

Commonwealth of Massachusetts DEPARTMENT OF HOUSING & COMMUNITY DEVELOPMENT Charles D. Baker, Governor Karyn E. Polito, Lt. Governor Chrystal Kornegay, Undersecretary

DHCD EMERGENCY ASSISTANCE (EA) APPLICATION PROCESS

STEP 1 ARE YOU QUALIFIED FOR EA?

- > QUALIFIED APPLICANT MUST MEET THE GROSS INCOME STANDARDS OF EA
- ➤ HOUSEHOLD MUST CONSIST OF NEEDY CHILD(REN) UNDER THE AGE OF 21 OR A PREGNANT WOMAN
- > MUST BE A RESIDENT OF MASSACHUSETTS
- MUST MEET ASSETS LIMITS

STEP 2 ARE YOU ELIGIBLE FOR EA?

- NO FAULT FIRE, FLOOD, NATURAL DISASTER, CONDEMNATION OR FORECLOSURE
- > FLEEING DOMESTIC VIOLENCE, CURRENT OR WITHIN PAST 12 MONTHS
- NO FAULT EVICTION
- > CHILD(REN) ARE EXPOSED TO A SUBSTANTIAL HEALTH AND SAFETY RISK
- **STEP 3** PROVIDE ALL REQUESTED VERIFICATIONS WITHIN 30 DAYS
- **STEP 4** HEALTH AND SAFETY ASSESSMENT WILL BE CONDUCTED TO VERIFY HOUSING INSTABILITY
- **STEP 5** IF YOU ARE DETERMINED <u>ELIGIBLE FOR EA, YOU MAY BE OFFERED TO CHOOSE HOMEBASE BENEFITS OR SHELTER PLACEMENT</u>

IF YOU ARE DETERMINED <u>INELIGIBLE FOR EA,</u> YOU WILL RECEIVE A DENIAL LETTER ALONG WITH A LIST OF COMMUNITY RESOURCES.

ALL DENIALS MAY BE APPEALED.

INSTRUCTIONS TO REQUEST AN APPEAL ARE ON THE BACK OF THE DENIAL LETTER.

For additional questions, please contact DHCD REMOTE ACCESS LINE AT (866) 584-0653





Commonwealth of Massachusetts DEPARTMENT OF HOUSING & COMMUNITY DEVELOPMENT

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

NOTICE: TO FAMILIES APPLING FOR EMERGENCY SHELTER AND SHELTER RESIDENTS IN NEED OF ASSISTANCE

If you need to apply for shelter please call (866) 584-0653

STEP 1 **CALL** (866) 584-0653

STEP 2 SPEAK WITH A HOMELESS COORDINATOR TO COMPLETE AN

INTAKE ASSESSMENT OR EMERGENCY ASSISTANCE APPLICATION

TELEPHONICALLY

OR

APPLY IN PERSON AT ANY OF THE DTA/DHCD OFFICES LISTED 8:00AM - 4:00PM

BOSTON, 2201 Washington Street

BROCKTON, 60 Main Street

CHELSEA, 90 Everett Avenue, 3rd Floor

FALL RIVER, 1567 North Main Street

FRAMINGHAM, 300 Howard Street

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





Documentation to collect and submit to DHCD with your EA application

This is list is only a partial list of required DHCD documentation for EA approval. DHCD will determine if the documentation submitted is sufficient and may contact the participant directly to request additional documentation.

| Current Massachusetts Picture ID (if your ID is not issued in the State of Massachusetts go to City Hall and register to vote. Bring with you proof you live in Massachusetts. Submit the voter registration card along with your other documentation) |
|--|
| Birth Certificates for all minor children in the home under the age of 21 |
| Proof of Social Security Number for all household members. Copy of the social security cards or official print out of the number issued by the social security office. |
| Income Documentation . Need four week's pay or benefit letters from SSI/DTA/child support no older than 60 days. |
| Documentation needed depending on the cause of the housing crisis: |
| If Fleeing Domestic Violence, such as proof of DV via police reports, court reports or retraining orders, letter from a professional domestic violence agency, medical documentation of injuries. |
| If Doubled up with Family or Friends, proof the primary lease holder's tenancy is in jeopardy via a 14-day notice to quit or eviction notice |
| If living in a Hotel/Motel, need copies of motel receipts. |
| If being Evicted: For a no fault eviction – property is in foreclosure, condemnation by eminent domain, condemnation for safety reasons. Need a copy of eviction notice, sheriff notice, condemnation, etc. For Fault Eviction: Eviction for conduct of household member or guest, proof the participant had no control of that person's behavior. Proof of eviction for non-payment caused by medical condition or diagnosed disability or proof of significant reduction in household income |
| If Pregnant , need pregnancy letter issued by medical office and signed by an RN or a Doctor indicating the due date. |
| If DCF is involved due to Unsafe Environment, need letter from DCF. |
| Fire/Flood/Natural Disaster, need proof of disaster i.e. fire report, Red Cross letter, government agency letter, DCF |
| If the Apartment is Unsafe/Unhealthy, need a Condemnation Order issued by the Board of Health. A letter of citations is not sufficient as it allows time for the landlord to make repairs. |

