



## LOTTERY PRE-APPLICATION INSTRUCTIONS:

- Pre-application MUST be filled out in its entirety, signed and dated to be eligible for housing (only one pre-application per household).
- Pre-applications can be submitted via email (Forge@pennrose.com), fax (413.241.7579), or US Mail addressed to: **Pennrose, Attn: FORGE, 1301 N. 31st Street, Philadelphia, PA 19121**
- Pre-application must be received electronically or postmarked by 7/14/25 to be entered into the lottery.
- The lottery will be conducted on 7/28/25 via Microsoft Teams. A link to register to virtually attend will be available at ForgeatLenox.com.
- The full application and interview process will begin immediately following the lottery with all eligible applicants catalogued into their lottery selection slot.
- The following income restrictions apply: *(Effective 5/2025, subject to change)*

Unit Size	Household Size	Qualifying Household Income Range	% AMI	Monthly Rent
1 Bedroom	1 person	\$44,743 - \$51,600	60%	\$1,305
	2 people	\$44,743 - \$58,980		
	1 person	\$85,289 - \$103,200	120%	\$2,488
	2 people	\$85,289 - \$117,960		
2 Bedroom	2 people	\$53,829 - \$58,980	60%	\$1,570
	3 people	\$53,829 - \$66,360		
	4 people	\$53,829 - \$73,680		
	2 people	\$102,384 - \$117,960	120%	\$2,986
	3 people	\$102,384 - \$132,720		
	4 people	\$102,384 - \$147,360		
3 Bedroom	3 people	\$61,989 - \$66,360	60%	\$1,808
	4 people	\$61,989 - \$73,680		
	5 people	\$61,989 - \$79,620		
	6 people	\$61,989 - \$85,500		
	3 people	\$118,245 - \$132,720	120%	\$3,449
	4 people	\$118,245 - \$147,360		
	5 people	\$118,245 - \$159,240		
	6 people	\$118,245 - \$171,000		

\* There are (9) 30% AMI MRVP units available (4 one-bedrooms, 3 two-bedrooms, 2 three-bedrooms).  
Rent is based on income for these units.

### Contact Us:

1-66 Brushwood Way, Lenox, MA 01240 (Management Office Not Open)

ForgeatLenox.com | Forge@Pennrose.com

T: 413.623.4230 | TTY: 711 | F: 413.241.7579

MAIL TO: 1301 N. 31<sup>st</sup> Street  
Philadelphia, PA 19121  
Phone: 413.623.4230  
Fax: 413.241.7579  
Email: Forge@pennrose.com  
TTY: 711



To be completed by office staff:

Application Number \_\_\_\_\_  
Date Application Rec'd \_\_\_\_\_  
Time Application Rec'd \_\_\_\_\_  
Initials of Staff Member \_\_\_\_\_

**Lottery Pre-Applications can be sent via email, fax or U.S. Mail and Addressed to:**  
**Pennrose, Attn: FORGE, 1301 N. 31<sup>st</sup> Street, Philadelphia, PA 19121**

**HEAD OF HOUSEHOLD**

M	F	D
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D = Do not wish to disclose

☐ I do not have a SSN

NAME: \_\_\_\_\_ SSN: \_\_\_\_\_  
(First) (Middle Initial) (Last)

CURRENT ADDRESS: \_\_\_\_\_ HOME #: \_\_\_\_\_  
(House #) (Street Name) (Apt. #)

CELL #: \_\_\_\_\_

(City) (State) (Zip Code) WORK #: \_\_\_\_\_

EMAIL: \_\_\_\_\_ D.O.B: \_\_\_\_\_

How did you hear about us? \_\_\_\_\_ DRIVER LICENSE STATE: \_\_\_\_\_

DRIVER LICENSE NUMBER: \_\_\_\_\_

**HOUSEHOLD MEMBERS**

Name	DOB	M/F/D	Relationship	Soc. Sec. Number	DL State & Number

**ANNUAL HOUSEHOLD INCOME**

(Gross Income Before Deductions)

(Circle One)

Gross Employment/Wages	\$	per	Year / Month
Social Security Income	\$	per	Year / Month
Social Security Disability Income	\$	per	Year / Month
Public Assistance (Welfare/TANF)	\$	per	Year / Month
Child Support	\$	per	Year / Month
Pension	\$	per	Year / Month
Payments from Gig Income (Uber, Lyft, Instacart, Venmo, Cash App, etc)	\$	per	Year / Month
Assets (Approximate Total Balance of Checking, Savings, 401(k), IRA, etc.)	\$	per	Year / Month
Other Income (Please Specify):	\$	per	Year / Month



**PENNROSE**  
Bricks & Mortar | Heart & Soul



**Preferences for Determining Waiting List Position (if applicable)**

Do you or any member of your household have a DISABILITY?			Y	N
Do you or a member of your household live, work, or have children that go to school in Lenox, Adams, North Adams, Cheshire, Dalton, Great Barrington, Hinsdale, Housatonic, Lee, Lenoxdale, Pittsfield (City), Williamstown, New Ashford, Washington, Becket, Otis, Sheffield, Lanesborough, Stockbridge, or W. Stockbridge?			Y	N
Are you currently in shelter or have you recently been living in a shelter?			Y	N
Are you currently employed?			Y	N
Are you a student or recent graduate of an educational or training program?			Y	N
Do you have a portable section 8 voucher (HCVP)?			Y	N
If yes above, through what agency?				
What year did you last file taxes?				
Do you require a unit with special features? (e.g. unit for mobility impaired, visually impaired, hearing impaired, walk-in shower, grab bars, no steps, etc.)			Y	N
If yes above, please circle features required:				
Unit for mobility impaired	Unit for visually impaired	Unit for hearing impaired		
Grab bars	No steps	Other:		
Describe:				

**Additional Questions**

Do you have any pets that will be residing with you? <i>Pet policy: 2 pet maximum, 35 lb. limit each. Breed restrictions apply. Additional security deposit required.</i>		Y	N
If yes to above, how many?			
How many bedrooms are you interested in? (1BR, 2BR, 3BR)	1 <sup>st</sup> Preference:	2 <sup>nd</sup> Preference:	

I hereby certify that the above is true and correct and complete to the best of my knowledge. I understand that any false statement or misrepresentation will be grounds for expulsion from the program and/or prosecution under Title 18, Section 1001 of the US Code.

I, \_\_\_\_\_, hereby give my permission for a credit and criminal background check, which is part of the application process.

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Applicant Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Applicant Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Applicant Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**Types of Program Assistance (For Office Use ONLY)**

**\*\*Important: You must notify us promptly should any information on this application change**

Tax Credit ☐ 60% ☐ 120% ☐  
 PBV/MRVP ☐ 30% ☐ ☐

May 2025



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