• The Hearing Officer will begin by explaining what will happen and swearing in witnesses.
• DHCD should provide interpreters for limited English speakers.
• The Department Representative presents DHCD’s case.
  – Department witnesses often were not present at an alleged incident. Their testimony is admissible but may not be reliable.
• Family can ask questions and examine evidence.
  – The Department Representative may be on the phone and submit evidence post-hearing. This may be a due process problem.

Appeal Hearings: What to Expect (cont.)

• DHCD Representatives will often rely on unreliable or inconsistent hearsay.
  – Hearsay is admissible, but multiple levels of hearsay are unreliable.
    • Example of multiple hearsay: when the Department Representative says she spoke to the shelter director, who spoke to the staff person on duty, who said...
    • You can object and/or say that it is unreliable, particularly compared to the sworn testimony of your client.
Appeal Hearings: What to Expect (cont.)

- After the Department Representative presents DHCD’s case, the family testifies and can present evidence.
- It is not uncommon for a Hearing Officer to ask questions of witnesses, the Department Representative, or the family.
- The family can ask that the record be left open if they would like to submit more evidence.
- Decisions usually take time – between 30 and 90 days.

Appeal Hearings: Advocacy Tips

- Ask the Department Representative in advance about their evidence and who will be testifying.
  - If you have trouble finding out who they are, contact the Appeals Administrator, Flavio Fiorini, at flavio.fiorini@state.ma.us.
- If there is no dispute about whether an incident happened but the behavior was disability-related, submit an ADA request.
  - E-mail Erin Bartlett, the ADA Coordinator, at erin.bartlett@state.ma.us.
  - You must include medical documentation.
Appeal Hearings: Advocacy Tips (cont.)

- **Read** the regulation, the rule, and any relevant housing stabilization notices.
  - It is not uncommon for DHCD to “overreach”, and behavior that should be a noncompliance is framed as grounds for termination.
- If families have limited English proficiency, check to make sure notices were provided in their language.
  - DHCD must prove the family knew the rule they were violating.

Language Access in EA
Language Access Settlement

- Families with limited English proficiency are entitled to language access services at:
  - DHCD Main Office
  - Field offices
  - Hearings Division
  - All shelters

- The settlement also applies to HomeBASE applicants in EA shelter.

- At intake, each family should be asked which language they prefer to communicate in.

- Families will be given a one-page sheet with language access information.

Language Access: Oral Interpretation

**Oral Interpretation**, under the agreement:

- Available for important EA communications and documents not translated into the LEP family’s language.

- DHCD will provide free oral interpretation in its offices and by phone at *(617) 573-1528*.

- Telephone interpretation service available in all shelters.

- Friends and family cannot be asked to interpret.

- Children may serve as interpreters only in emergencies.

- DHCD and shelter staff may interpret if they are fluent in the LEP family’s language.
Language Access: Written Translation

• Readers of the following languages have the right to receive important program documents in their language:
  Spanish        Haitian Creole
  Portuguese     Arabic
  Cape Verdean Creole

But only the standardized portions of documents are translated.

• Families have the right to have any untranslated portions of documents orally read to them in their primary language.

Language Access: DHCD Coordinator and Complaint Procedure

• DHCD has appointed a Language Access Coordinator and created a language access complaint procedure.

• The current Coordinator is Brenda O’Donnell, brenda.odonnell@state.ma.us or (617) 573-1381.

• Families may contact the Coordinator with language access issues or to file a formal complaint.
Language Access: More Information

- DHCD now has an EA Language Access Plan, which is available online (together with other documents).
  - On the DHCD EA website at https://www.mass.gov/service-details/emergency-housing-assistance-resource-information
  - On the Mass Legal Services website at https://www.masslegalservices.org/content/emergency-assistance-language-access-settlement-plan-and-summary
- If you work with families who have language access problems, you may also contact Judith Liben at jliben@mlri.org or Andrea Park at apark@mlri.org

HomeBASE Basics
What is HomeBASE?

Currently, HomeBASE provides up to $10,000 in a 12-month period, to be used for housing stabilization.
- First month’s rent, last month’s rent, security deposit
- Furniture
- Ongoing help with rental payments
• Comes with Housing Stabilization worker.
  - Must enter into a “Participation Agreement”
• NOT considered a housing subsidy program.

How Does HomeBASE work?

• As a “shelter diversion” when families apply for EA or as a way to exit shelter.
• If a family is moving into subsidized housing, they can use HomeBASE for furniture and other “startup” costs, but not as an ongoing subsidy.
• Most families with HomeBASE use it to rent apartments from private landlords.
• The HomeBASE agency pays their share directly to the landlord each month.
Who is Eligible for HomeBASE?

• Families who are EA eligible are also eligible for HomeBASE.
  – 760 CMR 65.03(3)(a) says that families who have completed HomeBASE are barred from receiving HomeBASE for 12 months.
  – While they have not issued official guidance or statements, DHCD has not been enforcing the 12-month bar for another year of HomeBASE.
    • To confirm this, contact HomeBASE/RAFT Contract & Compliance Coordinator, Amy Mullen: Amy.Mullen2@state.ma.us.

HomeBASE Requirements

760 CMR 65.05

• Requirements for participation:
  – Repay arrearages and damages from past housing,
  – Comply with program participation agreement, lease, and stabilization plan,
  – Families cannot abandon the unit or let unauthorized people live there,
  – Families and their guests cannot engage in criminal activity, destroy property, or threaten others,
    • Does not include DV if “reasonable steps” are taken to exclude the abuser.
HomeBASE Requirements (cont.)

760 CMR 65.03(6)

• Families must comply with a Participation Agreement and Stabilization Plan.
  – These contain similar required activities to those families in EA shelter, but the requirements for savings and 30 hours per week of self-sufficiency work do not apply.
  – Families are required to address financial responsibility, job training, employment, and educational needs.

What Happens When HomeBASE Ends?

• No automatic return to shelter.
• If the funding ends before the 12 months, no bar to reentering shelter.
  – Some families who cannot afford to pay rent are incorrectly terminated, instead of having their payments adjusted. See HSN 2013-03.
• A nonpayment eviction after HomeBASE ends does not fall under the category of a “No Fault Eviction” for EA eligibility.
  – HomeBASE is not considered income.
HomeBASE: “For Cause” Terminations

• Families can lose HomeBASE benefits if they:
  – Reject safe, permanent housing without good cause.
  – “Substantially and materially” violate the stabilization plan, lease, or participation agreement two or more times without good cause.
  – Violations may include:
    • Failure to attend a meeting without good cause, but only if there was at least two days written advance notice of the meeting.
    • Nonpayment of rent or utilities.

HomeBASE: “For Cause” Terminations (cont.)

• Families can also lose HomeBASE benefits for just one instance of:
  – Criminal conduct or destruction of property by a family member or guest,
  – Possession of lawful firearm in unit,
  – Conduct that threatens the health and safety of the landlord, staff, or neighbors,
  – Abandoning the unit, or
  – Unauthorized resident.
Categorical Ineligibility for HomeBASE

760 CMR 65.05(1)(r)

• HomeBASE families must remain categorically eligible to continue to receive benefits.
  – If income exceeds 50% of area median income for household size, that family’s benefits will be terminated at the end of six months.
  – Removal of children by DCF may cause termination.

HomeBASE: Appealing Termination

760 CMR 65.07

• A family that receives a Notice of Termination must make a written request for an appeal hearing to the administering agency within seven days after the notice has been given.
  – Any notice that is mailed is deemed received three days after mailing.
• The agency will then schedule a hearing within 15 days.
HomeBASE: Appeal Hearings Procedure
760 CMR 65.07(4)

• Hearing officers are appointed by the HomeBASE administering agency.
• Hearings are informal; relevant information can be put into evidence through testimony or written material.
• Hearings should be tape-recorded, as required by DHCD.
• A written decision is issued within 14 days.

HomeBASE: Appeal Review by DHCD
760 CMR 65.07(6)

• After a decision has been issued, the family or the agency have seven days to ask DHCD to review the appeal decision.
  – After receiving a request, DHCD will notify the other party that they have seven days to submit additional documentation, including legal memos.
  – DHCD will issue a decision in writing within 15 days; otherwise the decision of the hearing officer will be upheld.
HomeBASE: Waiver

760 CMR 65.08

• As with EA, HomeBASE has a waiver provision.
• A waiver can be requested by an administering agency or by the family.
• It must be requested in writing and cite a good reason.
• The administering agency may submit a request on behalf of the family.

Other Community Resources:
RAFT Prevention Resources
RAFT
Residential Assistance for Families in Transition

- Short-term financial assistance to low-income families and individuals who are experiencing homelessness or are at-risk.
  - RAFT is funded at $21 million for FY20, with $4.7 million set aside for upstream homelessness prevention.
- Up to $4,000 can be granted for:
  - Moving costs, including 1st month’s rent, last month’s rent, security deposit
  - Rent and utility arrears
  - Rental or utility stipends

RAFT (cont.)
Residential Assistance for Families in Transition

- Must be income eligible, with income at or below 50% of the area median income.
- Need to show housing crisis; providers look for future sustainability.
- Cannot receive more than $10,000 in RAFT and HomeBASE combined in a 12-month period.
- For FY20, DHCD is piloting upstream access to RAFT funds to address rent arreages.
  - Under this pilot, eligible households can access funds before going to housing court for an eviction.
RAFT: How Do Families Apply?

- Find your regional agency at www.masshousinginfo.org
- The regional agencies screen households for eligibility.
- To apply, families will need various documents, such as:
  - IDs or MassHealth cards, birth certificates, and social security cards
  - Proof of current income for all adults
  - Copy of the lease
  - Proof they need help and the amount of money they need
- If terminated from EA or HomeBASE, families are barred for 12 months from RAFT.

Legislative and Systemic Advocacy Opportunities
Legislative Campaigns

- The Legislature sets many of the expectations and parameters of the EA and HomeBASE programs through the state budget process.
  - EA line item: 7004-0101
  - HomeBASE line item: 7004-0108
- For FY20, we worked to maintain key line item language, increase funding, and make improvements to the programs.
  - The Legislature included language to ensure that families do not have to first stay in places not meant for human habitation before accessing EA.

Legislative Campaigns (cont.)

- This session, we are working to push for passage of House Bill 1265, filed by Representative Marjorie Decker, to officially change state statute to expand EA eligibility to otherwise eligible families that have not yet stayed in a place not meant for human habitation.
  - While similar language is in the FY20 budget, it will need to be included in subsequent state budgets to remain in effect.
- The bill was heard by the Joint Committee on Housing in July, and we are hoping it will be reported out favorably to the Joint Committee on Ways and Means.
- Read more about the bill: https://malegislature.gov/Bills/191/H1265.
Legislative Campaigns (cont.)

- We will be kicking off the FY21 budget campaigns in late fall/early winter.
- Find out more by joining the Massachusetts Coalition for the Homeless’ email list or going to our website.
  - [http://tinyurl.com/mchemail](http://tinyurl.com/mchemail)
  - [http://www.mahomeless.org/advocacy](http://www.mahomeless.org/advocacy)
- For those in the eastern part of the state, we hold monthly membership meetings on policy and practice issues, generally the final Friday of each month in Boston.
  - For more details on the Housing and Benefits Committee meetings, email Marwa Sayed at [marwa@mahomeless.org](mailto:marwa@mahomeless.org).

Questions? Stay in Touch!

- Liz Alfred: ealfred@cwjustice.org
- Andrea Park: apark@mlri.org
- Laticia Walker: lwalker-Simpson@gbls.org
- Kelly Turley: kelly@mahomeless.org

Thank you for joining us today!
Emergency Assistance (EA) Shelter Access
Eligibility Screening Interview

Interviewer: ___________________________________________ Date: ________________________

Name of person applying: ________________________________________________________________

Contact Info: Phone#: ___________________________ Alternative contact #: ___________________

General information

1. How many children do you have and what are their names & ages? __________________________________________
   ___________________________________________________________________________________
   ___________________________________________________________________________________
   ___________________________________________________________________________________

2. Are they in school? ___________________________ Which ones/where? ___________________________
   ___________________________________________________________________________________
   ___________________________________________________________________________________

3. Are there any other adults applying for shelter with you? ______
   If so who? ___________________________________________________________________________

Previous applications

1. Have you already applied for EA shelter? __________________________________________
   If so, when? _________________________________________________________________________
   What office did you go to? _________________________________________________________________________
   Do you remember which worker you met with? _________________________________________________________________________
   Were you denied? _________________________________________________________________________
   If yes, did you receive a denial notice? _________________________________________________________________________
   If no, why were you sent away? _________________________________________________________________________
   Were you given a verification checklist? _________________________________________________________________________
Current housing situation

1. Where are you staying now?

If doubled up:
   What is your friend/family member’s name?
   Where does he/she live?
   Is it a private apartment or public/subsidized housing? (Does the host pay the entire rent or get help from the government with rent?)
   How long have you been staying there? (get exact dates)
   How long can you continue to stay there?
   (If have to leave) Why do you have to leave?

2. Where were you staying before you were staying with [current host]?

If doubled up:
   What was that friend/family member’s name?
   Where does he/she live?
   Is it a private apartment or public/subsidized housing? (Does the host pay the entire rent or get help from the government with rent?)
   How long did you stay there? (get exact dates)
   Why did you leave?
   Can you go back and stay there? Why not?

(If the most recent double-up situations were for less than one week, repeat number 2 for any other places the family has doubled up since becoming homeless – relevant to “irregular housing”).

3. Have you ever had your own apartment?

   Where did you live?
   Was it a private apartment or public/subsidized housing? (Did you pay the entire rent or get help from the government with rent?)
   How long did you have the apartment? (get exact dates)
   Why did you leave?
Disqualifying factors

1. Have you been in EA shelter before? If yes, when (within past year)?

2. Have you ever lived in subsidized housing? Public housing?

    If yes, when?

    How long were you there and when did you leave?

    Were you on the lease?

    Why did you leave?

3. If left due to domestic violence, ask about documentation of the DV by a counselor, DV advocate, medical provider, etc., or restraining order or police report. Also be sure to get a detailed housing history post-DV-housing situation (to determine if the family had safe permanent housing since they fled DV).

4. Have you ever been evicted, or entered into an agreement to leave after an eviction case was started?

    If yes, when?

    Why were you evicted? (non-payment, destruction of property or criminal conduct?)

    Was the eviction from public or subsidized housing or from a private apartment?

    Why couldn’t you pay the rent? (job loss? Someone left the household? Injury or disability?)

5. If you: a) voluntarily left subsidized housing in the past year, or b) were evicted from subsidized housing in the past three years for nonpayment or fraud, OR c) became homeless because you were evicted from any housing for criminal conduct or destruction of property, have you stayed in someone else’s PRIVATE MARKET housing since then and paid something toward rent or utilities?

    If yes, where did you stay and how much did you pay toward rent and utilities?
Appendices
What is the name and phone number of the person you stayed with and paid money to (to get verification)?
____________________________________________________________________________

6. Have you left a job or reduced your work hours in the past 3 months?_________________________
   If yes, why?___________________________________________________________________________

7. Have you received HomeBASE assistance in the past 2 years?______________________________
   Who was the HomeBASE provider? ______________________________________________________
   Were you terminated from the program for cause? If yes, when were you terminated and what was
   the reason?______________________________________________________________________________
   If you were not terminated for cause, did you reach the end of the program/did your
   HomeBASE lease end? ______ If so, when?_________________________________________________
   Were you evicted from your HomeBASE unit? If yes, why? _____________________________________

Categorical eligibility

1. What is your current monthly income? (gross) ____________________________________________
   What are the earnings of all adult household members, benefits (TAFDC, SSI, UI), child support
   (formal or informal)?_______________________________________________________________________
   ______________________________________________________________________________________
   ______________________________________________________________________________________

2. Do you own a car?________________________________________
   What year, make, and model? _____________________________________________________________
   Do you know how much is it worth?_________________________________________________________
   Do you own it outright or do you still owe on the car? (How much paid off, and how much still owed?)
   ______________________________________________________________________________________

3. Do you have any money in the bank? _____ If so, how much? _______________________________
4. Do you own any property? _____ If so, where is it? _________________________________
How much is it worth? ______________________________________________________
Is there any reason you could not sell that property and use the money to pay for housing?
_________________________________________________________________________

Other Issues

1. What language(s) do you speak, read and understand?
_________________________________________________________

2. Does anyone in your family who is applying for shelter have disabilities or health conditions? _____
If yes, explain: ___________________________________________________________
_________________________________________________________

3. If you became homeless because you were evicted from your prior housing, was the eviction the fault of
someone who is not seeking shelter with you? _____ If yes, explain:_____________________
_________________________________________________________
Authorization of Release of Information

I hereby authorize and direct the Department of Housing and Community Development, the Department of Transitional Assistance, and the Department of Children and Families, and any of these agencies’ contractors or subcontractors, to release to ________________________________ any and all information in their possession about me or my family upon request from any employee or agent of this organization.

______________________________
Printed Name

______________________________
Signature

______________________________
Social Security Number (last four digits)

______________________________
Date

______________________________
Phone Number
Part I
Applicant’s Statement
for Emergency Assistance Shelter

DATE: ____/____/_____

Name: ___________________________________________ Social Security Number: _______________________

Address where you are currently staying. _____________________________________________________________

City: ______________________________________ State: _______________ Zip Code: ______________

Mailing address (if different). ________________________________________________________________

City: ______________________________________ State: _______________ Zip Code: ______________

Phone Number: ____________________________________________

Email Address: ____________________________________________

Emergency Contact Information: ______________________________________________________________

Is your current homelessness a result of domestic violence?  □ Yes □ No

Is any member of your household a Level 2 or Level 3 sex offender?  □ Yes □ No

If yes, indicate person’s name and level. ________________________________________________________

Please explain the reason for your current homelessness: ____________________________________________
__________________________________________________________________________________________
__________________________________________________________________________________________
__________________________________________________________________________________________
__________________________________________________________________________________________

Where did you stay last night? _________________________________________________________________

When is the last time you had your own apartment/house, and why did you leave it? ______________________________________________________________________

Can you verify the reason you are homeless with any of the following? □ Yes □ No

□ eviction papers
□ a letter from the friend or family member who is asking you to leave
□ a report from Inspectional Services
□ a fire report
□ other: __________________________________________________________
Appendices

Highest level of school completed: □ no school completed □ 4th grade or less □ 5th or 6th grade □ 7th or 8th grade □ 9th grade □ 10th grade □ 11th grade □ 12th grade, but no diploma □ high school diploma □ GED □ Some college □ Associates Degree □ Bachelors Degree □ Masters Degree or higher □ Other post secondary school

Ever served on active duty in the military? □ yes □ no □ don’t know
If yes: Which branch? □ Army □ Air Force □ Navy □ Marines □ Other: ________
Type of discharge: □ Honorable □ General □ Medical □ Bad conduct □ Dishonorable □ Other
If no: □ Are you the spouse/partner or estranged spouse/partner of a veteran?
□ Are any children in your household the children of a veteran?

Other Household Members

<table>
<thead>
<tr>
<th>Person Number</th>
<th>First Name</th>
<th>Last Name</th>
<th>Gender (M, F, M→F, F→M, Other, Don’t Know, Refused)</th>
<th>Race</th>
<th>Ethnicity</th>
<th>Relationship to Head of Household</th>
<th>Disabling Condition? (Y/N/Don’t Know/Refused)</th>
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Housing Status / Housing History

How long have you lived in Mass.? □ 0-30 days □ 1-3 mos. □ 3-6 mos. □ 6-12 mos. □ 1+ years
If less than 6 months, where did you live before? ________________________________

Why did you come to Massachusetts? (check all that apply) □ to be with family □ to go to school □ for employment □ to flee domestic violence □ discharged from the military □ recent émigré from another country □ for better access to health care or human services □ other ________________________________

Housing Status? □ Literally homeless □ Housed and at risk of losing housing □ Housed and at-risk of losing housing □ Stably housed

If Homeless or At Risk of Homelessness, Why?

□ Eviction from:
  □ Public Housing
  □ Private Apartment – no subsidy
  □ McKinney Subsidy (Shelter+Care, SHP, Section 8 Mod Rehab)
  □ Other tent-held subsidy (Section 8/Housing Choice, AHVP, MRVP, etc.)
  □ VASH (veteran’s subsidy)
  □ Apartment with attached housing subsidy
  □ Don’t know

Revised Draft 10/08/09 (Page 2 of 8)
Appendices

Do you need assistance getting these verifications?  □ Yes  □ No

Do you or any member of your household have any assets, such as money in the bank (including IRA, 401K) or in hand, a car, or any other object of value?

□ Yes  □ No

If yes, how much are these assets worth? $________________________

Do you have verification of above assets?  □ Yes  □ No

Do you need assistance getting verification of above assets?  □ Yes  □ No

Are you or any member of your household currently employed?  □ Yes  □ No

If yes, how much do you or the other member of your household make? $________________________

If not currently working, when was the last time you or the other member of your household worked?

__________________________________________________________

Do you have verification of this employment?  □ Yes  □ No

Do you need assistance getting verification of employment?  □ Yes  □ No

Do you or any member of your household have any other source of income?  □ Yes  □ No

If yes, how much? $________________________

Do you need assistance getting verification(s) of this income?  □ Yes  □ No

Do you or does any member of your household have a medical or other disability that might affect your placement in a temporary emergency shelter?  □ Yes  □ No

If yes, do you need assistance getting verification(s) of this disability?  □ Yes  □ No

I certify under penalty of perjury that the information given in this application is true to the best of my knowledge. I understand that I am required to verify the information I provided above. By signing this form, I give permission to the Massachusetts Department of Housing and Community Development (DHCD) to contact local and/or regional housing authorities, other government agencies, family, friends, schools, medical providers, financial institutions, and/or employers, past and present, and give permission to the above to share information with the DHCD that is necessary for me to get housing assistance services.

I understand that it is DHCD policy to use the Sex Offender Registry to determine if any member of my household, age 10 or older, is a registered sex offender.

I understand that if I am approved and offered a shelter placement based on the above statements and I am then found ineligible, my EA benefits will be terminated and I will be ineligible to receive further EA benefits for 12 months from my last day in shelter.

__________________________________________________________

Applicant Signature

Date: ________________

Signature of Homeless Coordinator

Date: ________________

__________________________________________________________

Other Adult Signature

Date: ________________
Appendices

Please provide *three years of address history* including where you have lived with another individual or rented. Begin with where you stayed last night.

Address

Date you began to live here  
Date you last lived here  

Owner’s Name  
Owner Phone Number  

Name of Primary Tenant  
Primary Tenant phone #  

Relationship to the Primary Tenant  

Rent Amount you paid  
□Private  □Subsidized  □Section 8  □Low income  

Reason you can no longer stay here:

Address

Date you began to live here  
Date you last lived here  

Owner’s Name  
Owner Phone Number  

Name of Primary Tenant  
Primary Tenant phone #  

Relationship to the Primary Tenant  

Rent Amount you paid  
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Please read these pages carefully, then sign and date at the bottom of the statement:

I certify under penalty of perjury that I have read, or have had read to me, the information given/displayed in this document and that such information is true to the best of my knowledge. I understand that giving false or misleading statements or misrepresenting, hiding or withholding facts, either orally or in writing, to establish eligibility for Emergency Assistance (EA) is fraud, an intentional Program Violation (IPV), and is punishable by civil and criminal penalties.

I am aware of my responsibilities to report (within 10 days) in person, by phone or mail to my Homeless Coordinator representing the Department of Housing and Community Development, any changes in income, assets, address, living arrangements, family size, employment, health insurance coverage, and health insurance premiums, or any other circumstances of all members of my EA filing unit that may affect their/my eligibility for this program.

I know that I must also report if I or any member of my EA household files a claim or sues someone for damages or settles a lawsuit or legal claim. I understand that a violation of the duty to report within 10 days may be found an indication of fraud for which I may be prosecuted.

By signing this form, I give permission to the Department of Housing and Community Development to verify and investigate the information I have given that relates to the determination of my eligibility for assistance.

I have read “Your Right to Know”, the appropriate program brochure(s) or have had them read to me, and understand their contents and my rights and responsibilities.

I authorize the Department of Housing and Community Development to contact federal and state agencies, local housing authorities, providers under contract with Department, the Department of Transitional Assistance and other welfare offices in other states and financial institutions, concerning my eligibility for assistance and service. I give permission for the above mentioned agencies, and institutions to release information to the Department to be used in the determination of my eligibility.

Right to an Interpreter

I understand that I have a right to an interpreter provided by the Department of Housing and Community Development neither I nor any adult member of my EA household is able to speak English.

I also understand that I have a right to an interpreter at any fair hearing with the Department if I cannot speak, understand, read, or write English. I understand that I may bring an interpreter to the hearing or request the Department to provide an interpreter. To request an interpreter, I understand that I must call the Office of the Chief Counsel at DHCD at least one week before the date of my hearing.

Reasonable Accommodation Rights

You have the right to request assistance as a reasonable accommodation on the basis of disability. Your Homeless Coordinator will work with you to see if a reasonable accommodation can be provided. Although you can ask for a reasonable accommodation at any time, it is best to do it as soon as possible. If your reasonable accommodation request is denied, you can ask us to reconsider through the central office ADA Accommodation Team. If your reasonable accommodation request is denied, you can appeal to the Division of Hearings, Office of the Chief Counsel, DHCD, or file a complaint with an agency that enforces rights of disabled persons such as the Massachusetts Commission Against Discrimination or the U.S. Department of Justice.
Nondiscrimination Statement

Under federal and state law the Massachusetts Department of Housing and Community Development does not discriminate on the basis of race, color, sex, sexual orientation, national origin, religion, creed, age, disability, familial status, children, marital status, military/veteran status, receipt of public assistance/housing subsidy, ancestry, and genetic information. To file a complaint of discrimination, you may contact the Associate Director, Division of Housing Stabilization, DHCD, 100 Cambridge St., 4th Floor, Boston, MA 02114, tel. (617)-573-1370, TTY (617)-573-1140 for the Deaf or hard-of-hearing.

Applicant Signature: ___________________________ Date: ________

Witness: ___________________________ Date: ________
(When mark is used for signature)

Signature of Homeless Coordinator: ___________________________ Date: ________

Other Adult Signature: ___________________________ Date: ________
Authorization to release information:

This referral to DCF is for the purpose of obtaining an assessment of whether a threat to health or safety of your household exists in your current living situation. This assessment is necessary to determine your Emergency Assistance eligibility for shelter placement.

Subject to my Voluntary Authorization to Release Information to and for the benefit of DHCD, previously entered into, I, ________________, hereby further authorize the DHCD, DCF, and DHCD subcontractors to share information about my case with each other as is necessary to assist in my obtaining an assessment of the threat to health and/or safety of my household, securing permanent housing and obtaining services for myself and/or my child(ren).

_________________________________________  ________________________
Applicant Signature                                      Date

_________________________________________  ________________________
Other Adult Signature                                    Date
Appendices

Commonwealth of Massachusetts

DEPARTMENT OF HOUSING & COMMUNITY DEVELOPMENT

Charles D. Baker, Governor ♦ Karyn E. Polito, Lt Governor ♦ Chrystal Kornegay, Undersecretary

Voluntary Authorization to Release Information

I understand that, in order to apply for or obtain assistance from the Department of Housing and Community Development (DHCD) Division of Housing and Stabilization (DHS) Emergency Assistance (EA) Program, every member of my family over the age of 18 and I must authorize the release of personal information to DHCD and by DHCD to other agencies in order to verify my family’s initial and continuing eligibility for benefits.

Permission for Others to Give Information to DHCD

I, ________________________________, authorize DHCD, to the extent required by law and regulations applicable to DHCD or for the efficient operation and management of DHCD programs, to request, obtain, and retain information about me and my minor family members (including copies of records kept on paper or electronically) from any agency, organization, employer, or individual, and to discuss or correspond about such information orally, on paper, or electronically. Further, in the pursuit of DHCD’s programs, I authorize any and all agencies, organizations, employers, or individuals to release any information about me and my minor family members to DHCD.

Permission for DHCD to Give Information about Me and my Family to Others

I authorize DHCD, to the extent required by law and regulations, for the efficient operation and management of DHCD programs, or to extent requested by other government agencies, to obtain information for official government use, to provide any information about myself and my minor family members made available through my involvement in DHCD programs to DHCD contractors and to other government agencies.

I authorize DHCD to provide any information about me and my minor family members made available through my involvement in DHCD programs to academic researchers, regardless of whether such research is conducted in conjunction with a degree-granting institution.

Applicable Law

I understand that DHCD will keep any personal information provided or received through this release confidential in accordance with applicable law, including the Fair Information Practices Act (FIPA), Massachusetts General Laws Chapter 66A; and the Massachusetts Data Privacy Act (DPA), Massachusetts General Laws Chapter 93H. I understand that, under FIPA, I have rights concerning certain personal data that is held about me and my family, including my right to have certain personal data made available to me and to object to the collection, maintenance dissemination, use, accuracy, completeness, timeliness, or relevance of the personal data or type of information held about me and my minor family members.

I acknowledge that I have read and understand this form, that I have received a copy of this form for future reference, and that I understand that a photocopy or digital copy of this authorized is as valid as the original.
Appendices

Applicant/Recipient Signatures

Address: ____________________________ City/Town: ____________________________ Zip Code: __________

Additional Adult Family Member Printed Name  Additional Adult Family Member Signature  SS# Last 4

Additional Adult Family Member Printed Name  Additional Adult Family Member Signature  SS# Last 4

I acknowledge that I explained the above document to the applicant/recipient, and witnessed his or her signature.

WITNESS: Homeless Coordinator Signature: __________________________________________

Homeless Coordinator Printed Name  Date

DHCD Office: __________________________ Telephone: __________________________ Email: __________________________
DO YOU HAVE A DISABILITY?

We may be able to help. A law known as the Americans with Disabilities Act (ADA), as well as other civil rights laws, provide persons with disabilities the right to receive full and equal access to government programs, services, and activities. If you are disabled, we can give you special help at application, with verification, in participating in the employment services and work programs, during the disability review process or whenever it is needed. One way DHCD can do this is by making reasonable accommodations.

Who is disabled under the ADA? Generally, persons with a physical or mental impairment that “substantially limits” a major life activity, a record of such impairment, or are regarded as having such an impairment, are considered disabled under the ADA and other civil rights laws. Some examples of disabilities are:

- blindness
- paralysis of the legs
- depression and anxiety disorders
- learning disorders (for example, if you have difficulty learning or understanding what you read or hear)

What is a reasonable accommodation? If your disability prevents you from fully accessing Department programs, makes it hard for you to use Department programs or meet our requirements, you may be able to get special help from us or a Department service provider—a reasonable accommodation. For example, if you are in a wheelchair, we can find a work program that is accessible to you. Or if you have a learning disability, we can read your notices out loud to you. There are many types of accommodations available depending upon your personal situation. You are also entitled to reasonable modifications (physical changes) to facilities.

How can I get a reasonable accommodation? If you are having trouble fully accessing our programs, including program facilities, or meeting Department requirements, ask your Homeless Coordinator for help. Your Homeless Coordinator will work with you to see if a reasonable accommodation can be provided. Although you can ask for a reasonable accommodation at any time, it is best to do it as soon as possible.

If your reasonable accommodation or modification request is denied, you can ask us to reconsider through the Central Office ADA Accommodation Team. If that reconsideration request is denied, you can appeal to the Division of Hearings, Office of the Chief Counsel, DHCD, or file a complaint with an agency that enforces rights of disabled persons such as the Massachusetts Commission Against Discrimination or the U.S. Department of Justices.

ADA Accommodation Team Members: ___________________________ ___________________________

I read the above information and have asked to have parts I do not understand explained to me. By signing below I acknowledge that I understand the form and have no further questions.

Applicant Signature ___________________________ Date ___________________________

Other Adult Signature ___________________________ Date ___________________________
Nondiscrimination Statement

In accordance with Federal law, this institution is prohibited from discriminating on the basis of race, color, national origin, sex, age, religion, disability, and familial status.

To file a complaint of discrimination with the U.S. Department of Health and Human Services (HHS):
  U.S. Department of Health and Human Services
  Office of Civil Rights
  JFK Federal Building – Room 1875
  Boston, MA 02203
  (617) 565-1340
  (617) 565-1343 (TDD)
  (617) 565-3809 (fax)

You may also e-mail your complaint to OCRcomplaint@hhs.gov.

(Note: complaints that may be filed with HHS do not include complaints on the basis of familial status)

To file a housing discrimination complaint with the U.S. Department of Housing and Urban Development:
  Office of Fair Housing and Equal Opportunity
  U.S. Department of Housing and Urban Development
  451 Seventh St. SW, Room 5204
  Washington, D.C. 20410-2000
  (800) 669-9777, (202) 708-1455 (TTY)

If you are not certain which federal agency to file a complaint with, contact
  U.S. Department of Justice
  Civil Rights Division
  Coordination and Review Section-NWB
  950 Pennsylvania Avenue, N.W
  Washington, D.C. 20530
  (888) 848-5306, (202) 307-2678 (TDD)

In accordance with Massachusetts law, the Department does not discriminate on the basis of race, color, national origin, sex, disability, religion, sexual orientation, age, marital status, children, military/veteran status, receipt of public assistance/housing subsidy, ancestry, and genetic information.

To file a complaint of discrimination with the Massachusetts Commission Against Discrimination:
  Boston Office (617) 994-6000, (617) 994-6196 (TTY)
  Springfield Office (413) 739-2145; (413) 784-1056 (Fax)
  Worcester Office: (508) 799-8010, (508) 799-8490 (Fax)

Commonwealth of Massachusetts
Department of Housing and Community Development
Division of Housing Stabilization

Your Right to Know

This brochure explains your rights and responsibilities if you receive Emergency Assistance (EA). Please read it carefully. You will also need to read all the additional program brochures for each specific program to get important information. You are responsible for telling other members of your household about program rules and their rights and responsibilities. If you do not understand something, be sure to ask your worker to explain it. If you are a noncitizen make your worker gives you the “What Noncitizens Need to Know” and “Noncitizen Resources” brochures

Your Responsibilities

You must
  • give complete and correct information to the Department
  • keep your appointments. You can reschedule your appointment before your appointment date.
  • complete scheduled reviews. You may be contacted at other times for other reasons.
  • cooperate with federal or state employees who may review your case
  • tell the Department of any changes that may affect your eligibility and/or benefits, including but not limited to changes in, for example:
    • the number of children or adults who live with you.
    • the amount of earnings, Social Security payments, cash or child support you have
    • your health insurance coverage (for example, if you get new health insurance through a job or an absent parent, or you lose your health insurance).
    • where you live and any shelter costs (including Section 8 or other subsidy programs)
    • one-time payment income, such as a retroactive Social Security payment, or lottery winnings.
    • any child/dependent care costs

You must report changes to the Department in person, in writing or by phone within 10 days of the change. If you are not sure whether you have to report a change, talk to your worker

Applicant Signature & Date: ________________________________

Other Adult Signature & Date: ________________________________
Appendices

Depending on the rules of your assistance program, you may also be required to
- participate in the Department's employment services program and seek employ-
  ment if you are required to do so, and
- sign a release of medical records to the Department and its agents

If you are an EA applicant or EA family, you will develop a self-sufficiency plan that will
outline the steps needed to achieve self-sufficiency and find sustainable housing.

Your Rights

You have the right to
- be treated politely and with respect.
- file an application
- have your eligibility for benefits determined in a timely manner
- receive written notice from the Department when a decision is made on your
  application and every time
- there is a change to your case
- benefits from the date you apply if your household is eligible
- interpreter services provided by the Department, when needed, unless you want
  to bring your own interpreter.
- get immediate help with food, shelter and medical care, if eligible
- get information that could help you with domestic violence issues
- file an appeal if you disagree with any action taken on your case The appeal
  instructions are found on the notices you get If an action is taken on your case
  and you do not get an official notice, contact your local DHCD Field Office to
  get the appeal form and instructions.
- review your case file with your worker.

Third-Party Contacts

To verify information you have given, the Department can contact other people (third
parties and agencies) without informing you

The information you give will be subject to verification by federal, state and local official
s through the State Verification Eligibility System (SVES).

Social Security Numbers and Your Right to Privacy

Household members applying for or getting emergency assistance may be required to
give the Department their Social Security numbers These numbers will be verified
Household members without a Social Security number will be referred to the local Social
Security Administration office to apply for one Your worker will help you with this

When you sign your application or eligibility review, you are giving the Department permission
to use the Social Security numbers in certain ways The Department will use your
Social Security number

Applicant Signature & Date: ________________________________

Other Adult Signature & Date: _______________________________

- as part of the Department's identification system used to keep track of your case, and
- to detect receipt of duplicate benefits.

To verify the information you give, the Department may match all household members' Social Security numbers with the files of
- any federal agency,
- any state, county or local agency,
- computer files of banks and other financial institutions,
- providers under contract with the Department, and
- other agencies or institutions as allowed by law

The Department does not need to ask you before it gets and uses information from those
sources for the reasons indicated in this section.

Noncitizen Status

If you become a U.S citizen, you may be eligible for federal benefits such as Supplemental Security Income (SSI). Generally you need to have been a permanent resident for five years (three years if married to a U.S citizen) before you are eligible for citizenship. You can apply 90 days before you have met the five-year requirement. You will need to demonstrate knowledge of English and some U.S history unless you qualify for a waiver because you have a mental or physical disability that prevents you from being able to learn. It generally will take about a year for you to apply and get your citizenship interview. Additional background checks due to increased security may mean that it can take longer.

It is important to get assistance before you apply for citizenship The Office for Refugees and Immigrants (ORI) works with a network of community-based organizations who are participating in a Citizenship Outreach Project. These organizations will screen for citizenship eligibility, provide assistance with the naturalization process and/or make appropriate referrals. Your Department of Transitional Assistance worker can provide you with a list of organizations that can help you apply for citizenship.

Americans with Disabilities Act (ADA)

If you think you have a disability that interferes with you meeting Department require-
ments or with accessing Department programs, you may be entitled to reasonable accom-
modations under the Americans with Disabilities Act (ADA). Ask your worker for more
information.

The Associate Director of Housing Stabilization has been designated to help coordinate the Department’s efforts to comply with appropriate regulations.

For further information about the regulations and the Department’s grievance procedure
for resolution of discrimination complaints, contact:

Associate Director of Housing Stabilization
Department of Housing and Community Development
100 Cambridge St Suite 300, Boston, MA 02114
(617) 573-1370
This is an important document. Please contact the Massachusetts Department of Housing and Community Development at (617) 573-1106 for free language assistance.

Este documento es muy importante. Favor de comunicarse con el Departamento de Vivienda y Desarrollo de la Comunidad de Massachusetts en (617) 573-1106 para ayuda gratis con el idioma.

Este é um documento importante. Entre em contato com o Departamento de Moradia e Desenvolvimento Comunitário de Massachusetts no número (617) 573-1106 para obter assistência gratuita com o idioma.

Dokiman sila a enpótan Tanpri kontakte Department of Housing and Community Development [Department Development Lojman ak Kominote] Masachousét la nan (617) 573-1106 pou asistans gratis nan lang.

此文件為重要文件。如果您需要免費的語言翻譯幫助，請聯絡麻州住宅及社區發展部 (The Massachusetts Department of Housing and Community Development) 聯絡方式 (617) 573-1106。此文件為重要文件。如果您需要免费的语言翻译帮助，请联络麻州住宅及社区发展部 (The Massachusetts Department of Housing and Community Development),联络方式 (617) 573-1106。

Это весьма важный документ. Свяжитесь с сотрудником Департамента жилищного хозяйства и общественного развития штата Массачусетс по телефону (617) 573-1106 для бесплатной помощи по переводу на иностранный язык.

This document is very important. Please contact the Department of Housing and Community Development of Massachusetts (Department Housing and Community Development) at (617) 573-1106 to obtain free language assistance.

Kani waa dokumenty o muhim ah Fadlan Waaxda Guryaynta iyo Horumarinta Jaaliyadda ee Massachusetts (Massachusetts Department of Housing and Community Development) kala soo xiriir (617) 573-1106 si aad u hesho garbaar xagga luqadda oo bilaash ah.

Cette document est très important. Veuillez contacter le département du logement et du développement communautaire du Massachusetts (« Department of Housing and Community Development ») au (617) 573-1106 afin d’obtenir une assistance linguistique gratuite.

Ce document est très important. Veuillez contacter le département du logement et du développement communautaire du Massachusetts (« Department of Housing and Community Development ») au (617) 573-1106 afin d’obtenir une assistance linguistique gratuite.

Jest to ważny dokument. Proszę skontaktować się z Massachusetts Department of Housing and Community Development pod numerem (617) 573-1106 aby uzyskać bezpłatną pomoc językową.

Il presente è un documento importante. Si prega di contattare il Dipartimento Edilizia Abitativa e Sviluppo della Comunità dello Stato del Massachusetts (Department of Housing and Community Development) al (617) 573-1106 per avere assistenza gratuita per la traduzione.
Appendices

This is an important document. Please contact the Massachusetts Department of Housing and Community Development at (617) 573-1106 for free language assistance.

To parón ेγγαρφο είναι σημαντικό. Παρακαλώ επικοινωνήστε με την Υπηρεσία Στέγασης και Κοινωνικής Ανάπτυξης Μασαχουσέτης στο τηλέφωνο (617) 573-1106 για δωρεάν γλωσσική βοήθεια.

Jest to ważny dokument. Proszę skontaktować się z Massachusetts Department of Housing and Community Development pod numerem (617) 573-1106 aby uzyskać bezpłatną pomoc językową.

이것은 중요한 문서입니다. 무료 언어 지원을 위해서는 (617) 573-1106 의 매사추세츠 주택 커뮤니티 개발청에 연락하십시오.

これは重要な文書です。無料の言語サービスについては、(617) 573-1106 のMassachusetts Department of Housing and Community Development（マサチューセッツ州住宅地域開発省）までご連絡ください。

Ovo je važan dokumenat. Za besplatnu pomoć vezanu za jezik, molimo vas kontaktirajte Odeljenje za stambena pitanja i razvoj lokalne zajednice države Masačusetš (Massachusetts Department of Housing and Community Development) na (617) 573-1106.

يمكنك الاتصال بالهندية باللغة العربية على الرقم (617) 573-1106.

Информация можно получить по телефону (617) 573-1106.

June 2011
Declaración del Solicitante
para Albergue de Asistencia de Emergencia

FECHA: _____/_____/_____

Nombre: ____________________________________________ Seguro Social: __________________

Dirección donde está quedando actualmente: __________________________________________

Ciudad: __________________________ Estado: ___________ Zona Postal: __________

Dirección (si es diferente): _______________________________________________________

Ciudad: __________________________ Estado: ___________ Zona Postal: __________

Número Telefónico: _____________________________________________________________

Dirección de Correo Electrónico: __________________________________________________

Información de Contactos de Emergencia: __________________________________________

¿Es su situación actual el resultado debido a violencia doméstica? □ Sí □ No

¿Es algún miembro de su hogar delincuente sexual nivel 2 o nivel 3? □ Sí □ No

Si su respuesta es sí, indique el nombre de la persona y el nivel: ______________________

Por favor explique la razón porque está usted sin hogar actualmente:

_____________________________________________________________________________

_____________________________________________________________________________

_____________________________________________________________________________

¿Donde estuvo usted anoche?

¿Cuando fué la última vez que tuvo su propio apartamento, y por qué lo dejó?

¿Puede verificar con una de las siguientes razones porqué está sin hogar? □ Sí □ No

☐ papeles de desalojo
☐ una carta de un miembro familiar o amigo pidiéndole que se vaya
☐ un informe de Servicios de Inspección
☐ un informe de incendio
☐ otro. __________________________

Appendices
Appendices

Indique el nivel más alto de escolar alcanzado: □ escuela no completada □ 4\textsuperscript{th} grado o menos □ 5\textsuperscript{th} or 6\textsuperscript{th} grado □ 7\textsuperscript{th} or 8\textsuperscript{th} grado □ 9\textsuperscript{th} grado □ 10\textsuperscript{th} grado □ 11\textsuperscript{th} grado □ 12\textsuperscript{th} grado, pero no se graduó □ diploma de escuela secundaria □ GED □ Alguna educación superior □ Grado asociado □ Grado Bachiller □ Maestría o más □ Otra escuela post-secundaria

Ha estado activo en el servicio militar? □ sí □ no □ no se

En caso afirmativo, ¿qué rama? □ Army □ Air Force □ Navy □ Marines □ Otro: ______

Tipo de Retiro: □ Honorable □ General □ Medica
□ Mala Conducta □ Deshonorable □ Otro

En caso negativo: □ Es usted la esposa (esposa)/pareja o separado(a) de un veteran(a)? □ Hay en su núcleo familiar algún hijo de un veteran(a)?

Otros Miembros de Hogar

<table>
<thead>
<tr>
<th>Numero de Persona</th>
<th>Nombre</th>
<th>Apellido</th>
<th>Genero (M, F, M\rightarrow F, F\rightarrow M, Otro, No se rechazado)</th>
<th>Raza</th>
<th>Etnicidad</th>
<th>Relacion con el miembro del hogar</th>
<th>Incapacidad (sí, no/no se rechazado)</th>
<th>SS #</th>
<th>Fecha de nacimiento</th>
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<td></td>
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<td>1=esposo(a)</td>
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<td>3</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>2=padres/abuelos</td>
<td></td>
<td></td>
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</tr>
<tr>
<td>4</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>3=Hijo(a)/Nieto(a)</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>5</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>4= Otro pariente</td>
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<tr>
<td>6</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>5= Amigo(a)</td>
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<td></td>
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<tr>
<td>7</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>6= Otro (especifique)</td>
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</tr>
</tbody>
</table>

Estado de Vivienda/Historia de Vivienda

Cuánto tiempo ha vivido en Massachusetts? □ 0-30 días □ 1-3 meses □ 3-6 meses □ 6-12 meses □ 1+ años

Si es menos de seis meses, donde vivo antes? ______________________________________________________

Por que vino usted a Massachusetts? (marque todos los que aplique) □ para estar con familia □ para ir a la escuela □ por empleo □ violencia doméstica □ dado de alta de los militares □ acaba de inmigrar de otro país □ para un mejor acceso a beneficios de salud y otros servicios □ otro ______________________________________________________

Estado de Vivienda? □ prácticamente en la calle □ en riesgo inminente de perder su vivienda □ vivienda estable

Si esta sin vivienda o a riesgo de quedarse en la calle, por qué?

□ Desalojo de:
□ Vivienda Pública
□ Vivienda Privada – sin subsidio
□ Subsidio McKinney (Shelter+Care, SHP, Section 8 Mod Rehab)
□ Otro tipo de subsidio (Section 8/Housing Choice, AHVP, MRVP, etc.)
□ VASH (subsidio veteranos)
□ Apartamento con subsidio
□ No se
¿Necesita usted ayuda para conseguir alguna de estas verificaciones?  □ Sí  □ No
¿Tiene usted o algún miembro de su hogar algunos bienes, como dinero en el banco o en mano, un vehículo, o cualquier otro objeto de valor?  □ Sí  □ No

Si la respuesta es sí, ¿cuál es el valor de estos bienes? $ ________

¿Necesita usted verificación de estos bienes?  □ Sí  □ No
¿Necesita usted ayuda para conseguir la verificación de dichos bienes?  □ Sí  □ No
¿Está usted o algún otro miembro de su hogar actualmente empleado?  □ Sí  □ No
Si contestó sí, ¿cuál es su salario o el de los otros miembros de su hogar? $ ________________
Si no tiene trabajo, ¿cuando fue la última vez que usted o algún otro miembro de su hogar trabajó? ________________

¿Tiene usted verificación de este empleo?  □ Sí  □ No
¿Necesita usted ayuda para conseguir verificación de empleo?  □ Sí  □ No
¿Tiene usted o algún otro miembro de su hogar otra fuente de ingresos?  □ Sí  □ No
Si contestó sí, ¿Cuánto son los ingresos? $ ________________

¿Necesita usted ayuda para conseguir verificación de esos ingresos?  □ Sí  □ No
¿Tiene usted o algún otro miembro de su familia algún problema médico o algún tipo de incapacidad que puede afectar su alojamiento en un albergue de emergencia temporal?  □ Sí  □ No
Si contestó sí, ¿necesita usted ayuda para conseguir verificación de dicha incapacidad?  □ Sí  □ No

Certifico bajo pena de perjurio que la información dada en esta solicitud tal como la se es verdadera. Entiendo que se requiere que yo debo verificar la información que proporcione arriba. Al firmar este documento, doy permiso a DHCD a contactar a las autoridades de vivienda pública locales y/o regionales, otras agencias gubernamentales, familia, amigos, escuelas, proveedores médicos, instituciones financieras, y/o patrones de empleo pasados y presentes, y le doy permiso a todas estas personas para compartir con DHCD la información que es necesaria para que yo obtenga servicios de asistencia para la vivienda.

Entiendo que es la regla de DHCD usar el Registro de Delincuentes Sexuales para determinar si algún miembro de mi hogar de 10 años de edad o mayor está registrado como delincuente sexual.

Entiendo que si me aprueban y me ofrecen albergue por las declaraciones que he dado aquí, y luego me determinan inelegible, mis beneficios de albergue serán terminados y seré inelegible de recibir asistencia de emergencia por 12 meses a partir de mi último día en el albergue.

Firma del Solicitante
Firma del Coordinador de Personas Sin Vivienda
Firma de Otro Adulto

Fecha
Fecha
Fecha
Por favor proporcionar tres años de historia de la dirección en la que ha vivido con otra persona o alquilada. Comience con el lugar donde te quedaste anoche.

<table>
<thead>
<tr>
<th>Dirección</th>
<th>Fecha que empezó a vivir allí</th>
<th>Fecha que ha dejado de vivir allí</th>
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<table>
<thead>
<tr>
<th>Nombre del Propietario</th>
<th>Número de teléfono</th>
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<table>
<thead>
<tr>
<th>Nombre del inquilino principal</th>
<th>Número de teléfono</th>
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<table>
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<tr>
<th>Relación del inquilino principal a usted</th>
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Por favor proporcionar tres años de historia de la dirección incluido cuando usted ha vivido con otra persona o alquilada. Comience con el lugar donde te quedaste anoche.

Dirección ____________________________________________________________

Fecha que empezó a vivir allí ______________________ Fecha que ha dejado de vivir allí ______________________

Nombre del Propietario __________________________ Número de teléfono __________

Nombre del inquilino principal __________________________ Número de teléfono __________

Relación del inquilino principal a usted __________________________

Cantidad de alquiler que usted paga ________ ☐Privado ☐Subsidio ☐Sección 8 ☐De bajo ingresos

Razón por la que no podía quedarse ____________________________________________

Dirección ____________________________________________________________

Fecha que empezó a vivir allí ______________________ Fecha que ha dejado de vivir allí ______________________

Nombre del Propietario __________________________ Número de teléfono __________

Nombre del inquilino principal __________________________ Número de teléfono __________

Relación del inquilino principal a usted __________________________

Cantidad de alquiler que usted paga ________ ☐Privado ☐Subsidio ☐Sección 8 ☐De bajo ingresos

Razón por la que no podía quedarse ____________________________________________

Dirección ____________________________________________________________

Fecha que empezó a vivir allí ______________________ Fecha que ha dejado de vivir allí ______________________

Nombre del Propietario __________________________ Número de teléfono __________

Nombre del inquilino principal __________________________ Número de teléfono __________

Relación del inquilino principal a usted __________________________

Cantidad de alquiler que usted paga ________ ☐Privado ☐Subsidio ☐Sección 8 ☐De bajo ingresos

Razón por la que no podía quedarse ____________________________________________
Por favor proporcionar **tres años de historia** de la dirección en la que usted ha vivido con otra persona o alquilada. Comience con el lugar donde te quedaste anoche.

Dirección __________________________________________________________

Fecha que empezó a vivir allí ______________ Fecha que ha dejado de vivir allí ______________

Nombre del Propietario _____________________________________________ Número de teléfono ______________

Nombre del inquilino principal ______________________________________ Número de teléfono ______________

Relación del inquilino principal a usted ______________________________

Cantidad de alquiler que usted paga __________ □ Privado □ Subsidio □ Sección 8 □ De bajo ingresos

Razón por la que no podía quedarse ____________________________________

Dirección __________________________________________________________

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Nombre del Propietario _____________________________________________ Número de teléfono ______________

Nombre del inquilino principal ______________________________________ Número de teléfono ______________

Relación del inquilino principal a usted ______________________________

Cantidad de alquiler que usted paga __________ □ Privado □ Subsidio □ Sección 8 □ De bajo ingresos

Razón por la que no podía quedarse ____________________________________

Dirección __________________________________________________________

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Nombre del inquilino principal ______________________________________ Número de teléfono ______________

Relación del inquilino principal a usted ______________________________

Cantidad de alquiler que usted paga __________ □ Privado □ Subsidio □ Sección 8 □ De bajo ingresos

Razón por la que no podía quedarse ____________________________________
Por favor lea estas páginas detenidamente, luego firme y feche al final de esta declaración:

Yo testifico bajo pena de perjurio que he leído, o me han leído, la información dada/manifestada en este documento y que tal información es verdadera. Yo entiendo que dando declaraciones falsas o engañosas o falsificando, ocultando o reteniendo datos, bien sean orales o por escrito, para determinar elegibilidad para la Asistencia de Emergencia (EA) es fraude, una Violación Intencional del Programa (IPV), y está castigado bajo penas civil y criminal.

Soy consciente de mis responsabilidades de informar (dentro de un plazo de 10 días) en persona, por teléfono o por correo a mi Coordinador(a) de Personas Sin Vivienda representando al Department of Housing and Community Development, cualquier cambio en ingresos, bienes capitales, dirección, convenio de vivienda, tamaño de familia, empleo, seguro de salud, y prima del seguro de salud y cualquier otra circunstancia de los miembros en mi ficha EA que pudieran afectar la elegibilidad de ellos/o mi para este programa.

Se que debo avisar también si yo u otro miembro familiar en EA registramos una demanda o demandamos a alguien por daños y perjuicios o asentamos un pleito o demanda legal. Yo comprendo que que violando el deber de avisar dentro de un plazo de 10 días puede ser una indicación de fraude por lo cual puedo ser procesado.

Al firmar este documento, doy permiso al Department of Housing and Community Development para verificar e investigar la información que he otorgado relativa a mi determinación de elegibilidad para asistencia.

Yo he leído “Su Derecho A Saber”, folletos apropiados del programa o me los han leído, y entiendo lo que contienen y mis derechos y responsabilidades.

Yo autorizo al Department of Housing and Community Development contactar agencias federales y estatales, autoridades de la vivienda locales, proveedores contratados por el Departamento, el Department of Transitional Assistance and otras agencias de beneficencia en otros estados e instituciones financieras, concernientes a mi elegibilidad para asistencia y servicios. Doy permiso a las agencias mencionadas, e instituciones proporcionar información al Department para ser utilizada en la determinación de mi elegibilidad.

Derecho a un Interprete

Yo entiendo que tengo derecho a un intérprete proveido por el Department of Housing and Community Development, mi yo ni otro miembro adulto de mi familia es capaz de hablar Inglés.

Yo también entiendo que tengo el derecho a un intérprete para cualquier audiencia imparcial con el Department si no puedo hablar, entender, leer, o escribir Inglés. Yo entiendo que puedo traer un intérprete a mi audiencia o pedir al Department que me provea uno. Para solicitar un intérprete, entiendo que debo llamar a la Office of the Chief Counsel en DHCD por lo menos una semana antes de mi audiencia.

Derechos a Ayuda Razonable

Usted tiene derecho a solicitar asistencia para ayuda razonable por motivos de incapacidad. Su Coordinador(a) de Personas Sin Vivienda le asistirá para ver si una ayuda razonable puede ser proporcionada. Aunque usted puede solicitar ayuda razonable en cualquier momento, es mejor si lo hace lo antes posible. Si su solicitud de ayuda razonable es negada, usted puede pedir una reconsideración a través de la Central Office ADD Accomodation Team. Si esa petición de reconsideración es negada, usted puede apelar a la Division of Hearings, Office of the Chief Counsel, DHCD, o registrar una queja con una agencia que se esfuerza en imponer los derechos de personas incapacitadas como es la de Massachusetts Commission Against Discrimination o la de U.S. Department of Justice.
Declaración Antidiscriminatoria

Bajo las leyes estatales y federales Massachusetts Department of Housing and Community Development no discrimina basado en raza, color, sexo, orientación sexual, origen nacional, religión, creencias, edad, incapacidad, estado familiar, niños, estado matrimonial, estado militar/veterano, receptor de asistencia/vivienda subvencionada, ascendencia, e información genética. Para registrar una queja de discriminación, debe contactar al Associate Director, Division of Housing Stabilization, DHCD, 100 Cambridge St 4th Floor, Boston, MA 02114, teléfono (617)-573-1370 para sordos o problemas auditivos TTY (617)-573-1140.

Firma de Solicitante: ________________________________  Fecha: ________

Testigo: ________________________________  Fecha: ________
(Cuando se marca en vez de firmar)

Firma del Coordinador de Personas Sin Vivienda: ________________________________  Fecha: ________

Firma de Otro Adulto: ________________________________  Fecha: ________
Autorización para revelar información:

Este referido de DCF es con el propósito de evaluar si una amenaza de salud o seguridad existe en su situación de vivienda actual. Esta evaluación es necesaria para determinar su Ayuda de Asistencia Emergencia para colocación en un albergue.

Sujeto a mi Autorización Voluntaria para divulgar información a y para el beneficio de DHCD, previamente ingresado, Yo, ______________________, autorizo a DHCD y al subcontratista DCF a compartir información acerca de mi caso en lo que sea necesario de asistir en obtener y evaluar la salud y/o seguridad en mi núcleo familiar, asegurando vivienda permanente y obteniendo servicios para mi y/o mis hijos.

_____________________________  ______________________________
Firma                                                                        Fecha

_____________________________
Firma de Otro Adulto                                                        Fecha
Autorización voluntaria para divulgar información

Yo entiendo que, para solicitar o obtener asistencia del Departamento de Vivienda y Desarrollo Comunitario (DHCD) División de Vivienda y Estabilización (DHS) programa de asistencia de emergencia (EA), cada miembro de mi familia sobre la edad de 18 años y yo debo autorizar la publicación de información personal para DHCD y por DHCD a otras agencias para verificar la elegibilidad inicial de mi familia y continuación de elegibilidad para beneficios.

Permiso para que otros puedan dar información a DHCD

Yo, _______________________________ autorizo a DHCD, en la medida requerida por la ley y los reglamentos aplicables a DHCD o para la operación eficiente y la gestión de programas de DHCD, para solicitar, obtener y retener información sobre mí y mis familiares menores (incluyendo copias de registros en papel o electrónicamente) de cualquier agencia, empleador, organización o individuo, y a discutir o corresponder sobre dicha información oral, en papel o electrónicamente. Además, en la búsqueda de programas de DHCD, yo autorizo a cualquier y todas las agencias, organizaciones, los empleadores o individuos para liberar cualquier información sobre mí y mis familiares menores a DHCD.

Permiso para DHCD a dar información sobre mí y mi familia a otros

Yo autorizo a DHCD, en la medida requerida por la ley y reglamentos, para la operación eficiente y la gestión de programas de DHCD, o a la medida solicitada por otras agencias del gobierno, para obtener información para el uso oficial del gobierno, para proporcionar cualquier información sobre mí y mis familiares menores a disposición a través de mi participación en programas DHCD a contratistas de DHCD y a otras agencias del gobierno. Yo autorizo a DHCD a proporcionar cualquier información sobre mí y mis familiares menores puestos a disposición a través de mi participación en programas de DHCD a investigadores académicos, independientemente de si dicha investigación se lleva a cabo en conjunto con una institución de grado-conceder.

Ley Aplicable

Yo entiendo que DHCD mantendrá cualquier información personal proporcionada o recibida a través de este comunicado confidencial según la ley aplicable, incluyendo el Acto de Prácticas de Información Justa (FIPA), Capítulo de las Leyes Generales de Massachusetts 66A; y la Ley de Privacidad de Datos de Massachusetts (DPA), las leyes de Massachusetts General Capítulo 93H. Yo entiendo que, bajo la FIPA, tengo derechos sobre ciertos datos de carácter personal que se lleva a cabo por mí y mi familia, incluyendo mi derecho a tener ciertos datos personales disponibles a mí y a oponerse a la colección, mantenimiento, difusión, uso, exactitud, integridad, actualidad o pertinencia del tipo de información o datos de carácter personal mantenida sobre mí y mis familiares menores.

Yo reconozco que he leído y entendido este formulario, que he recibido una copia de este formulario para referencia futura, y que entiendo que una fotocopia o una copia digital de esta autorización es tan válida como la original.
Appendices

Los últimos 4 dígitos del número de Seguro Social: ____________
Firma del solicitante/beneficiario

Dirección: ________________ Ciudad: ________________ Código Postal: _________

Nombre escrito de adulto familiar adicional   Firma de adulto familiar adicional   SS# últimos 4

Nombre escrito de adulto familiar adicional   Firma de adulto familiar adicional   SS# últimos 4

Yo reconozco que expliqué el documento anterior al solicitante/beneficiario y soy testigo de su firma.

TESTIGO: Firma del Coordinador Sin Hogar: ________________________________

Fecha: ________________________
Coordinador Sin Hogar Nombre Escrito:

Oficina de DHCD: ______________ # de teléfono: ______________ Email: ____________________
¿TIENE USTED UNA INCAPACIDAD?

Nosotros le podemos ayudar: Una ley conocida como Norteamericanos con Incapacidades (ADA) garantiza que las personas incapacitadas pueden tener el mismo acceso a los servicios gubernamentales como las personas que no lo son. Si usted tiene una discapacidad, le podemos ayudar con la participación en los programas de trabajo y servicios de empleo cuando solicite trabajo y con la verificación durante la revisión del proceso de discapacidad o cuando sea necesario. Una manera que DHCD puede hacer esto es creando ayudas razonables

¿Quién es incapacitado bajo el ADA? Generalmente, personas con una incapacidad que “considerablemente perjudica” alguna actividad vital mayor están protegidos por ADA. Las discapacidades pueden ser.

- Física (como ceguera o parálisis de las piernas)
- Mental (incluyendo depresión y trastornos de ansiedad); o
- Aprendizaje (por ejemplo, si tiene problemas de aprendizaje o no entiende lo que usted lee o escucha)

¿Qué es la ayuda razonable? Si su incapacidad le impide tener acceso a programas del Department, se le hace difícil usar los programas o cumplir nuestros requisitos, usted puede recibir ayuda especial – una ayuda razonable, nuestra o por un proveedor de servicios del Department. Por ejemplo, si usted está en silla de ruedas, podemos encontrarle un programa de trabajo que sea accesible para usted. O si usted tiene un problema de aprendizaje, podemos leerle los avisos en voz alta. Hay varios tipos de ayudas disponibles dependiendo de su situación personal.

¿Cómo puedo adquirir ayuda razonable? Si usted tiene dificultad en acceder nuestros programas o cumplir con los requisitos del Department, pida ayuda a su Coordinador de Personas Sin Vivienda. Su Coordinador trabajará con usted para ver si usted califica para la ayuda de ADA. Aunque usted pueda hacer esta solicitud en cualquier momento, es preferible que lo haga lo más pronto posible.

Si el equipo de ayuda del ADA le niega una ayuda razonable, nos puede hacer una petición de reconsideración de su caso por medio de la Central Office ADA Accommodation Team. Si esa petición es negada, usted puede apelarla a la Division of Hearings, Office of the Chief Counsel, DHCD o a Massachusetts Commission Against Discrimination.

Miembros del Equipo de Ayuda ADA:

Leí la información anterior y he pedido que me expliquen las partes que no entiendo. Al firmar a continuación, reconozco y entiendo el formulario y no tengo más preguntas.

__________________________________________________________
Firma del Solicitante

Fecha

__________________________________________________________
Firma de Otro Adulto

Fecha
Declaración de no discriminación

Conforme a la Ley Federal, esta institución se prohíbe la discriminación por raza, color, origen nacional, sexo, edad, religión, discapacidad y estado familiar.

Para presentar una queja de discriminación con el del Departamento de salud y servicios humanos de los Estados Unidos (HHS)

Departamento de salud y servicios humanos de los Estados Unidos
Oficina de derechos civiles
JFK Federal Building – sala de 1875
Boston, MA 02203
(617) 565-1340
(617) 565-1343 (TDD)
(617) 565-3809 (fax)

También puede mandar su queja a correo electrónico OCRcomplaint@hhs.gov

(Nota. las quejas que pueden presentarse con HHS no incluyen las quejas sobre la base de estado familiar)

Para presentar una queja de discriminación en la vivienda con el Departamento de vivienda y desarrollo urbano de los Estados Unidos

Office of Fair Housing and Equal Opportunity
U.S. Department of Housing and Urban Development
451 Seventh St SW, Room 5204
Washington, D.C. 20410-2000
(800) 669-9777, (202) 708-1455 (TTY)

Si no está seguro con qué agencia federal debería presentar una queja, póngase en contacto con:

U.S. Department of Justice
Civil Rights Division
Coordination and Review Section-NWB
950 Pennsylvania Avenue, N.W.
Washington, D.C. 20530
(888) 848-5306, (202) 307-2678 (TDD)

Conformidad con la ley de Massachusetts, el Departamento no discrimina en base de raza, color, origen nacional, sexo, discapacidad, religión, orientación sexual, edad, estado civil, niños, estado militar/veterano, recibo de asistencia pública o una vivienda, ascendencia, y información genética.

Para presentar una queja de discriminación con la Comisión de Massachusetts contra la discriminación:

Boston Office: (617) 994-6000; (617) 994-6196 (TTY)
Springfield Office (413) 739-2145, (413) 784-1056 (Fax)
Worcester Office: (508) 799-8010, (508) 799-8490 (Fax)

Appendices

Estado DE Massachusetts
Departamento De Vivienda Y Desarrollo Comunitario
División De Vivienda Estabilización

Su Derecho a Saber

Este folleto explica sus derechos y responsabilidades, si usted recibe asistencia de emergencia (EA). Por favor léalo cuidadosamente. Usted también necesitará leer todos los folletos adecuados del programa para cada programa específico, para obtener información importante. Usted es responsable de decirle a otros miembros de su familia sobre las reglas del programa, sus derechos y responsabilidades. Si no entiende algo, asegúrese de preguntarle a su trabajador que lo explique. Si no es un ciudadano, asegúrese que su trabajador le da los folletos "¿Qué personas que no son ciudadanos deben saber" y "Recursos para personas que no son ciudadanos".

Sus Responsabilidades

Usted debe:

- dar información completa y correcta al departamento
- Mantén tus citas Usted puede reprogramar su cita antes de su cita
- Completar comentarios programados Usted puede ser contactado en otras ocasiones por otras ra-zones.
- cooperar con empleados federales o estatales que pueden revisar su caso
- Dile al Departamento de cualquier cambio que pueda afectar su elegibilidad o beneficios, incluyendo pero no limitado a los cambios, por ejemplo
  - el número de niños o adultos que viven con usted.
  - la cantidad de ingresos, pagos de Seguridad Social, efectivo o manutención de los hijos.
  - su cobertura de seguro de salud por ejemplo, si tienes nueva salud de seguros a través de un trabajo o un padre ausente, o si pierdes tu seguro de salud.
  - donde vives y cualquier costo de refugio (incluyendo otros programas de subsidio o sección 8)
  - ingresos de pago único, como un pago retroactivo de la Seguridad Social, o las ganancias de la lotería
  - cualquier costo de cuidado de niños/dependientes

Usted debe de informar cambios al Departamento en persona, por escrito o por teléfono dentro de 10 días del cambio. Si no está seguro si usted tiene que reportar un cambio, hable con su trabajador.

Firma de Solicitante y Fecha: ________________________________

Firma de Otro Adulto y Fecha: ______________________________
Appendices

Dependiendo en las reglas de su programa de asistencia, puede ser requerido para

- participar en el programa de servicios de empleo del Departamento y buscar un empleo si está obligado a hacerlo, y
- firmar una liberación de registros médicos al departamento y sus agentes.

Si usted es un solicitante EA o familia EA, usted desarrollará un plan de autosuficiencia que se describen los pasos necesarios para lograr la autosuficiencia y encontrar una vivienda sostenible

**Sus derechos**

Usted tiene el derecho de:

- ser tratado con cortesía y respeto
- presentar una solicitud.
- tener su elegibilidad para beneficios determinados en forma oportuna.
- recibir aviso por escrito del departamento cuando una decisión sobre su aplicación se presenta y cada vez que hay un cambio en su caso.
- beneficios desde la fecha en que usted aplica si su hogar es elegible
- servicios de intérprete proporcionados por el Departamento, cuando sea necesario, a menos que quiera traer su propio intérprete
- obtener ayuda inmediata con alimentos, refugio y atención médica, si es elegible
- obtener información que podría ayudar con temas de violencia doméstica
- presentar una apelación si no está de acuerdo con cualquier acción tomada en su caso. Las instrucciones de apelación se encuentran en los avisos que obtiene. Si una acción está tomada en su caso y usted no recibe una notificación oficial, Contacte su oficina local de DTA para obtener el formulario de apelación e instrucciones
- revisar su caso con su trabajador.

**Tercero contactos**

Para verificar la información proporcionada, el Departamento podrá coincidir con números de Seguridad Social de todos los miembros del hogar con los archivos de

- cualquier agencia federal,
- cualquier agencia estatal, del condado o local,
- archivos informáticos de los bancos y otras instituciones financieras,
- proveedores bajo contrato con el Departamento, y
- otras organizaciones o instituciones como permitido por la ley

El departamento no necesita preguntar antes de que obtiene y utiliza la información de esas fuentes por las razones indicadas en esta sección

**Estado de extranjero**

Si te conviertes en un ciudadano de los Estados Unidos, usted puede ser elegible para beneficios federales como Supplemental ingresos de Seguridad(SSI). Generalmente necesita haber sido residente permanente por cinco años (tres años si es casado(a) con un ciudadano estadounidense) antes de que pueda ser elegible para la ciudadanía. Puede aplicar 90 días antes de que cumpla el requisito de cinco años. Usted necesitará demostrar conocimiento de idioma inglés y conocimiento de la historia de Estados Unidos a menos que usted califica para una renuncia porque tiene una discapacidad física o mental que le impida ser capaz de aprender. Generalmente tomará un año para aplicar y recibir una entrevista para la ciudadanía. Adicionales antecedentes debido al aumento de la seguridad deben significar que puede tomar más tiempo.

Es importante conseguir ayuda antes de que aplique para la ciudadanía. La oficina para los refugiados y los inmigrantes (OIR) trabaja con una red de organizaciones comunitarias que participan en un proyecto de al-entrega para la ciudadanía. Estas organizaciones ayudan para determinar elegibilidad de la ciudadanía, proporcionar ayuda con el proceso de naturalización o hacer remisiones apropiadas. Su trabajador del Departamento de vivienda y desarrollo comunitario puede proporcionarle una lista de organizaciones que pueden ayudarle a solicitar la ciudadanía.

**Acto de Americanos con Discapacidad (ADA)**

Si crees que tienes una discapacidad que interfier en exigencias de departamento o con el acceso a los programas del Departamento, usted puede tener derecho adaptaciones razonables bajo el Acto de Americanos con Discapacidad (ADA). Pídale a su trabajador para obtener más información.

El socio Director de vivienda y estabilización ha sido designado(a) para ayudar a coordinar los esfuerzos del Departamento para cumplir con regualaciones apropiadas.

Para más información sobre las normas y procedimiento de quejas del Departamento para la resolución de quejas de discriminación, comuníquese con

Associate Director of Housing Stabilization
Department of Housing and Community Development
100 Cambridge St Suite 300 , Boston, MA 02114
(617) 573-1370
This is an important document. Please contact the Massachusetts Department of Housing and Community Development at (617) 573-1106 for free language assistance.

Este documento es muy importante. Favor de comunicarse con el Departamento de Vivienda y Desarrollo de la Comunidad de Massachusetts en (617) 573-1106 para ayuda gratis con el idioma

Este é um documento importante. Entre em contato com o Departamento de Moradia e Desenvolvimento Comunitário de Massachusetts no número (617) 573-1106 para obter assistência gratuita com o idioma

Dokiman sīla a enpölàn. Tanprī kontakte Department of Housing and Community Development [Depatman Devlōpman Lojman ak Kominote] Masachousēt la nan (617) 573-1106 pou asistans gratis nan lang.

此文件為重要文件。如果您需要免費的語言翻譯幫助，請聯絡麻州住宅及社區發展部(The Massachusetts Department of Housing and Community Development)聯絡方式 (617) 573-1106。

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Это весьма важный документ. Свяжитесь с сотрудником Департамента жилищного хозяйства и общественного развития штата Массачусетс на предмет оказания бесплатной помощи по переводу на иностранный язык. ((617) 573-1106)

เอกสารสำคัญขึ้นอยู่กับการสร้างความสัมพันธ์ระหว่างการพัฒนาของเมือง Massachusets (Massachusetts Department of Housing and Community Development) ตั้งเบ: (617) 573-1106 ให้บริการเพื่อความสัมพันธ์ระหว่างประเทศได้

Đây là một tài liệu quan trọng Vui lòng liên hệ Bộ Phát Triển Nhà Ở và Công Đồng Massachusetts tại (617) 573-1106 để được hỗ trợ ngôn ngữ miễn phí

Kani waa dukumentiyoo muhim ah. Fadlan Waaxda Guryaynta iyo Horumarinta Jaaliyadda ee Massachuesets (Massachusetts Department of Housing and Community Development) kala soo xiriir (617) 573-1106 si aad u hesho gargaar xaggii luqadda oo bilaash ah

هذه وثيقة مهمة. يرجى الاتصال بـ «إدارة ماساتشوستس للإسكان والتطور الاجتماعي» بـ 617-573-1106 للمساعدة اللغوية المجانية.

Ce document est très important. Veuillez contacter le département du logement et du développement communautaire du Massachusetts («Department of Housing and Community Development ») au (617) 573-1106 afin d’obtenir une assistance linguistique gratuite

Jest to ważny dokument. Proszę skontaktować się z Massachusetts Department of Housing and Community Development pod numerem (617) 573-1106 aby uzyskać bezpłatną pomoc językową.

Il presente è un documento importante. Si prega di contattare il Dipartimento Edilizia Abitativa e Sviluppo della Comunità dello Stato del Massachusetts (Department of Housing and Community Development) al (617) 573-1106 per avere assistenza gratuita per la traduzione.
Appendices

This is an important document. Please contact the Massachusetts Department of Housing and Community Development at (617) 573-1106 for free language assistance.

To paróv éγγραφο είναι σημαντικό. Παρακαλώ εποικισθείτε με την Υπηρεσία Στέγασης και Κοινωνικής Ανάπτυξης της Μασαχουσέτης στο τηλέφωνο (617) 573-1106 για δωρεάν γλωσσική βοήθεια

Jest to ważny dokument. Proszę skontaktować się z Massachusetts Department of Housing and Community Development pod numerem (617) 573-1106 aby uzyskać bezpłatną pomoc językową.

이것은 중요한 문서입니다. 무료 언어 지원을 위해서는 (617) 573-1106 의 메사추세츠 주택 커뮤니티 개발청에 연락하십시오.

これは重要な文書です。無料の言語サービスについては、(617) 573-1106 のMassachusetts Department of Housing and Community Development（マサチューセッツ州住宅地域開発省）までご連絡ください。

Ovo je važan dokumenat. Za besplatnu pomoć vezanu za jezik, molimo vas kontaktirajte Odeljenje za stambena pitanja i razvoj lokalne zajednice države Masačuets (Massachusetts Department of Housing and Community Development) na (617) 573-1106

이미 에이프리처럼 빌 미디어와 함께 있으며 다채로운 빌딩 617-573-1106의 매사추세츠 주택 커뮤니티 개발청에 연락하시기 바랍니다.

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को यह आवश्यक दस्तावेज है जो उपयोगिता मुख्याधिकृत सहयोगी मान्यता 617-573-1106 पर मेस्स्च्यूयर्स डीपार्टमेंट के डीपार्टमेंट ऑफ़ हाउसिंग एंड कमनिटी डेवलपमेंट के संपर्क में किया जा सकता है।

And, this is an important document. Please contact the Massachusetts Department of Housing and Community Development (Massachusetts Department of Housing and Community Development) at (617) 573-1106 to obtain free language assistance.

Please contact the Massachusetts Department of Housing and Community Development (Massachusetts Department of Housing and Community Development) at (617) 573-1106 if you need language assistance.

June 2011
Department of Housing and Community Development (DHCD)
Division of Housing Stabilization (DHS)
Emergency Assistance (EA) Program

Uniform Shelter Program Rules

Rules effective January 2, 2015. Shelters are to post copies of these Uniform Rules and the effective date. These Rules apply to both congregate and scattered site shelters, and hotel placements, except as noted.\(^1\) A single incident that could be considered as an infraction of two or more of the Uniform Shelter Rules, or of one or more Uniform Shelter Rules and a rehousing plan violation under 760 CMR 67.06 (5) (a) 3. or a threat to health and safety under 760 CMR 67.06 (5) (a) 3. or 760 CMR 67.06(6)(a)1, will be counted as only one infraction.\(^2\)

Guiding Principles

• Humane and dignified treatment of families, including maintaining some degree of privacy

• Health and safety of guests, staff, and community

• Preservation of families’ autonomy and promotion of independent living/self-sufficiency

• Successful shelter management and program administration

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\(^1\) Note that, unless otherwise indicated, all references to shelters and shelter staff in these Uniform Rules shall apply to DHCD staff or their designees in hotel placements. As used in these Uniform Shelter Program Rules, “hotel” refers to hotels and motels and “shelter,” if not more specifically defined, means congregate and scattered site shelters. All references to the Associate Director or an Assistant Director shall be to the Associate Director and Assistant Directors of DHS.

\(^2\) If a single incident might qualify as both a Uniform Shelter Rule violation and a threat to health and safety under 760 CMR 67.06 (5) (a) 5. or 760 CMR 67.06(a)1., both violations should be checked on the Request for Noncompliance sent to DHCD by the shelter or hotel. In such cases, DHCD, shall take into account any de minimis or good cause defenses applicable to the Uniform Shelter Rule violation when it considers whether the incident constituted a threat to health and safety. If a single incident might qualify as both a Uniform Shelter Rule violation and a rehousing plan violation under 760 CMR 67.06 (5) (a) 3., both violations should be checked on the Request for Noncompliance sent to DHCD by the shelter or hotel. In such cases, if the violation involves issues addressed in the Rule on DHCD Requirements, such as attendance at scheduled meetings, the provisions of the Rule shall also apply to the alleged violation of the Regulation. If a single incident might qualify as both a Uniform Shelter Rule violation or a threat to health and safety under 760 CMR 67.06(5)(a)5. or 760 CMR 67.06(6)(a)1, both violations should be checked on the Noncompliance Notice sent to DHCD by the shelter or hotel and DHCD shall provide the participant an opportunity to respond prior to issuing a Notice of Noncompliance and shall take into account any good cause or de minimis defenses in any corresponding rule.
Access to Units/Searches

Rooms and/or units in congregate shelters, scattered site shelters, and hotels may be checked for cleanliness and health or safety hazards with at least 24 hours’ written notice or on a regular basis, provided that written notice of the regular inspection schedule is provided to EA Households at least 24 hours in advance of the first regular inspection and that any such regular inspections be scheduled for a time before 8:00 p.m. Notice of inspections shall include a period not greater than 3-hours during with any such inspection shall be conducted. In addition, staff has immediate 24 hour access without prior notice to all EA units, including but not limited to hotel rooms, (1) in cases of emergencies; and (2) for purposes of inspections by government agencies charged with enforcing building codes, sanitary codes, fire codes, or health codes. Emergencies shall include, but not be limited to, health emergencies and facility-related emergencies such as fires, water leaks, and insect infestations.

EA units, including hotel rooms, shall be made available upon 24 hours’ written notice for routine maintenance within a 3-hour window of time included in the notice, or at any other time mutually agreed to. In hotels, rooms shall be made available every day for regular housekeeping by hotel housekeeping staff during prescheduled daytime hours within a 3-hour window of time provided in writing in advance to the EA participants staying at the hotel and available at the hotel front desk, or at any other time mutually agreed to, except in cases where arrangements have been made for an EA Household to clean its own room due to disability and, in such cases, the room shall be made available upon 24 hours’ written notice for inspection for cleanliness. Refusal of room cleaning due to an illness is also permissible, but not for more than three consecutive days.

In addition, shelter staff, hotel staff, DHCD employees, and employees of DHCD contractors and other state agencies working with DHCD shall have immediate access to all shelter units, including hotel rooms in which EA participants are placed, in all cases in which (1) they have a reasonable, articulable suspicion that a member of an EA household is currently committing a crime; is currently smoking, cooking with an unauthorized appliance, or entertaining unauthorized visitors; or is currently involved in conduct that constitutes a disturbance to the quiet enjoyment of the other EA participants or hotel guests or a threat to the health or safety of the participant, members of his/her household, other EA participants in the shelter or hotel, residents of the building in which a scattered site unit is located, or guests/staff of the shelter or hotel, DHCD employees, or employees of DHCD contractors and other state agencies working with DHCD, and (2) the suspected conduct cannot be remediated by a visit to the unit involving only a knock on the door and a request to talk to those inside.

In all cases where access, including immediate access and regular hotel housekeeping, is warranted, shelter staff, hotel staff, DHCD employees, and employees of DHCD contractors or other state or local agencies working with DHCD shall knock on the entry door, announce their intent to enter, and give the resident an opportunity to open the door before entering. Except where immediate access is authorized by this rule, shelter staff, hotel staff, DHCD employees, and employees of DHCD contractors and other state agencies working with DHCD shall have access to units only after 24-hours advance written notice of an intended visit within a 3-hour time frame.

Any doors within a hotel or shelter unit, including closet doors, may be opened during routine inspections and emergencies. Personal belongings in closets or drawers shall not be disturbed, except as
permitted by this rule, and shall be left in an orderly state after any permitted inspection. Personal belongings in closets or drawers may be inspected, but only upon reasonable, articulable suspicion of the presence of criminal activity, substances prohibited by these rules, or the use of prohibited heating or cooking equipment. Evidence obtained without a written reason for the searching of drawers provided to a member of the EA Household before the search may not be introduced into evidence in a DHCD noncompliance or termination hearing. If a search of drawers is to be made upon reasonable suspicion and an EA Household member is present, the written reason for the search will be provided to the Household member before the search. If no EA Household member is present during such a search, the written reason will be left in the room.

Except to the extent provided in this rule, shelter staff are not permitted to search personal belongings of EA households. Shelter staff, may, however, call the police at their discretion if they have a reasonable and articulable suspicion that a member of an EA Household or a visitor is engaged in criminal activity, has a weapon on the premises, or otherwise poses threat to the health or safety of shelter residents or staff. In the above circumstances, when shelter staff determines that an immediate threat to the health or safety of shelter residents or staff exists, or the destruction of evidence is imminent, the senior shelter staff person on the premises at the time may search the unit him/herself, if able to do so consistent with safety concerns, or may consent to the police conducting a search of any unit. Such senior shelter staff person may also consent to the search of a unit by police when such person has a reasonable suspicion that such a search will produce any item (1) that is likely to cause serious and immediate harm or to be used for criminal purposes (including, but not limited to, a firearm), and (2) which staff may not legally possess. In any circumstance outlined above, when shelter staff call the police, they may also restrict access to the unit by the EA Household until the police arrive and, after the arrival of the police, to the extent requested by police.

Babysitting/Child Care

This rule applies only to on-site babysitting or child care at shelter. Offsite babysitting or child care is not covered by this rule, and is permitted so long as it is not inconsistent with an EA Household’s rehousing plan.

Within two (2) days of initial placement, each EA Household will be provided with a copy of the form to request babysitting.

An adult or a child who is age 16 or over and, in a hotel, is also resident in the same hotel, is permitted with authorization or good cause as determined by 760 CMR 67.06(6)(a)5 to provide child care for children in another EA Household.

A child age 14 or over may care for himself/herself or a younger member of the same EA household with authorization or good cause as determined by 760 CMR 67.06(6)(a)5. If the babysitter (or child authorized to care for him/herself) is less than 16 years old, any babysitting or self-care must take place in the unit assigned to the EA Household or when the babysitter is accompanying younger siblings to and from an on-site pick-up/drop-off location to meet transportation to school, school-related activities, medical appointments, authorized visitation with family members, or other appointments relating to health, safety, or welfare. If a babysitter or a child caring for him- or herself is under the age of 18, an
adult member of the household for the children being cared for or caring for him- or herself shall be (i) on the premises and within the sound of the child’s voice or (ii) promptly reachable by the babysitter or the children by telephone and able to return promptly in case of emergency.

Approved arrangements may either be for a single occasion or for ongoing/long term arrangements. Babysitting overnight will not be allowed unless approved for the reasons that permit a late return to shelter after curfew or for good cause as determined by 760 CMR 67.06 (6) (a) 5.

In a shelter, the babysitter must be (i) approved by shelter staff and (ii) subject to the DHCD Babysitting Guidelines, including a written babysitting agreement on a standard DHCD form to be signed by the head of the EA Household, the babysitter, and shelter staff.

In hotels, families may complete the babysitting request form at the hotel front desk and the hotel will immediately fax the form to the appropriate designee of the Associate Director (and provide verification to the EA household of having done so) who shall approve babysitting/child care arrangements in the place of shelter staff. Information about who the Associate Director’s designee is and how to contact him/her shall be available to all participants at the front desk of each hotel. The Associate Director’s designee shall respond to the request of a participant placed in a hotel for approval of a babysitter within two business days of the request. If a response is not received within two business days or prior to the needed time for babysitting when the need arose in less than two business days prior to the time for the proposed babysitting, the proposed babysitting arrangement may proceed pending a response, but a request made with less than two business days’ notice should include good reasons why the babysitting request was not made at least two days in advance and the request may be denied within two business days of the date of the request. Participants who proceed with babysitting without express advance approval do so with the understanding that the arrangement may not be approved. In considering babysitting requests, including in such cases of after the fact review, approval will not be denied without stated good reasons. Participants in hotels must use a babysitter who is also an EA participant placed in the same hotel as the EA Household receiving the babysitting services. The Associate Director’s designee or shelter staff may deny permission for babysitting services for good reasons, taking into account the EA Household’s needs, as determined by the Associate Director’s designee or shelter staff, including the health, safety, welfare, and appropriate supervision of the children, and history of disturbance to other EA Households. The decision of the Associate Director’s designee or shelter staff on this basis may be informed by past noncompliance with material rules. In any administrative appeal of a noncompliance or termination based on unauthorized babysitting or child care, DHCD’s failure to approve requested babysitting or child care can be reviewed for reasons stated in M.G.L. c. 30A, § 14 (7), including but not limited to, for abuse of discretion.

Except in cases of good cause, as determined in accordance with the good cause standards in 760 CMR 67.06(6)(a)5, babysitting is allowed only in accordance with this Rule and for the time approved. In determining whether good cause as determined in in 760 CMR 67.06(6)(a)5 exists, DHCD will take into consideration all the circumstances including the age of the child(ren) and the length of time of unauthorized babysitting, the length of time that the babysitting exceeds the approved time period, and the extent to which the unauthorized babysitting threatens or adversely affects the health, safety, and welfare of the child(ren). Unless it is repetitive, a violation of this Rule that is de minimis (minor), as determined based on all the relevant circumstances, as to time, location, age of the child and risk to the

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child, will not be counted toward a noncompliance or termination.

An approved babysitter is required to comply with all the regulations of the program and the Uniform Shelter Program and DHCD-established hotel rules during the time that he or she is caring for the child(ren). The babysitter is subject to EA discipline to the same extent that the child(ren)’s parent would be if he or she fails appropriately to supervise or provide for the health and safety of the child(ren).

Any babysitting arrangement shall comply with the Rule on Curfew, except as otherwise approved or for good cause under the good cause standards in 760 CMR 67.06 (6) (a) 5. Absent approved special circumstances described in the Rule on Curfew applicable when a child’s parent is authorized to return after curfew, or good cause as described above, a babysitter shall not care for a child after curfew or before 6:00 a.m. Unless it is repetitive, a violation of this Rule that is \textit{de minimis} (minor), as determined based on all the relevant circumstances, as to time, location, age of the child and risk to the child, will not be counted toward a noncompliance or termination. Approval for babysitting after curfew or before 6 a.m. should be specifically requested on the standard DHCD form Babysitting Agreement indicating why post-curfew or pre-6 a.m. babysitting is necessary.

\textbf{Care of Children}

The adult members of an EA Household and any teenage parent(s) of a child in an EA Household are responsible for providing for the health, safety, and welfare of any child/children in the EA unit (e.g. compliance with school attendance, ensuring children are properly fed and rested). This responsibility is in no way diminished when an EA Household is off-site, e.g. on an approved overnight, or because the EA Household complies with other shelter rules, such as curfews. Unless it is repetitive, a violation of this Rule that is \textit{de minimis} (minor), as determined based on all the relevant circumstances, as to time, location, age of the child and risk to the child, will not be counted toward a noncompliance or termination.

\textbf{Child Left Unattended}

\textbf{Warning: The Department considers a child to be alone and unattended if a child is even briefly out of the sight, hearing, or immediate control of a caretaker adult or authorized babysitter.}

Children in the EA household shall not be left alone and unattended on shelter or hotel property, except if authorized to provide their own babysitting under the Rule on Babysitting, or visiting in common areas to the extent permitted by the Rule on Visitors/Guests, or justified by good cause as determined under the good cause standards in 760 CMR 67.06(6)(a)5. A child authorized to provide his or her own babysitting shall be covered by the Rule on Babysitting/Childcare. In considering the good cause reasons raised by a participant for leaving a child unattended, DHCD will take into consideration all the circumstances including the age of the child(ren) and the length of time that the child(ren) is (are) unattended. Unless a violation is repetitive, a \textit{de minimis} (minor) violations of this Rule, as determined based on all the relevant circumstances, as to time, location, age of the child, and risk to the child, will not be counted toward a noncompliance or termination.
Curfew

The EA household shall comply with any curfew imposed by the shelter or hotel, in which case the curfew for arrival on premises shall not be earlier than 9:00pm on weekdays (Sunday – Thursday evenings) and 11:00pm weekends (Friday & Saturday evenings) and shall not be later than 11:00pm (Sunday – Thursday evenings) and 1:00am (Friday & Saturday evenings). Shelters are not required to alter their program or meal schedules due to curfews.

A shelter or hotel may impose a quiet time to commence not more than one hour before the curfew time. A shelter or hotel may impose an in-room curfew for EA household members to remain in their assigned rooms, to commence one hour after the curfew for arrival on premises. Exceptions to the in-room curfew shall be made for reasonable health, safety, and welfare needs, if the EA participant provides a good reason to shelter or hotel staff for attending to such needs after in-room curfew hours, which shall include late return from work or education.

In-room curfew shall end at not later than 6:00am.

Any curfews must be adjusted on a case-by-case basis for the EA Household’s work or school schedule, for other rehousing plan obligations, and to accommodate disabilities or other good cause reasons as determined by 760 CMR 67.06(6)(a)5.

Special exceptions to curfew requirements may be permitted by shelter or hotel staff or by the Associate Director’s designee on a case-by-case basis, for good cause only, such as scheduled sports, school, church, medical appointments, and community activities or other similar good reasons.

A request for an adjustment to curfew may be made either to shelter staff or to the Associate Director’s designee, whose contact information shall be available at each shelter and hotel. If a request for adjustment of curfew is made two business days prior to the date for which the adjustment is needed, the request will be deemed approved unless expressly denied.

Compliance with curfew times does not relieve EA Household members of responsibility for fulfilling their shelter assignments and providing for the health, safety, and welfare of children in the EA Household.

Arriving late for curfew without prior authorization may be justified by good cause as determined under the good cause standards in 760 CMR 67.06(6)(a)5. In considering the good cause reasons raised by a participant for arriving late for curfew, DHCD will take into consideration all the circumstances, including the amount of lateness, any self-reporting of the lateness as an indication of responsibility, and the actual or potential effect of the late return on the health, safety, and welfare of the child(ren). Unless it is repetitive, a violation of this Rule that is de minimis (minor), as determined based on all the relevant circumstances, as to time and location will not be counted toward a noncompliance or termination.
Damage to Property and Expenses

The EA Household members may not damage shelter or hotel property or take shelter or hotel property, other than property meant for consumption, without good cause as determined in accordance with 760 CMR 67.06 (6) (a) 5. Normal wear and tear shall not be considered damage. Unless the damage is caused intentionally, recklessly or repeatedly, an EA Household that is in compliance with a reasonable payment plan to reimburse the cost of replacement or repair within one year shall have its noncompliance held in abeyance until repayment is made in full, provided that all payments are made timely. If repayment in full is made timely in accordance with the repayment plan, the noncompliance shall be rescinded.

The EA Household must pay all costs for extra items available and not included in the standard benefits for the shelter or hotel. This may include phone calls from shelter or hotel lines or movie rentals. EA residents shall not be charged for phone calls or other costs at a hotel if a self-paying guest would not be charged for such services. The shelter or hotel will tell the EA Household in advance in writing what activities will incur charges. Hotels and shelters will allow an EA Household who does not have access to a cell phone to use an office or other designated phone without charge to make phone calls in an emergency or other compelling circumstance, such as contacting a rehousing worker or inquiring about permission for overnights or babysitting authorization.

Absent good cause as set forth in 760 CMR 67.06(6)(a) 5, the EA Household must pay for any shelter or hotel property missing from a unit because of the conduct of the EA Household or any damage done by any member of an EA Household or its guests beyond normal wear and tear. This may include extra cleaning expenses if a unit is left in a particularly dirty or unsanitary condition. Payments must be made within a reasonable time after the EA Household is notified of the bill for such costs, but any repayment plan must be reasonable taking into account the Household’s available income and expenses and shall be incorporated into the rehousing plans of the adult members of the EA Household. Disputed charges and the reasonableness of any repayment plan are subject to appeal to the DHCD Division of Hearings in the context of an administrative appeal of a noncompliance or termination for a rule violation. Unless it is repetitive, a violation of this Rule that is de minimis (minor), as determined based on all the relevant circumstances, as to time, location, or amount will not be counted toward a noncompliance or termination.

DHCD Requirements Including Required Appointments

The EA Household shall comply with all applicable DHCD requirements, including those listed in the rehousing plan (i.e. savings, housing search, job search), or, in the absence of a rehousing plan, the minimum requirements of a rehousing plan as listed in 760 CMR 67.06(4)(b) after oral and written notice to the adult members of the EA Household as to what those requirements are and how they should be met by the EA Household.

An EA Household is expected to attend all meetings scheduled by shelter staff, DHCD staff, and DHCD contractors providing social welfare services to EA participants. At least two business days’ advance written notice should be provided to the EA Household unless such meeting is part of a series of regularly scheduled meetings covered by a single notice, in which case two business days’ notice of the
first meeting is sufficient. The written notice will provide a telephone and facsimile number where the person requesting the meeting can be contacted by the EA participant in case of emergency or other good cause reason. A participant who calls, texts or sends a facsimile requesting to reschedule at least two hours before the meeting, provided that the participant has been given the telephone number of the relevant case worker, shall not be found in violation of this Rule or in violation of the Regulation governing cooperation with rehousing plans. If the staff or provider who scheduled the meeting is more than 15 minutes late, the participant shall not be found in violation of this Rule or 760 CMR 67.06(5)(a)3 for not remaining.

An EA Household is expected to arrive at a reasonable hour at the shelter or hotel on the day that the EA Household is placed. If the EA Household agrees to be transported by DHCD, the EA Household shall report when and where instructed to obtain transportation except for good cause reasons If the EA Household requests to arrive at the placement by their own transportation, they shall arrive no later than 8 p.m. at a congregate shelter or hotel without authorization from the Regional Associate Director or his/her designee, and they shall arrive not later than 5 p.m. at the shelter provider’s offices for a scattered site unit if the placement is provided to them before 2:00 p.m., unless the shelter provider informs of a different time or place or for good cause reasons. If the EA Household does not arrive at the shelter or hotel timely without good cause or authorization, the room may be cancelled. Placement notices shall provide a working contact number at the shelter or hotel or at DHCD that a Household can call to report the need for a later arrival time for good cause reasons.

EA Households placed in hotels are expected to call the hotel or report in person to the front desk at 1 p.m. each afternoon to find out whether the EA Household will be moved to a shelter or to leave a phone number at the hotel where the EA Household can be reached to be informed of any transfer.

Good cause for noncompliance with this Rule will be determined subject to the good cause standards in 760 CMR 67.06(6)(a)5. Unless it is repetitive, a violation of this Rule that is de minimis (minor), as determined based on all the relevant circumstances, as to time and location will not be counted toward a noncompliance or termination.

**Disturbance of Quiet Enjoyment**

The EA Household members shall not engage in unreasonable conduct that has the effect of seriously and materially disturbing the quiet enjoyment of other EA participants, other residents in scattered site apartment buildings, or other hotel guests without good cause as determined in accordance with 760 CMR 67.06 (6) (a) 5. Conduct that is considered unreasonable shall not include activities of daily living, such as laughing, crying, conversing, listening to television, radio, or music, talking on the telephone, children engaging in ordinary play activities, or doing laundry during reasonable hours (if posted), unless the conduct continues to be engaged in at an exceptional volume level after clear notice that such conduct is disturbing another EA Household, resident, or guest. A serious and material disturbance of quiet enjoyment shall not include annoyances that are inherent in a congregate living setting. The availability of play space at or near a placement shall be considered in determining whether a child’s conduct will be treated as a disturbance of quiet enjoyment.
Drug Testing

Drug testing, including urine screens and blood and breathalyzer tests, shall not be conducted at random or across the board; however, the EA Household shall comply with any staff request for drug testing made after staff has formed an individualized and reasonable suspicion that an EA household member is abusing controlled substances. Any such testing shall be performed at the expense of the shelter.

Fire Safety & Smoking

Smoking is prohibited inside any shelter unit or building.

Removal of smoke or carbon monoxide detectors, or the batteries within them, is prohibited.

Shelters shall designate and inform residents of unenclosed outdoor area(s) where smoking is permitted. Unless it is repetitive, a violation of this Rule in regard to the designated smoking area that is *de minimis* (minor), as determined based on all the relevant circumstances, as to location, will not be counted toward a noncompliance or termination.

All EA Household members shall maintain their living areas free from fire hazards. Apart from smoking in designated outdoor areas, use of any flames or flammable materials, including but not limited to lighters, matches, candles, incense, firecrackers, gas or charcoal grills, is prohibited anywhere on shelter property, except with the expressed consent of shelter staff (e.g. candles for birthday parties, shelter-provided outdoor grills, lighting the stove when pilots go out.)

In shelters, hot plates and other cooking appliances are permitted only in kitchens or shelter-designated cooking areas with the permission of the shelter. In hotels, hot plates and other cooking appliances are prohibited unless supplied by the hotel. Hot plates and other cooking appliances that are found in a placement contrary to this Rule may be confiscated, but may be the basis of discipline only if there is evidence that the appliance has been used at the hotel.

Harassing or Threatening Language

No member of an EA Household may (1) verbally harass or (2) use threatening language towards other residents or guests, service providers, or DHCD, hotel, or shelter staff. Good cause for violation of this Rule may be found to exist if a member of an EA household responded proportionately to unwarranted provocation by shelter or hotel staff.

Illegal Activity

Any activity that is illegal under local, state, or federal law is prohibited on or in the immediate vicinity of shelter property.
Legal Issues

A member of the EA Household may be cited for a rule violation if the individual has an outstanding default or arrest warrant whether issued within the Commonwealth or otherwise which the individual has been made aware of by DHCD, which is required to be resolved as a term of a rehousing plan, and which has not been resolved within 30 days of such notice.

Resolution of legal issues shall be incorporated into the rehousing plan. In support of this requirement, the EA Household shall provide the shelter staff and DHCD staff with information regarding warrants, restraining orders – for which the individual is either a plaintiff or defendant – and any other court orders or pending legal matters such as probation, child support obligations, or court appearances. An EA Household member shall be considered to have good cause for failure to resolve an outstanding warrant if he or she provides a letter on attorney letterhead, signed by an attorney, including the attorney’s Board of Bar Overseers number, indicating that it is the attorney’s professional opinion as a matter of law that the EA Household should not resolve the outstanding warrants.

Overnights

EA Households are expected to stay at the homeless shelter or hotel every night unless an overnight is authorized or there is a good cause reason. EA Households may take a total of four authorized nights (overnights) out of a homeless shelter or hotel per month, as an entire household. Individual household members may also take overnights away from placement as detailed below.

In a congregate or scattered site shelter, an EA Household’s request for an overnight away from homeless shelter, whether for the entire household or an individual household member, should be made to the homeless shelter staff. In a hotel, a request for an overnight by an EA Household or an individual household member should be made through the hotel staff to the Associate Director’s designee on a standard DHCD form. Hotel staff shall promptly forward such request to the designee and provide confirmation of having done so to the EA household. Information about who is the Associate Director’s designee and how to reach him/her shall be available to participants at the front desk of each hotel. An EA Household in a hotel that takes no more than 4 overnights per month after having requested authorization at least two business days in advance, or later for good cause reasons when the need for the overnight arose later, shall not be found to have violated this rule unless the household received notice from the Associate Director’s designee prior to taking the overnight that the request for an overnight was denied.

Requests for overnights for which the need arises when the EA Household is away from the hotel or shelter may be made by calling shelter staff or hotel staff and providing a written explanation promptly upon return explaining why the request could not have been made earlier. In such cases, hotel staff will promptly send a written request to appropriate DHCD personnel on behalf of the EA Household.

An overnight request should be made at least two business days in advance of the requested overnight. A request that is made but not responded to within 2 business days shall be deemed approved. An overnight request made for good reasons with less than two business days’ notice should include the reasons why the overnight request was not made at least two days in advance and the request may be
denied within two business days of the date of the request. Participants who proceed with an overnight without express advance approval do so with the understanding that the overnight may not be approved. In considering overnight requests, including in such cases of after-the-fact review, approval will not be denied without stated good reasons. There shall be a presumption for approval for up to four overnights per month as allowed by these Rules. In any administrative appeal of a noncompliance or termination based on unauthorized household overnights, DHCD’s failure to approve a requested overnight can be reviewed for reasons stated in M.G.L. c. 30A, § 14 (7), including but not limited to, for abuse of discretion.

Absences by individual EA Household members from a homeless shelter or hotel for more than 2 consecutive nights are not permitted, except when explicitly allowed by DHCD for good reasons (e.g., children attending summer camp, custody agreements, hospitalizations) or for good cause as determined under the good cause standards in 760 CMR 67.06(6)(a)5. In a shelter, such requests should be made to the Associate Director’s designee through the shelter staff on a standard DHCD form. In a hotel, such requests should be made either directly to the Associate Director’s designee or through the hotel staff on a standard DHCD form. A written request for approval that is made but not responded to within 2 business days shall be deemed approved. Unless it is repetitive, a violation of this Rule that is de minimis (minor), as determined based on all the relevant circumstances, as to time and location will not be counted toward a noncompliance or termination.

In any administrative appeal of a noncompliance or termination based on unauthorized individual overnights, DHCD’s failure to approve a requested overnight can be reviewed for reasons stated in M.G.L. c. 30A, § 14 (7), including but not limited to, for abuse of discretion.

Congregate or scattered site shelters may withhold approval of overnights in connection with the EA Household’s failure to observe program rules and requirements. Requests by an entire household for five or more overnights in a row should be made on the Form TESI-1.

All requests to DHCD for additional overnights pursuant to this rule should be directed to the applicable the Associate Director’s designee. Hotel staff should assist families in sending such requests to the Associate Director’s designee and contact information for the Associate Director’s designee shall be available at the front desk of each hotel.

Unauthorized overnights shall not form the basis for a rule violation, noncompliance or termination if there was good cause for the absence pursuant to the good cause standards in 760 CMR 67.06(6)(a)5. In considering the good cause reasons raised by a participant for an unauthorized overnight, DHCD will take into consideration all the circumstances, including documented efforts to obtain approval for an overnight, and the number of overnights during the relevant time period.

A family will not be locked out of a hotel or shelter for alleged abandonment unless the entire family is absent for at least 48 hours and two consecutive nights and has not called the hotel or shelter or the Associate Director’s designee before curfew on the day after the absence began to explain any good cause reasons for being absent longer than two consecutive nights. The Department may request timely verification of any asserted good cause reasons and issue a notice of termination if verification is not
timely provided. In any case where a unit is no longer available to an EA Household because of unauthorized overnights, if the participant returns to the placement seeking reentry, the shelter or hotel management will inform the participant of the possibility of obtaining a new placement pending administrative appeal pursuant to 760 CMR 67.09 (2) (b) 3. by returning to a DHCD office during business hours. In such cases, the shelter or hotel management shall notify DHCD of the date and time that the participant returned.

**Personal Belongings and Cleanliness of Room**

An EA Household may not bring more than the equivalent of two large (30-gallon) bags full of personal belongings per person with them into shelter, including scattered site and hotel settings. Households who arrive with more than the allowed amount of possessions, up to one more large (30-gallon) bag per person, and do not immediately have a place to store the excess items will be provided advice about possible storage options and given seven calendar days, or for good cause as determined in 760 CMR 67. 06(6)(a)5 and upon receipt of express written permission from the Associate Director’s designee, a longer reasonable period of time (taking into account all the circumstances) to move out the excessive items. If a hotel or shelter fails to provide sufficient storage units to store the permitted volumetric amount of personal belongings, the Household may provide its own storage unit(s) upon written authorization by the Associate Director’s designee. Storage of any personal belongings or items, including storage units and excess personal belongings during the first seven days in shelter, is contingent upon compliance with all applicable state and local Sanitary and Fire Codes. Unless it is repetitive, a violation of this Rule that is *de minimis* (minor), as determined based on all the relevant circumstances, as to volumetric amount will not be counted toward a noncompliance or termination.

Participants are expected to keep their rooms in a clean, sanitary, and orderly manner, but an EA Household will not be cited for violating this Rule if inspection is not made pursuant to the Rule on Access or if the Household has good cause on the day of the inspection as determined by 760 CMR 67. 06(6)(a)5, or if a family member is sick, in the process of doing or preparing to do laundry, or packing or unpacking belongings.

The EA Household is responsible for removing all belongings upon moving out of the shelter.

The EA Household that is transferring or moving out of shelter or hotel unit may leave at the shelter or hotel, at most, a few items of personal significance, cleanly packed, able to be readily stored in a small area outside the dwelling space to await the prompt return of the EA Household to move the items to their next residence.

After an EA Household has vacated the unit, any items not removed from congregate or scattered site locations will be bagged and held for 48 hours before they are donated or thrown away. Shelters and hotels may hold items for more than 48 hours at their discretion or upon agreement with the EA Household.

**Pets**

Pets or animals of any kind are not permitted on shelter property at any time, except for documented service animals and other animals permitted pursuant to the Americans with Disabilities Act. This
prohibition includes temporary care of and/or visiting pets. A family will not be cited for violating this rule unless and until an appropriate inquiry has been made as to whether the animal is an animal permitted as a disability accommodation. Where an animal is determined not to be allowed as an accommodation, DHCD will provide a list of local animal rescue organizations and “no kill” shelters where a family might board the pet during shelter placement or take the pet for adoption.

**Prescription Medication**

The EA Household is responsible for the storage and administration of prescribed medications, subject to good cause as determined under the good cause standards in 760 CMR 67.06(6)(a)5.

If a working safe is available in an EA Household’s room in a hotel for storage of prescription medications, the EA Household shall store such medications in the safe. If no working safe for use in the EA Household’s room is available, the adult household members shall make best efforts to ensure that prescription medications are out of the reach of children. In shelters, if there is not a safe and secure area, out of the reach of children, and away from cleaning fluids and toxic substances, then the EA Household may request assistance from shelter staff of congregate and scattered site locations with safe and secure storage.

Unless it is repetitive, a violation of this Rule that is *de minimis* (minor), as determined based on all the relevant circumstances, as to time or location will not be counted toward a noncompliance or termination.

**Sexual Harassment**

Sexual harassment of anyone on shelter property, including other residents, guests, service providers, or shelter staff, is prohibited.

**Substance Abuse**

Use or possession of alcohol or any controlled substance(s) is prohibited on shelter property. Abuse of alcohol or controlled substances outside of the program, to the extent that it results in behavior that interferes with an EA Household member’s rehousing plan, threatens the health or safety of anyone on shelter property, or creates a disruption to shelter management, is prohibited.

Misuse of prescription medication will be considered substance abuse.

**Violent Behavior & Child Abuse and Neglect**

Behavior that poses a threat to the health and safety of self, members of the EA Household, other residents, guests, service providers, or DHCD, hotel, or shelter staff is prohibited. This includes acts of physical and sexual violence, threatening conduct, or intimidation.

No form of child abuse or physical discipline will be tolerated on shelter property. Shelter staff, DCHD employees and other service providers must report all incidents of child abuse and neglect to the Department of Children and Families.
Visitors/Guests

**In Shelters:**
The EA Household may meet with visitors, for a reasonable and limited amount of time, in space(s) where the shelter deems appropriate, (e.g. areas where an individual would meet with a service provider). Shelters may determine appropriate visiting hours.
The EA Household is responsible for the conduct of its visitor(s), and therefore will be held accountable if its visitor(s) violate(s) any rules or requirements of the EA program or the shelter. No overnight visitors are permitted, except as provided in this Rule. If space is available in a shelter, shelter staff, with DHCD authorization, may agree to overnight visits by children whose primary residence is not within the EA household, upon presentation of a custody agreement, an agreement or request by DCF, or a court order directed to an adult member of the EA household.

All requests to DHCD for overnight visitors should be directed through the Associate Director’s designee.

The EA Household must provide the name of the visitor at least 24 hours beforehand unless the shelter deems less notice appropriate, or in the case of emergencies.

Adult visitors must leave a photo ID, and sign in and out of the shelter. Visitors to scattered site units do not need to provide a photo ID unless shelter staff is available on the premises; however, the EA Household must still register all visitors to shelter staff.

Shelters may withhold approval of visitors in connection with the EA Household’s failure to observe program rules and requirements.

**In Hotels:**
No visitors are permitted in hotel rooms assigned to an EA household, except authorized service providers or members of another EA Household as permitted by this Rule. Visitors are permitted in common areas of hotels as permitted by hotel management on terms equal to those applied to non-EA hotel guests whether or not the hotel currently has such guests. It shall not be a violation of the no visitors or no guests rule for someone solely to assist an EA household member in delivering or removing possessions from the household’s room with prior notice to hotel staff.

An EA household placed in a hotel may have the members of other EA households placed in the same hotel as visitors in its unit for a reasonable and limited amount of time, provided that there may be no more than 6 EA participants in a hotel room at any one time, except in cases when the family size exceeds 6 individuals. When the family size exceeds 6 members, family members in excess of 6 individuals may be in the unit, but guests may be in the room only if there are a total of 6 or fewer individuals in the room at the time.

Absent allowed babysitting arrangements, children under the age of 16 may only visit while accompanied by an adult member of their household or when an adult member of their household is on the premises and promptly reachable by the other EA household or the children by telephone or is within the sound of the child’s voice.
If space is available in a hotel room, the Associate Director’s designee may authorize overnight visits by children whose primary residence is not within the EA household, upon presentation of a custody agreement, an agreement or request by DCF, or a court order directed to an adult member of the EA household.

Visitors shall fully comply with all EA program rules and regulations while visiting the EA Household.

A child age 16 or older may visit with members of other EA households placed at the same hotel in common areas of the hotel unaccompanied by an adult if s/he has been approved to provide his/her own child care or if an adult member of that child’s household is present on the grounds of the hotel and is promptly reachable by telephone or is within the sound of the child’s voice.

Adult members of the EA household remain responsible for protecting the health and safety of the child(ren) in their household and must exercise good judgment about when it is safe to allow their child(ren) to visit with members of other EA households.

In hotels, the Associate Director’s designee, upon written request submitted by hotel staff with a copy to the EA household, may exercise reasonable discretion to deny visitation to an individual EA Household either as guests or hosts, based on prior violations of these Rules. Any denial of visitation should be for a reasonable time based on the nature of the conduct, and shall include a written statement of the reason for the denial. Whether the exercise of such discretion to deny visitation was reasonably exercised may be challenged in an administrative appeal from a noncompliance or termination based on a violation of this Rule.

Hotel staff, DHCD employees, and employees of DHCD contractors and other state agencies working with DHCD may terminate a visit if: (a) activities in the host unit are disturbing the quiet enjoyment of other hotel guests or hotel staff; (b) activities in the host unit constitute a threat to the health or safety of the host, the guest, members of either household, other EA participants placed in the hotel, other hotel guests, hotel staff, DHCD employees, or employees of DHCD contractors or other state agencies working with DHCD; or (c) there is any infraction of the EA rules or regulations occurring in the host unit.

Visitors shall comply with Rule on Curfew by leaving before the established curfew time and not arriving before 8 a.m., except in cases of authorized babysitting or good cause pursuant to the good cause standards in 760 CMR 67.06(6)(a)5.

**Good Cause:**

Entertaining unauthorized visitors may be justified by good cause as determined under the good cause standards in 760 CMR 67.06(6)(a)5. In considering the good cause reasons raised by a participant for entertaining an unauthorized visitor, DHCD will take into consideration all the circumstances, including documented efforts to obtain authorization for the visitor, and any need for the visitor to assist the EA Household with essential tasks that an EA Household member cannot perform on his or her own. Unless it is repetitive, a violation of this Rule that is *de minimis* (minor), as determined based on all the relevant circumstances, as to time and location, will not be counted toward a noncompliance or termination.
Weapons

Possession or storage of weapons of any kind is prohibited on shelter property.

Important:

House Rules:
Nothing in these Uniform Rules prohibits shelters or hotels from adopting House Rules regarding day-to-day activities in shelter, such as cleaning rotations, cooking duties, noise levels, television viewing hours, dress codes, laundry hours, or parking requirements, so long as the House Rules do not contradict these Uniform Rules, EA statutes or regulations, or other legal requirements. Infractions of House Rules of either a shelter or hotel, however, shall not be treated as rule violations leading to a possible noncompliance finding or termination of EA benefits pursuant to 760 CMR 67.06(5)(a)4. Infractions of House Rules may lead to a transfer, internal warnings, or loss of house privileges, such as television time, and repeated infractions may lead to modification of an EA Household’s Rehousing Plan to require compliance with specific House Rules. House Rules remain subject to DHCD review and approval.

Rules Violations Not Counted towards Discipline:
As stated in greater detail in 760 CMR 67.05 (e), alleged Rules violations, and alleged failures to comply with or cooperate in developing the terms of a rehousing plan, shall be vacated after six (6) months from the date of their occurrence if, within the six-month period, no noncompliance or termination has been issued for other violations of any such Rules or rehousing plan requirements and no conduct that constitutes a threat to health or safety or conduct warranting immediate termination has been committed and resulted in a noncompliance or termination notice. Rules violations that are found by the DHCD Hearing Officer on appeal not to have occurred shall not be included as violations in subsequent noncompliance or termination notices and shall not toll the aforementioned six-month period.

Use of Forms:
Homeless coordinators should provide EA Households with a copy of the Uniform Shelter Program Rules to take with them at the time the EA Household is approved for placement. Shelters are to use the USR-1 Form, Infraction of Uniform Shelter Rules, to report on infractions of the Uniform Shelter Rules. Hotels are to use the HM-IR1 form to report infractions of the Uniform Shelter Rules. The infraction numbers on the forms are for guidance only and are not determinative of the actual number of rule infractions. When a single incident involves violations of several rules, shelter and hotel staff should use one form to report the incident and check all possibly applicable rule infractions on the USR-1 form, in a shelter, and the HM-IR-1, in a hotel.

General Provisions:

1. Copies of these Rules, the EA Babysitting Form and Guidelines, TESI-1s, the ADA Reasonable Accommodation Request form, and the EA Overnight Request Form shall be available at the front desk in hotels and in the management office in shelters in English and translated into those languages required by law. The front desk in hotels and the management office in shelters shall
also include information about to whom to submit Babysitting and Overnight Forms and other requests, how to contact that person, and how to inquire about the status of a request. Hotels shall provide fax transmission services to EA participants free of charge for communication with DHCD, other state agencies, social service and medical providers, and legal services.

2. Failure of the hotel or shelter to maintain and make available to participants a copy of these Rules and forms in languages required by law may constitute a defense to a rule violation if a participant did not receive a copy of the Rules in the language required by law upon entry into the EA program or have access to the such a translation at a placement prior to the alleged violation.

3. If a participant demonstrates that the conduct or omission of an EA household member over whose conduct the participant had no control causes a violation of these Rules or the EA regulations, discipline may be withheld, provided that the participant:
   a. promptly removes such household member from the household composition; and
   b. the participant and any other adult household members amend their rehousing plans to require them to take reasonable steps to prevent the former household member from returning to any shelter or hotel premises where EA families are placed, which may include, if necessary to prevent a return, serving and actively enforcing an abuse prevention order pursuant to M.G.L. c. 209A or cooperating with efforts by the shelter or hotel management to serve and actively enforce against such household member a “no trespass” notice pursuant to M.G.L. c. 266, § 120 or an anti-harassment order pursuant to M.G.L. c. 258E.

4. The term “good cause,” as used in these rules, shall mean good cause as determined by 760 CMR 67.06(6)(a)5 unless other grounds for good cause are specifically stated.

5. DHCD will provide language assistance as required by law for all communications with EA applicants and participants. Any translation from English shall indicate that in case of conflict between an English-language version of a document and a translation, the English language version shall control, provided that an EA Household will not be held responsible for conduct taken in reliance on an inaccurate translation.

6. DHCD and EA shelter providers, including hotels, are covered by the Americans with Disabilities Act (ADA) and related laws that prevent discrimination against and require certain reasonable accommodations or modifications for qualified persons with disabilities. If you have difficulty complying with any of these Rules because of a disability, you may request a reasonable accommodation or modification by completing a DHCD ADA Reasonable Accommodation request form and sending it and supporting medical documentation to DHCD.
Appendices
MEMORANDUM OF UNDERSTANDING BETWEEN
DEPARTMENT OF HOUSING AND COMMUNITY DEVELOPMENT
and
DEPARTMENT OF CHILDREN AND FAMILIES

I. PURPOSE

The Department of Housing and Community Development (DHCD) and the Department of Children and Families (DCF) enter into this Memorandum of Understanding for the purpose of better coordinating the services each provide to homeless families of the Commonwealth of Massachusetts. By working together in a seamless fashion, DHCD and DCF strive to more effectively and efficiently address the needs of homeless families. This Memorandum will address the responsibilities of DHCD and DCF in regard to the potential reunification of families by DCF into DHCD Emergency Assistance (EA) shelters and/or reunification plans for families already in DHCD shelters who temporarily lose custody of their children with a plan of reunification.

DHCD is the Massachusetts agency which provides professional assistance and financial resources to promote safe and decent affordable housing opportunities, including temporary shelter as necessary to alleviate homelessness when such family has no feasible alternative housing available. The Department of Children and Families is the Massachusetts child welfare agency whose responsibility includes assisting, strengthening and encouraging families in caring for and protecting their children.

II. REUNIFICATION AND PLACEMENT PROTOCOL

1. In circumstances where DCF determines that a family is ready to reunify and a lack of housing is the only remaining barrier to reunification, after receiving a release of information allowing for the sharing of information, the DCF Director of Area (DOA) or designee shall contact the DCF Housing Stabilization Supervisor. Said DOA will provide a signed certification to the DCF Housing Stabilization Supervisor. The certification will read as follows:

i. I, [name of DOA], am verifying that, as of this date, X family is ready to reunify and that DCF is proceeding to reunify [name of child/children] to [name of parent/s], because the family has sufficiently complied with all service plan tasks and goals and a lack of housing is the only remaining barrier to reunification. The DCF social worker will work with DHCD to coordinate reunification plans and shelter placement, in addition to ensuring the family has been connected to community supports/services. Should anything occur prior to the EA shelter placement to alter this family’s readiness status, the DCF social worker will notify DHCD immediately.
2. On receipt of the above certification, the DCF Housing Stabilization Supervisor and the DCF DOA will discuss any concerns or issues regarding the potential EA placement (e.g., location of available shelter placements, availability of services).

3. The DCF Housing Stabilization Supervisor will then provide the above certification to the DHCD Homeless Coordinator designee. Unless an alternate agreement is reached between the two agencies, DCF staff will not refer parents to DHCD local offices to apply for immediate EA shelter placement in circumstances involving reunification until the above certification has been provided to the DHCD Homeless Coordinator or his/her designee.

4. After provision of the certification, the parent will be referred to the local office to complete an EA eligibility application. In making the determination for eligibility for Emergency Assistance, the DHCD local office designee shall treat the family as having been already reunified, and the child as living within the EA household pursuant to 760CMR 67.02 (1)(a)(1).

5. Any placements made by DHCD under this protocol will occur in an EA family shelter, unless there is none available. If the family needs to be placed in a motel/hotel due to lack of family shelter availability, DHCD will prioritize placement of the family when an EA family shelter becomes available, however, nothing in this paragraph shall be construed to supersede federal and state legal requirements for priority placement of other families into the available EA family shelter unit. Once a shelter placement has been determined, the DHCD Homeless Coordinator will notify both the parent(s) and the DCF Housing Stabilization Supervisor.

6. If a placement is made consistent with this protocol, a DCF case worker will maintain contact with the family and the designated DHCD staff person, regardless of the geographic location of the shelter, and provide ongoing services to the family while the family is in EA shelter and the DCF case is open. In addition, DCF and DHCD will also determine a joint plan with the family while they are in shelter which will include regular contacts between the two agencies and be incorporated into the family’s DHCD’s re-housing plan.

7. This reunification protocol supersedes the one described in the Memorandum of Understanding between the parties dated August 17, 1994.

8. DCF and DHCD agree to comply with applicable provisions of Federal and Massachusetts law governing any and all matters related to the subject of this Agreement and, in addition, agree to keep informed and in compliance with all future Federal and Massachusetts laws, the provisions of which may affect this Agreement.

9. This MOU constitutes the entire understanding between the parties with respect to the subject matter covered by this MOU and shall not be deemed to be added to or modified unless first agreed in writing and signed by the parties.

10. This MOU, its validity, construction and effect shall be governed by the laws of the Commonwealth of Massachusetts.
III. DURATION

This MOU shall be effective upon its execution by the parties and shall remain in effect until:

a. the parties mutually agree to terminate it;
b. until it is superseded by a successor memorandum or agreement; or
c. upon termination by either party as set forth under the conditions below.

This MOU is subject to termination by either party at any time by providing written notice to the other party at least thirty (30) calendar days prior to such termination. Notice must be in writing and delivered to the person identified in this MOU by the respective agency. Neither this MOU nor any rights hereunder shall be assignable by the parties. Any attempt at assignment shall be null and void.

IV MODIFICATION

This MOU may be modified from time to time upon mutual agreement and execution of any such amendment or modification by the signatory authorities (or specified designee).

The parties specifically agree that failure of either party to insist upon compliance with any provision contained herein at any time shall not waive the requirement for performance of such provision at any other time.

No waiver by either party of any default or breach hereunder by the other party shall constitute a waiver of any subsequent default or breach.

IN WITNESS THEREOF, DHCD and DCF hereby execute this Memorandum of Understanding.

Department of Housing and Community Development

By [Signature]
Aaron Gornstein, Undersecretary

Date: 1/2/15

Specified Designee for DHCD:
Rose Evans

Assistant Commissioner for Planning and Program Development

Department of Children and Families

By [Signature]
Erin Deveney, Interim Commissioner

Date: 1/2/15

Specified Designee for DCF:

Frances Carbone

3
# DHCD EA Monthly Report, Statewide Summary

## July 2019

### EA Applications and Placements

<table>
<thead>
<tr>
<th></th>
<th>Jul-19</th>
<th>Jun-19</th>
<th>FY20 YTD</th>
</tr>
</thead>
<tbody>
<tr>
<td>Families Applying for EA</td>
<td>648</td>
<td>536</td>
<td>648</td>
</tr>
<tr>
<td>Health &amp; Safety Assessments Completed*</td>
<td>207</td>
<td>213</td>
<td>207</td>
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<tr>
<td>Families with Health &amp; Safety Risk</td>
<td>177</td>
<td>179</td>
<td>177</td>
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<tr>
<td>Families Entering EA (Shelter, Motels, and HomeBASE)</td>
<td>350</td>
<td>323</td>
<td>350</td>
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<tr>
<td>Placement-to-Application Ratio</td>
<td>54%</td>
<td>60%</td>
<td>54%</td>
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</table>

**Notes:**
- Families submitting more than one application during a month were counted once.
- Families entering EA includes families entering shelter or hotels/motels and families diverted from shelter or hotels/motels into HomeBASE at the front door.

### EA Placements

<table>
<thead>
<tr>
<th></th>
<th>Jul-19</th>
<th>Jun-19</th>
<th>FY20 YTD</th>
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<tbody>
<tr>
<td>Total Entering EA or HomeBASE</td>
<td>350</td>
<td>323</td>
<td>350</td>
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<tr>
<td>Entering EA Shelter/Motels</td>
<td>293</td>
<td>253</td>
<td>293</td>
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<tr>
<td>Presumptive Placements</td>
<td>50</td>
<td>31</td>
<td>50</td>
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<tr>
<td>Shelters</td>
<td>293</td>
<td>253</td>
<td>293</td>
</tr>
<tr>
<td>Motels</td>
<td>0</td>
<td>0</td>
<td>0</td>
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<tr>
<td>HomeBASE Diversions (Front Door)</td>
<td>57</td>
<td>70</td>
<td>57</td>
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### EA Shelter/Motels Placements, Reasons for Homelessness

<table>
<thead>
<tr>
<th></th>
<th>Jul-19</th>
<th>Jun-19</th>
<th>FY20 YTD</th>
</tr>
</thead>
<tbody>
<tr>
<td>Total</td>
<td>293</td>
<td>253</td>
<td>293</td>
</tr>
<tr>
<td>Domestic Violence</td>
<td>46</td>
<td>38</td>
<td>46</td>
</tr>
<tr>
<td>Fire/Natural Disaster</td>
<td>3</td>
<td>0</td>
<td>3</td>
</tr>
<tr>
<td>Evict: Condemnation</td>
<td>7</td>
<td>4</td>
<td>7</td>
</tr>
<tr>
<td>Evict: Excused Conduct</td>
<td>2</td>
<td>2</td>
<td>2</td>
</tr>
<tr>
<td>Evict: Foreclosure</td>
<td>0</td>
<td>1</td>
<td>0</td>
</tr>
<tr>
<td>Evict: Non Payment - Medical</td>
<td>0</td>
<td>1</td>
<td>0</td>
</tr>
<tr>
<td>Evict: Non Payment - Disability</td>
<td>1</td>
<td>1</td>
<td>1</td>
</tr>
<tr>
<td>Evict: Non Payment - Income Loss</td>
<td>22</td>
<td>16</td>
<td>22</td>
</tr>
<tr>
<td>Evict: Non Renewal of Tenancy</td>
<td>1</td>
<td>0</td>
<td>1</td>
</tr>
<tr>
<td>Threatened Evict - Unauthorized Tenant</td>
<td>7</td>
<td>10</td>
<td>7</td>
</tr>
<tr>
<td>H&amp;S: Violent Conduct</td>
<td>3</td>
<td>4</td>
<td>3</td>
</tr>
<tr>
<td>H&amp;S: Mental Illness</td>
<td>2</td>
<td>4</td>
<td>2</td>
</tr>
<tr>
<td>H&amp;S: Substance Abuse</td>
<td>0</td>
<td>3</td>
<td>0</td>
</tr>
<tr>
<td>H&amp;S: Conditions in Unit</td>
<td>2</td>
<td>4</td>
<td>2</td>
</tr>
<tr>
<td>H&amp;S: Irregular Housing situation</td>
<td>138</td>
<td>104</td>
<td>138</td>
</tr>
<tr>
<td>H&amp;S: Not Meant for Human Habitation</td>
<td>42</td>
<td>46</td>
<td>42</td>
</tr>
<tr>
<td>TESI or Aid Pending</td>
<td>17</td>
<td>15</td>
<td>17</td>
</tr>
</tbody>
</table>

**Note:** Families whose HomeBASE rental assistance benefit ended during the month may be placed in later months.

**Sources:** EA Daily Entry Reports and ASIST.
On July 31, 2019, the total EA caseload was 3,557 families. 17 (0.5%) of these families were in hotels/motels.

Note: Methodology for calculating shelter caseload changed in FY15 from an average daily number of contracted units (minus vacancies) to an end-of-the-month count of occupied shelter units using DHCD's bed registry.
## Children Served

<table>
<thead>
<tr>
<th>Age Range</th>
<th># Children</th>
<th>% Children</th>
</tr>
</thead>
<tbody>
<tr>
<td>Total</td>
<td>7,015</td>
<td>100%</td>
</tr>
<tr>
<td>0-2 yrs.</td>
<td>1,526</td>
<td>22%</td>
</tr>
<tr>
<td>3-4 yrs.</td>
<td>1,016</td>
<td>14%</td>
</tr>
<tr>
<td>5-8 yrs.</td>
<td>1,632</td>
<td>23%</td>
</tr>
<tr>
<td>9-11 yrs.</td>
<td>1,037</td>
<td>15%</td>
</tr>
<tr>
<td>12-14 yrs.</td>
<td>823</td>
<td>12%</td>
</tr>
<tr>
<td>15-18 yrs.</td>
<td>813</td>
<td>12%</td>
</tr>
<tr>
<td>19-21 yrs.</td>
<td>168</td>
<td>2%</td>
</tr>
</tbody>
</table>

Note: Data indicate children in an EA shelter or hotel for any period during the month.

## EA Exits

<table>
<thead>
<tr>
<th>Families Exiting Shelter and Hotels/Motels</th>
<th>Jul-19</th>
<th>Jun-19</th>
<th>FY20 YTD</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Number</td>
<td>Percent</td>
<td>Number</td>
</tr>
<tr>
<td>Total Exits</td>
<td>298</td>
<td>100%</td>
<td>252</td>
</tr>
<tr>
<td>Abandoned</td>
<td>37</td>
<td>12%</td>
<td>34</td>
</tr>
<tr>
<td>Criminal Activity</td>
<td>0</td>
<td>0%</td>
<td>0</td>
</tr>
<tr>
<td>Feasible Alternative Housing with HB</td>
<td>177</td>
<td>59%</td>
<td>163</td>
</tr>
<tr>
<td>Feasible Alternative Housing without HB</td>
<td>27</td>
<td>9%</td>
<td>18</td>
</tr>
<tr>
<td>Ineligible</td>
<td>4</td>
<td>1%</td>
<td>5</td>
</tr>
<tr>
<td>Rejected Placement</td>
<td>1</td>
<td>&lt;1%</td>
<td>0</td>
</tr>
<tr>
<td>NonCompliance</td>
<td>3</td>
<td>1%</td>
<td>2</td>
</tr>
<tr>
<td>Temporary Shelter Interruption</td>
<td>28</td>
<td>9%</td>
<td>21</td>
</tr>
<tr>
<td>Other/Unknown</td>
<td>21</td>
<td>7%</td>
<td>9</td>
</tr>
</tbody>
</table>

Notes:
- Families terminated from shelter for abandoning their placements or non-compliance may return to the system pending an appeal.
- Families receiving a Temporary Shelter Interruption may return to the system within 30 days.

## Types of Subsidies

<table>
<thead>
<tr>
<th>Types of Subsidies</th>
<th>Jul-19</th>
<th>Jun-19</th>
<th>FY20 YTD</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Number</td>
<td>Percent</td>
<td>Number</td>
</tr>
<tr>
<td>Total Families Receiving Subsidies</td>
<td>205</td>
<td>100%</td>
<td>175</td>
</tr>
<tr>
<td>ESG</td>
<td>2</td>
<td>1%</td>
<td>3</td>
</tr>
<tr>
<td>HomeBASE</td>
<td>177</td>
<td>86%</td>
<td>163</td>
</tr>
<tr>
<td>HUD CoC</td>
<td>5</td>
<td>2%</td>
<td>6</td>
</tr>
<tr>
<td>MRVP</td>
<td>5</td>
<td>2%</td>
<td>7</td>
</tr>
<tr>
<td>Private Subsidized Housing</td>
<td>8</td>
<td>4%</td>
<td>7</td>
</tr>
<tr>
<td>Section 8 Mobile Voucher</td>
<td>66</td>
<td>32%</td>
<td>37</td>
</tr>
<tr>
<td>Section 8 Project-Based Voucher</td>
<td>10</td>
<td>5%</td>
<td>8</td>
</tr>
<tr>
<td>Other Public Housing</td>
<td>13</td>
<td>6%</td>
<td>13</td>
</tr>
<tr>
<td>Transportation</td>
<td>1</td>
<td>&lt;1%</td>
<td>5</td>
</tr>
</tbody>
</table>

Notes:
- Families may receive multiple subsidy types. Therefore, the sum of the subsidy types do not equal the number of families.
- Data based on date of shelter/hotel exit. HomeBASE data based on the date that checks are issued may vary.
## RAFT - Homelessness Prevention

<table>
<thead>
<tr>
<th>RAFT</th>
<th>Jul-19</th>
<th>Percent</th>
<th>Jun-19</th>
<th>Percent</th>
<th>YTD 20 YTD</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Number</td>
<td></td>
<td>Number</td>
<td></td>
<td>Number</td>
</tr>
<tr>
<td>Total Applying</td>
<td>560</td>
<td></td>
<td>412</td>
<td></td>
<td>560</td>
</tr>
<tr>
<td>Total Approved</td>
<td>468</td>
<td>100%</td>
<td>322</td>
<td>100%</td>
<td>468</td>
</tr>
<tr>
<td>Upstream rent arrears-public/subsidized</td>
<td>14</td>
<td>3%</td>
<td>0</td>
<td>0%</td>
<td>14</td>
</tr>
<tr>
<td>Upstream rent arrears-market rent</td>
<td>17</td>
<td>4%</td>
<td>0</td>
<td>0%</td>
<td>17</td>
</tr>
<tr>
<td>Upstream mortgage arrears</td>
<td>2</td>
<td>&lt;1%</td>
<td>0</td>
<td>0%</td>
<td>2</td>
</tr>
<tr>
<td>Doubled up and asked to leave</td>
<td>154</td>
<td>33%</td>
<td>73</td>
<td>23%</td>
<td>154</td>
</tr>
<tr>
<td>Domestic violence</td>
<td>14</td>
<td>3%</td>
<td>11</td>
<td>3%</td>
<td>14</td>
</tr>
<tr>
<td>Eviction-public/subsidized</td>
<td>31</td>
<td>7%</td>
<td>60</td>
<td>19%</td>
<td>31</td>
</tr>
<tr>
<td>Eviction-market rent</td>
<td>100</td>
<td>21%</td>
<td>57</td>
<td>18%</td>
<td>100</td>
</tr>
<tr>
<td>Foreclosure</td>
<td>12</td>
<td>3%</td>
<td>7</td>
<td>2%</td>
<td>12</td>
</tr>
<tr>
<td>Fire/flood/natural disaster</td>
<td>6</td>
<td>1%</td>
<td>9</td>
<td>3%</td>
<td>6</td>
</tr>
<tr>
<td>Health/safety</td>
<td>45</td>
<td>10%</td>
<td>14</td>
<td>4%</td>
<td>45</td>
</tr>
</tbody>
</table>
## Families Applying for EA

<table>
<thead>
<tr>
<th></th>
<th>Jul #</th>
<th>Jul %</th>
<th>Jun #</th>
<th>YTD #</th>
<th>YTD %</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Total</strong></td>
<td>648</td>
<td>100%</td>
<td>536</td>
<td>648</td>
<td>100%</td>
</tr>
<tr>
<td>Boston</td>
<td>144</td>
<td>22%</td>
<td>124</td>
<td>144</td>
<td>22%</td>
</tr>
<tr>
<td>Central Mass</td>
<td>58</td>
<td>9%</td>
<td>45</td>
<td>58</td>
<td>9%</td>
</tr>
<tr>
<td>North Shore</td>
<td>171</td>
<td>26%</td>
<td>153</td>
<td>171</td>
<td>26%</td>
</tr>
<tr>
<td>South Shore</td>
<td>101</td>
<td>16%</td>
<td>80</td>
<td>101</td>
<td>16%</td>
</tr>
<tr>
<td>Western Mass</td>
<td>174</td>
<td>27%</td>
<td>134</td>
<td>174</td>
<td>27%</td>
</tr>
</tbody>
</table>

## Families Placed in EA Shelter and Hotels/Motels

<table>
<thead>
<tr>
<th></th>
<th>Jul #</th>
<th>Jul %</th>
<th>Jun #</th>
<th>YTD #</th>
<th>YTD %</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Total</strong></td>
<td>293</td>
<td>100%</td>
<td>253</td>
<td>293</td>
<td>100%</td>
</tr>
<tr>
<td>Boston</td>
<td>92</td>
<td>31%</td>
<td>88</td>
<td>92</td>
<td>31%</td>
</tr>
<tr>
<td>Central Mass</td>
<td>38</td>
<td>13%</td>
<td>23</td>
<td>38</td>
<td>13%</td>
</tr>
<tr>
<td>North Shore</td>
<td>63</td>
<td>22%</td>
<td>56</td>
<td>63</td>
<td>22%</td>
</tr>
<tr>
<td>South Shore</td>
<td>56</td>
<td>19%</td>
<td>40</td>
<td>56</td>
<td>19%</td>
</tr>
<tr>
<td>Western Mass</td>
<td>44</td>
<td>15%</td>
<td>46</td>
<td>44</td>
<td>15%</td>
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</table>

## HomeBASE Entries (Diversion and Exits)

<table>
<thead>
<tr>
<th></th>
<th>Jul #</th>
<th>Jul %</th>
<th>Jun #</th>
<th>YTD #</th>
<th>YTD %</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Total</strong></td>
<td>263</td>
<td>100%</td>
<td>234</td>
<td>263</td>
<td>100%</td>
</tr>
<tr>
<td>Berkshire Housing</td>
<td>10</td>
<td>4%</td>
<td>3</td>
<td>10</td>
<td>4%</td>
</tr>
<tr>
<td>Community Teamwork, Inc.</td>
<td>11</td>
<td>4%</td>
<td>25</td>
<td>11</td>
<td>4%</td>
</tr>
<tr>
<td>Franklin County</td>
<td>1</td>
<td>&lt;1%</td>
<td>3</td>
<td>1</td>
<td>&lt;1%</td>
</tr>
<tr>
<td>Housing Assistance Corp.</td>
<td>2</td>
<td>1%</td>
<td>5</td>
<td>2</td>
<td>1%</td>
</tr>
<tr>
<td>Way Finders</td>
<td>58</td>
<td>22%</td>
<td>47</td>
<td>58</td>
<td>22%</td>
</tr>
<tr>
<td>Metro Housing Boston</td>
<td>85</td>
<td>32%</td>
<td>52</td>
<td>85</td>
<td>32%</td>
</tr>
<tr>
<td>RCAP Solutions</td>
<td>8</td>
<td>3%</td>
<td>9</td>
<td>8</td>
<td>3%</td>
</tr>
<tr>
<td>South Middlesex Opportunity Council</td>
<td>10</td>
<td>4%</td>
<td>7</td>
<td>10</td>
<td>4%</td>
</tr>
<tr>
<td>NeighborWorks Housing Solutions</td>
<td>50</td>
<td>19%</td>
<td>56</td>
<td>50</td>
<td>19%</td>
</tr>
<tr>
<td>Lynn Housing Authority</td>
<td>12</td>
<td>5%</td>
<td>18</td>
<td>12</td>
<td>5%</td>
</tr>
<tr>
<td>Central MA Housing Alliance</td>
<td>16</td>
<td>6%</td>
<td>9</td>
<td>16</td>
<td>6%</td>
</tr>
</tbody>
</table>

### Notes

Average Daily Number of Families in Hotels is calculated as the average across weekly point-in-time estimates from the reported month; Hotel region indicates region of originating eligibility office. Totals may not equal the sum or regions due to rounding.

### Sources

Sources: EA Daily Entry Report, ASIST, and EA Weekly Motel Reports.
## Families Applying for EA

<table>
<thead>
<tr>
<th>Area</th>
<th>Jul #</th>
<th>Jul %</th>
<th>YTD #</th>
<th>YTD %</th>
</tr>
</thead>
<tbody>
<tr>
<td>Boston</td>
<td>144</td>
<td>22%</td>
<td>144</td>
<td>22%</td>
</tr>
<tr>
<td>Central Mass</td>
<td>58</td>
<td>9%</td>
<td>58</td>
<td>9%</td>
</tr>
<tr>
<td>North Shore</td>
<td>171</td>
<td>26%</td>
<td>171</td>
<td>26%</td>
</tr>
<tr>
<td>South Shore</td>
<td>101</td>
<td>16%</td>
<td>101</td>
<td>16%</td>
</tr>
<tr>
<td>Western Mass</td>
<td>174</td>
<td>27%</td>
<td>174</td>
<td>27%</td>
</tr>
</tbody>
</table>

## Boston

<table>
<thead>
<tr>
<th>Area</th>
<th>Jul #</th>
<th>Jul %</th>
<th>YTD #</th>
<th>YTD %</th>
</tr>
</thead>
<tbody>
<tr>
<td>Boston</td>
<td>92</td>
<td>31%</td>
<td>92</td>
<td>31%</td>
</tr>
<tr>
<td>Central Mass</td>
<td>38</td>
<td>13%</td>
<td>38</td>
<td>13%</td>
</tr>
<tr>
<td>North Shore</td>
<td>63</td>
<td>22%</td>
<td>63</td>
<td>22%</td>
</tr>
<tr>
<td>South Shore</td>
<td>56</td>
<td>19%</td>
<td>56</td>
<td>19%</td>
</tr>
<tr>
<td>Western Mass</td>
<td>44</td>
<td>15%</td>
<td>44</td>
<td>15%</td>
</tr>
</tbody>
</table>

## Hartford Health & Safety Assessment

<table>
<thead>
<tr>
<th>Area</th>
<th>Jul #</th>
<th>Jul %</th>
<th>YTD #</th>
<th>YTD %</th>
</tr>
</thead>
<tbody>
<tr>
<td>Hartford Health &amp; Safety Assessment Completed</td>
<td>207</td>
<td>100%</td>
<td>207</td>
<td>100%</td>
</tr>
</tbody>
</table>

## Hartford Families with H&S Risk

<table>
<thead>
<tr>
<th>Area</th>
<th>Jul #</th>
<th>Jul %</th>
<th>YTD #</th>
<th>YTD %</th>
</tr>
</thead>
<tbody>
<tr>
<td>Hartford Families with H&amp;S Risk</td>
<td>177</td>
<td>86%</td>
<td>177</td>
<td>86%</td>
</tr>
</tbody>
</table>

## Hartford Families Placed in Shelter/Motels

<table>
<thead>
<tr>
<th>Area</th>
<th>Jul #</th>
<th>Jul %</th>
<th>YTD #</th>
<th>YTD %</th>
</tr>
</thead>
<tbody>
<tr>
<td>Hartford Families Placed in Hotels/Motels</td>
<td>0</td>
<td>0%</td>
<td>0</td>
<td>0%</td>
</tr>
<tr>
<td>Hartford Presumptive Placement</td>
<td>50</td>
<td>17%</td>
<td>50</td>
<td>17%</td>
</tr>
<tr>
<td>Hartford Boston</td>
<td>92</td>
<td>31%</td>
<td>92</td>
<td>31%</td>
</tr>
<tr>
<td>Hartford Central Mass</td>
<td>38</td>
<td>13%</td>
<td>38</td>
<td>13%</td>
</tr>
<tr>
<td>Hartford North Shore</td>
<td>63</td>
<td>22%</td>
<td>63</td>
<td>22%</td>
</tr>
<tr>
<td>Hartford South Shore</td>
<td>56</td>
<td>19%</td>
<td>56</td>
<td>19%</td>
</tr>
<tr>
<td>Hartford Western Mass</td>
<td>44</td>
<td>15%</td>
<td>44</td>
<td>15%</td>
</tr>
</tbody>
</table>

## Hartford Monthly Caseload (# of Families)

<table>
<thead>
<tr>
<th>Area</th>
<th>Jul #</th>
<th>Jul %</th>
<th>YTD #</th>
<th>YTD %</th>
</tr>
</thead>
<tbody>
<tr>
<td>Hartford Total</td>
<td>3,557</td>
<td>100%</td>
<td>3,557</td>
<td>100%</td>
</tr>
<tr>
<td>Hartford Shelter</td>
<td>3,540</td>
<td>100%</td>
<td>3,540</td>
<td>100%</td>
</tr>
<tr>
<td>Hartford Hotel/Motel</td>
<td>17</td>
<td>100%</td>
<td>17</td>
<td>100%</td>
</tr>
</tbody>
</table>

## Hartford Children Served

<table>
<thead>
<tr>
<th>Area</th>
<th>Jul #</th>
<th>Jul %</th>
<th>YTD #</th>
<th>YTD %</th>
</tr>
</thead>
<tbody>
<tr>
<td>Hartford Total</td>
<td>7,015</td>
<td>100%</td>
<td>7,015</td>
<td>100%</td>
</tr>
<tr>
<td>Hartford 0-2 yrs.</td>
<td>1,526</td>
<td>22%</td>
<td>1,526</td>
<td>22%</td>
</tr>
<tr>
<td>Hartford 3-4 yrs.</td>
<td>1,016</td>
<td>14%</td>
<td>1,016</td>
<td>14%</td>
</tr>
<tr>
<td>Hartford 5-8 yrs.</td>
<td>1,632</td>
<td>23%</td>
<td>1,632</td>
<td>23%</td>
</tr>
<tr>
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<td>Hartford 15-18 yrs.</td>
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<td>Hartford 19-21 yrs.</td>
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## Appendices

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<th>YTD #</th>
<th>YTD %</th>
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<td>Reasons for Homelessness, Shelter/Motel Exits</td>
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<td>Replacement/TESI</td>
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<td><strong>Shelter and Hotel/Motel Exits</strong></td>
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<td>3</td>
<td>1%</td>
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<td>28</td>
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<tr>
<td>Other/Unknown</td>
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<td>Hotel/Motel Exits</td>
<td>Current Month</td>
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<tr>
<td></td>
<td>Jul #</td>
<td>Jul %</td>
<td>YTD #</td>
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<tr>
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<tr>
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<td>0%</td>
<td>0</td>
<td>0%</td>
</tr>
<tr>
<td>Criminal Activity</td>
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<td>0%</td>
<td>0</td>
<td>0%</td>
</tr>
<tr>
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<td>100%</td>
<td>1</td>
<td>100%</td>
</tr>
<tr>
<td>Feasible Alternative Housing without HB</td>
<td>0</td>
<td>0%</td>
<td>0</td>
<td>0%</td>
</tr>
<tr>
<td>Ineligible</td>
<td>0</td>
<td>0%</td>
<td>0</td>
<td>0%</td>
</tr>
<tr>
<td>No Show/Rejected Placement</td>
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<td>0%</td>
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<tr>
<td>NonCompliance/Termination for Cause</td>
<td>0</td>
<td>0%</td>
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<tr>
<td>Other/Unknown</td>
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<th>Types of Subsidies at Exit</th>
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<th></th>
<th>Current Month</th>
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<td>Total Families Receiving Subsidies</td>
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<td>205</td>
<td>100%</td>
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<td>ESG</td>
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<td>1%</td>
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<td>HomeBASE</td>
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<td>177</td>
<td>86%</td>
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<tr>
<td>HUD CoC</td>
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<td>MRVP</td>
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<td>Private Subsidized Housing</td>
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<td>8</td>
<td>4%</td>
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<td>Section 8 Mobile Voucher</td>
<td>66</td>
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<td>32%</td>
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<td>Section 8 Project-Based Voucher</td>
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<td>5%</td>
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<td>Other Public Housing</td>
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<td>Transportation</td>
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<th>HomeBASE Entries (Diversions and Exits)</th>
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<tr>
<td>Total</td>
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<td>100%</td>
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<tr>
<td>Berkshire Housing</td>
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<td>Franklin County</td>
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<td>Housing Assistance Corp.</td>
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<tr>
<td>Way Finders</td>
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<td>22%</td>
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<td>RCAP Solutions</td>
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<td>3%</td>
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<td>South Middlesex Opportunity Council</td>
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<td>4%</td>
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<td>NeighborWorks Housing Solutions</td>
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<td>19%</td>
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<tr>
<td>Lynn Housing Authority</td>
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<tr>
<td>Central MA Housing Alliance</td>
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## Appendices

### HomeBASE Diversion by Region

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<tr>
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<th>Jul #</th>
<th>Jul %</th>
<th>YTD #</th>
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<td>5%</td>
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<tr>
<td>Franklin County</td>
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<td>19</td>
<td>33%</td>
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<tr>
<td>Metro Housing Boston</td>
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<td>3</td>
<td>5%</td>
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<td>RCAP Solutions</td>
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<td>2%</td>
<td>1</td>
<td>2%</td>
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### HomeBASE Shelter Exits by Region

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<tr>
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<tr>
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### HomeBASE Hotel Exits by Region

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<td>Housing Assistance Corp.</td>
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<tr>
<td>Way Finders</td>
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<tr>
<td>Metro Housing Boston</td>
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<td>Lynn Housing Authority</td>
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<td>Central MA Housing Alliance</td>
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<td>RAFT</td>
<td>Current Month</td>
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