



BOSTON HOUSING AUTHORITY
 Occupancy Department
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(This information is available in an alternative format upon request.)

DEVELOPMENT CHOICE REMOVE FORM (Public Housing)

() I WISH TO MAKE THE FOLLOWING DEVELOPMENT CHANGES TO MY APPLICATION:

Applicant Name: _____ **Client #:** _____
 (PLEASE PRINT YOUR FIRST AND LAST NAME) **Social Security #:** - -

Current Choice(s)	Development	Neighborhood	Bedroom Size	Wheelchair Accessible Units That Exist At the Site	Circle Changes Below
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Check Box (✓) FAMILY FEDERAL PROGRAM

	Alice H. Taylor	Roxbury	1,2,3,4&5	YES	REMOVE
	Anne M. Lynch Homes at Old Colony	South Boston	1,2,3,4,5&6	YES	REMOVE
	Cathedral/Ruth Barkley Apts.	South End	1,2,3&4	YES	REMOVE
	Charlestown	Charlestown	1,2,3,4&5	YES	REMOVE
	Commonwealth	Brighton	1,2,3,4&5	YES	REMOVE
	Franklin Field	Dorchester	1,2,3,4&5	YES	REMOVE
	Highland Park	Roxbury	2&3	NO	REMOVE
	Lenox St.	South End	1,2&3	YES	REMOVE
	Mary Ellen McCormack	South Boston	1,2&3	NO	REMOVE
	Mildred C. Haley Apts. (Bromley Pk)	Jamaica Plain	1,2,3,4&5	YES	REMOVE
	Mildred C. Haley Apts. (Heath St.)	Jamaica Plain	1,2,3,4,5&6,3,4&5	YES	REMOVE REMOVE
	Whittier Street	Roxbury	1,2,3&4	Modified	REMOVE

FAMILY STATE PROGRAM

	Archdale	Roslindale	1,2,3,4,5&6	YES	REMOVE
	BHA Condos-Scattered Sites	City-Wide	1,2,3&4	YES	REMOVE
	Fairmount	Hyde Park	2&3	NO	REMOVE
	Faneuil	Brighton	2,3,&5	NO	REMOVE
	Franklin Field	Dorchester	2	YES	REMOVE
	Gallivan Blvd	Mattapan	2,3&4	NO	REMOVE
	Orient Heights	East Boston	1,2,3,4&5	YES	REMOVE
	South Street	Jamaica	1,2,3&4	NO	REMOVE
	West Broadway	South Boston	1,2,3,4,5&6	YES	REMOVE

IMPORTANT (PLEASE READ AND SIGN)

I UNDERSTAND BY ADDING NEW DEVELOPMENT CHOICES THAT I WILL BE GIVEN A NEW ELIGIBILITY DATE FOR EACH DEVELOPMENT CHOICE ADDED. **PLEASE NOTE:** ELIGIBILITY DATE IS DETERMINED BY THE DATE RECEIVED AND TIME-STAMPED AT OUR OFFICE.

I have read, and understand that I will receive a new eligibility date for each new choice I select today.

Applicant Signature: _____ **Date:** _____
 (HEAD OF HOUSEHOLD)

PLEASE SEE REVERSE SIDE FOR THE ELDERLY OR DISABLED DEVELOPMENT CHOICES.

PLEASE NOTE: TO APPLY TO THIS PROGRAM YOU MUST BE A SENIOR CITIZEN OR DISABLED, AND NOT REQUIRING MORE THAN (2) TWO BEDROOM.

() I WISH TO MAKE THE FOLLOWING DEVELOPMENTS CHANGES TO MY APPLICATION:

Applicant Name: _____ **Client #:** _____
 (PLEASE PRINT YOUR FIRST AND LAST NAME) **Social Security #:** - -

Current Choice(s)	Development	Neighborhood	Bedroom Size	Wheelchair Accessible Units That Exist at The Site	Circle Changes Below
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Check Box (✓)

ELDERLY/DISABLED FEDERAL PROGRAM

	Annapolis	Dorchester	1 & 2	NO	REMOVE
	Ashmont	Dorchester	1 & 2	NO	REMOVE
	Ausonia	North End	1 & 2	YES	REMOVE
	Bellflower	Dorchester	1 & 2	YES	REMOVE
	Codman Apartments	Dorchester	0, 1 & 2	YES	REMOVE
	Commonwealth	Brighton	1 & 2	YES	REMOVE
	Davison Apts.	Hyde Park	0 & 1	NO	REMOVE
	Doris Bunte Apartments	Roxbury	0, 1 & 2	YES	REMOVE
	Eva White Apts.	South End	0, 1 & 2	NO	REMOVE
	Foley Apts.	South Boston	1	NO	REMOVE
	Frederick Douglass	South End	0 & 1	YES	REMOVE
	General Warren	Charlestown	0, 1 & 2	NO	REMOVE
	Groveland	Mattapan	0 & 1	NO	REMOVE
	Hampton House	South End	0 & 1	YES	REMOVE
	Hassan Apts.	Mattapan	0, 1 & 2	YES	REMOVE
	Heritage Apts.	East Boston	0, 1 & 2	YES	REMOVE
	Holgate Apts.	Roxbury	1	NO	REMOVE
	John J. Carroll	Brighton	1 & 2	NO	REMOVE
	Lower Mills	Dorchester	0, 1 & 2	YES	REMOVE
	Malone Apts.	Hyde Park	1	YES	REMOVE
	Meade Apts.	Dorchester	1 & 2	NO	REMOVE
	Mildred C. Haley Apts. (Bromley)	Jamaica Plain	1 & 2	NO	REMOVE
	MLK Apts.	Roxbury	0 & 1	NO	REMOVE
	Pasciucco	Dorchester	0, 1 & 2	YES	REMOVE
	Patricia White	Brighton	1 & 2	YES	REMOVE
	Peabody	Dorchester	1 & 2	YES	REMOVE
	Pond Street	Jamaica Plain	1 & 2	NO	REMOVE
	Rockland Towers	West Roxbury	0, 1 & 2	YES	REMOVE
	Roslyn	Roslindale	1 & 2	YES	REMOVE
	Spring Street	West Roxbury	1 & 2	YES	REMOVE
	St. Botolph St.	Back Bay	0, 1 & 2	MODIFIED	REMOVE
	Torre Unidad	South End	0, 1 & 2	YES	REMOVE
	Washington Manor	South End	0 & 1	YES	REMOVE
	Washington St.	Brighton	1 & 2	NO	REMOVE
	West Ninth	South Boston	1 & 2	NO	REMOVE

Check Box (✓)

ELDERLY/DISABLED STATE PROGRAM

	Basilica	Charlestown	1	NO	REMOVE
	Franklin Field Elderly	Dorchester	1 & 2	NO	REMOVE
	Franklin Field - Grandparenting	Dorchester	2	YES	REMOVE
	Msgr. Powers/"L" St.	South Boston	0, 1 & 2	YES	REMOVE

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I have read following, and understand that I will receive a new eligibility date for each new choice I select today.

Applicant Signature: _____ **Date:** _____
Head of Household Signature