



Common Housing Application for Massachusetts Public Housing (CHAMP)

Application Update/Change Form Housing Selections

In order to make changes or updates to the Housing Selections section of your application for state-aided public housing, please fill out the form below and mail or hand deliver it to any local housing authority (LHA). The information will be entered online by the LHA.

If you would prefer to update your application online, please use the Common Housing Application for Massachusetts Public Housing (CHAMP) website: <https://www.mass.gov/applyforpublichousing>.

Even if you originally submitted a paper application, you can still use the website to make changes or updates to your application instead of going to an LHA in person.

If you have a disability, you have a right to request a reasonable accommodation with the application process. Contact your local housing authority to make arrangements.

PLEASE PROVIDE YOUR: Applicant ID Number

Please provide the Applicant ID number associated with your application for state-aided public housing.

1. Contact Information*** (Must be provided for your update to be processed)

Name of Applicant/Head of Household

_____	_____	_____	_____
First Name	Middle Initial	Last Name	Suffix

Date of Birth: _____

2. Housing Selections

To Add Housing Selections:

In order to apply to Housing Programs at Local Housing Authorities that are not on your existing application, please add Housing Selections by checking the box on the attached list starting on page 4. Make sure that you only select programs at Housing Authorities where you are willing to live. If a housing authority makes you an offer of housing and you fail to accept it, you will be removed from that waiting list and lose all preference and



priority if you reapply. If you fail to accept three offers of housing, you will be removed from all waiting lists where you applied, and, if you reapply, your application will lose any preference and priority at those housing authorities.

To Remove Housing Selections:

If you would like to remove your application from programs at Local Housing Authorities (Housing Selections) where you previously applied, please list them below. If you remove a Housing Selection, your application will be taken off that waiting list.

These changes can be made at any Housing Authority or online at the Common Housing Application for Massachusetts Public Housing (CHAMP) <https://www.mass.gov/applyforpublichousing>.

List of Housing Selections that I wish to REMOVE:

Local Housing Authority	Housing Program (Family, Elderly, Non-elderly Handicapped, Congregate Elderly, Congregate Non-elderly Handicapped or write ALL)

Please take my application off the waiting list for the programs at the Housing Authorities that I have listed above.



Applicant's Certification

- I understand that it is my responsibility to inform a Housing Authority in writing of any change of address, income, or household composition or any other information regarding my application.
- I authorize housing authorities where I have applied to make inquiries to verify the information I have provided in this application.
- I certify that the information I have given in this application is true and correct. I understand that any false statement or misrepresentation may result in the denial of my application.
- I understand that if I have made any intentionally false or misleading statements when applying for public housing, my application will be disqualified and there may be additional consequences.
- I understand that my application information will be transferred to the **Common Housing Application for Massachusetts Public Housing (CHAMP)**. When more than one application I have submitted has conflicting information, for example different addresses, the application information with the newer date will be used. I understand that I may update all information either at one housing authority or online:
<https://www.mass.gov/applyforpublichousing>.
- I understand that the online application may be subject to data transmission errors that may make the application incomplete. I understand that DHCD is not responsible for these errors.
- By using this application, I agree to all of these conditions.

Signed under the pains and penalties of perjury,

Print name:

Signature:

Date:



List of Housing Selections

Please mark the check box next to the Housing Selection where you want to apply and live.

<u>Community</u>	<u>Housing Selection</u>	<u># of Bedrooms</u>
<input type="checkbox"/> Abington	Family	3
<input type="checkbox"/> Abington	Elderly/Handicapped	1
<input type="checkbox"/> Acton	Family	2, 3, 4
<input type="checkbox"/> Acton	Elderly/Handicapped	1
<input type="checkbox"/> Acushnet	Elderly/Handicapped	1
<input type="checkbox"/> Adams	Family	1, 2, 3, 4
<input type="checkbox"/> Adams	Elderly/Handicapped	1
<input type="checkbox"/> Agawam	Family	2, 3
<input type="checkbox"/> Agawam	Elderly/Handicapped	1
<input type="checkbox"/> Agawam	Congregate Elderly/Handicapped	1
<input type="checkbox"/> Amesbury	Family	1, 2, 3, 5
<input type="checkbox"/> Amesbury	Elderly/Handicapped	1
<input type="checkbox"/> Amherst	Family	2, 3
<input type="checkbox"/> Amherst	Elderly/Handicapped	1
<input type="checkbox"/> Andover	Family	2, 3, 4
<input type="checkbox"/> Andover	Elderly/Handicapped	1
<input type="checkbox"/> Arlington	Family	1, 2, 3
<input type="checkbox"/> Arlington	Elderly/Handicapped	1
<input type="checkbox"/> Ashland	Elderly/Handicapped	1
<input type="checkbox"/> Athol	Family	2, 3
<input type="checkbox"/> Athol	Elderly/Handicapped	1
<input type="checkbox"/> Attleboro	Family	1, 2, 3
<input type="checkbox"/> Attleboro	Elderly/Handicapped	1
<input type="checkbox"/> Auburn	Family	2, 3, 4
<input type="checkbox"/> Auburn	Elderly/Handicapped	1
<input type="checkbox"/> Avon	Elderly/Handicapped	1

<u>Community</u>	<u>Housing Selection</u>	<u># of Bedrooms</u>
<input type="checkbox"/> Ayer	Family	2, 3
<input type="checkbox"/> Ayer	Elderly/Handicapped	1
<input type="checkbox"/> Ayer	Congregate Elderly/Handicapped	1
<input type="checkbox"/> Barnstable	Family	2, 3, 4, 5
<input type="checkbox"/> Barnstable	Elderly/Handicapped	1, 2
<input type="checkbox"/> Barnstable	Congregate Elderly/Handicapped	1
<input type="checkbox"/> Barre	Elderly/Handicapped	1
<input type="checkbox"/> Bedford	Family	2, 3
<input type="checkbox"/> Bedford	Elderly/Handicapped	1
<input type="checkbox"/> Belchertown	Family	3, 4
<input type="checkbox"/> Belchertown	Elderly/Handicapped	1
<input type="checkbox"/> Bellingham	Family	2, 4
<input type="checkbox"/> Bellingham	Elderly/Handicapped	1
<input type="checkbox"/> Belmont	Family	2, 3
<input type="checkbox"/> Belmont	Elderly/Handicapped	1
<input type="checkbox"/> Beverly	Family	1, 2, 3
<input type="checkbox"/> Beverly	Elderly/Handicapped	1, 2
<input type="checkbox"/> Beverly	Congregate Elderly/Handicapped	1
<input type="checkbox"/> Billerica	Family	2, 3
<input type="checkbox"/> Billerica	Elderly/Handicapped	1
<input type="checkbox"/> Blackstone	Elderly/Handicapped	1
<input type="checkbox"/> Boston	Family	1, 2, 3, 4, 5, 6
<input type="checkbox"/> Boston	Elderly/Handicapped	1, 2
<input type="checkbox"/> Boston - Beacon (Camden)	Family	1, 2, 3



Community	Housing Selection	# of Bedrooms
<input type="checkbox"/> Boston - Trinity (East Boston)	Family	1, 2, 3, 4, 5
<input type="checkbox"/> Bourne	Family	2, 3
<input type="checkbox"/> Bourne	Elderly/Handicapped	1, 2
<input type="checkbox"/> Braintree	Family	3
<input type="checkbox"/> Braintree	Elderly/Handicapped	1
<input type="checkbox"/> Braintree	Congregate Elderly/Handicapped	1
<input type="checkbox"/> Brewster	Family	2, 3
<input type="checkbox"/> Brewster	Elderly/Handicapped	1
<input type="checkbox"/> Bridgewater	Family	2, 3, 4
<input type="checkbox"/> Bridgewater	Elderly/Handicapped	1
<input type="checkbox"/> Bridgewater	Congregate Elderly/Handicapped	1
<input type="checkbox"/> Brimfield	Elderly/Handicapped	1, 2
<input type="checkbox"/> Brockton	Family	2, 3, 4
<input type="checkbox"/> Brockton	Elderly/Handicapped	1
<input type="checkbox"/> Brockton	Congregate Elderly/Handicapped	1
<input type="checkbox"/> Brookfield	Family	2
<input type="checkbox"/> Brookline	Family	1, 2, 3, 4, 5
<input type="checkbox"/> Brookline	Elderly/Handicapped	1, 2, 3
<input type="checkbox"/> Burlington	Family	3
<input type="checkbox"/> Burlington	Elderly/Handicapped	1, 2
<input type="checkbox"/> Canton	Family	2, 3, 4
<input type="checkbox"/> Canton	Elderly/Handicapped	1
<input type="checkbox"/> Carver	Family	2, 3, 4
<input type="checkbox"/> Carver	Elderly/Handicapped	1
<input type="checkbox"/> Charlton	Family	3
<input type="checkbox"/> Charlton	Elderly/Handicapped	1

Community	Housing Selection	# of Bedrooms
<input type="checkbox"/> Chatham	Family	2, 3
<input type="checkbox"/> Chatham	Elderly/Handicapped	1
<input type="checkbox"/> Chatham	Congregate Elderly/Handicapped	1
<input type="checkbox"/> Chelmsford	Family	3
<input type="checkbox"/> Chelmsford	Elderly/Handicapped	1
<input type="checkbox"/> Chelmsford	Congregate Elderly/Handicapped	1
<input type="checkbox"/> Chelsea	Family	2, 3, 4
<input type="checkbox"/> Chelsea	Elderly/Handicapped	1
<input type="checkbox"/> Chicopee	Family	1, 2, 3
<input type="checkbox"/> Chicopee	Elderly/Handicapped	1
<input type="checkbox"/> Clinton	Family	2, 3, 4
<input type="checkbox"/> Clinton	Elderly/Handicapped	1
<input type="checkbox"/> Cohasset	Elderly/Handicapped	1
<input type="checkbox"/> Concord	Family	2, 3, 4
<input type="checkbox"/> Concord	Elderly/Handicapped	1
<input type="checkbox"/> Dalton	Family	3
<input type="checkbox"/> Dalton	Elderly/Handicapped	1, 2
<input type="checkbox"/> Danvers	Family	2, 3
<input type="checkbox"/> Danvers	Elderly/Handicapped	1, 2
<input type="checkbox"/> Dartmouth	Elderly/Handicapped	1
<input type="checkbox"/> Dedham	Family	1, 2, 3
<input type="checkbox"/> Dedham	Elderly/Handicapped	1
<input type="checkbox"/> Dennis	Family	3, 4
<input type="checkbox"/> Dennis	Elderly/Handicapped	1, 2
<input type="checkbox"/> Dighton	Elderly/Handicapped	1
<input type="checkbox"/> Dracut	Family	2, 3, 4
<input type="checkbox"/> Dracut	Elderly/Handicapped	1
<input type="checkbox"/> Dracut	Congregate Elderly/Handicapped	1



Community	Housing Selection	# of Bedrooms
<input type="checkbox"/> Dudley	Elderly/Handicapped	1
<input type="checkbox"/> Duxbury	Family	2, 3
<input type="checkbox"/> Duxbury	Elderly/Handicapped	1
<input type="checkbox"/> East Bridgewater	Family	3
<input type="checkbox"/> East Bridgewater	Elderly/Handicapped	1
<input type="checkbox"/> East Longmeadow	Family	2, 3
<input type="checkbox"/> East Longmeadow	Elderly/Handicapped	1
<input type="checkbox"/> East Longmeadow	Congregate Elderly/Handicapped	1, 2
<input type="checkbox"/> Easthampton	Family	2, 3, 4
<input type="checkbox"/> Easthampton	Elderly/Handicapped	1
<input type="checkbox"/> Easton	Family	2, 3
<input type="checkbox"/> Easton	Elderly/Handicapped	1
<input type="checkbox"/> Essex	Elderly/Handicapped	1
<input type="checkbox"/> Everett	Family	2, 3
<input type="checkbox"/> Everett	Elderly/Handicapped	1
<input type="checkbox"/> Fairhaven	Family	2, 3
<input type="checkbox"/> Fairhaven	Elderly/Handicapped	1
<input type="checkbox"/> Fall River	Family	1, 2, 3
<input type="checkbox"/> Fall River	Elderly/Handicapped	1
<input type="checkbox"/> Falmouth	Family	2, 3, 4
<input type="checkbox"/> Falmouth	Elderly/Handicapped	1
<input type="checkbox"/> Fitchburg	Family	1, 2, 3, 4
<input type="checkbox"/> Fitchburg	Elderly/Handicapped	1, 2
<input type="checkbox"/> Fitchburg	Congregate Elderly/Handicapped	1
<input type="checkbox"/> Foxborough	Family	1, 2, 3, 4
<input type="checkbox"/> Foxborough	Elderly/Handicapped	1

Community	Housing Selection	# of Bedrooms
<input type="checkbox"/> Framingham	Family	1, 2, 3, 4
<input type="checkbox"/> Framingham	Elderly/Handicapped	1, 2
Franklin County Regional		
<input type="checkbox"/> Bernardston	Family	3
<input type="checkbox"/> Bernardston	Elderly/Handicapped	1
<input type="checkbox"/> Buckland	Family	2, 4
<input type="checkbox"/> Charlemont	Family	2, 4
<input type="checkbox"/> Gill	Elderly/Handicapped	1
<input type="checkbox"/> Northfield	Family	2, 3
<input type="checkbox"/> Northfield	Elderly/Handicapped	1
<input type="checkbox"/> Orange	Family	2, 3, 4
<input type="checkbox"/> Turners Falls	Congregate Elderly/Handicapped	1
<input type="checkbox"/> Franklin	Family	2, 3
<input type="checkbox"/> Franklin	Elderly/Handicapped	1
<input type="checkbox"/> Franklin	Congregate Elderly/Handicapped	1
<input type="checkbox"/> Gardner	Family	2, 3, 4
<input type="checkbox"/> Gardner	Elderly/Handicapped	1
<input type="checkbox"/> Gardner	Congregate Elderly/Handicapped	1
<input type="checkbox"/> Georgetown	Family	2, 3
<input type="checkbox"/> Georgetown	Elderly/Handicapped	1
<input type="checkbox"/> Gloucester	Family	2, 3, 4
<input type="checkbox"/> Gloucester	Elderly/Handicapped	1
<input type="checkbox"/> Grafton	Family	2, 3
<input type="checkbox"/> Grafton	Elderly/Handicapped	1
<input type="checkbox"/> Granby	Family	2, 3
<input type="checkbox"/> Granby	Elderly/Handicapped	1



Community	Housing Selection	# of Bedrooms
<input type="checkbox"/> Great Barrington	Family	2, 3, 4
<input type="checkbox"/> Great Barrington	Elderly/Handicapped	1
<input type="checkbox"/> Great Barrington - Sheffield	Family	3
<input type="checkbox"/> Great Barrington - Sheffield	Elderly/Handicapped	1
<input type="checkbox"/> Greenfield	Family	2, 3, 4, 5
<input type="checkbox"/> Greenfield	Elderly/Handicapped	1
<input type="checkbox"/> Greenfield	Congregate Elderly/Handicapped	1
<input type="checkbox"/> Groton	Family	3
<input type="checkbox"/> Groton	Elderly/Handicapped	1
<input type="checkbox"/> Groveland	Family	3
<input type="checkbox"/> Hadley	Family	3
<input type="checkbox"/> Hadley	Elderly/Handicapped	1
<input type="checkbox"/> Halifax	Family	2, 3, 4
<input type="checkbox"/> Halifax	Elderly/Handicapped	1
<input type="checkbox"/> Hamilton	Family	2, 3
<input type="checkbox"/> Hamilton	Elderly/Handicapped	1
Hampshire County Regional		
<input type="checkbox"/> Cummington	Family	2, 3
<input type="checkbox"/> Cummington	Elderly/Handicapped	1
<input type="checkbox"/> Huntington	Elderly/Handicapped	1
<input type="checkbox"/> South Hadley	Family	2
<input type="checkbox"/> Hanson	Elderly/Handicapped	1
<input type="checkbox"/> Harwich	Family	2, 3
<input type="checkbox"/> Hatfield	Elderly/Handicapped	1
<input type="checkbox"/> Haverhill	Family	2, 3, 4
<input type="checkbox"/> Haverhill	Elderly/Handicapped	1

Community	Housing Selection	# of Bedrooms
<input type="checkbox"/> Hingham	Family	2, 3
<input type="checkbox"/> Hingham	Elderly/Handicapped	1
<input type="checkbox"/> Hingham	Congregate Elderly/Handicapped	1
<input type="checkbox"/> Holbrook	Family	3
<input type="checkbox"/> Holbrook	Elderly/Handicapped	1
<input type="checkbox"/> Holden	Family	3
<input type="checkbox"/> Holden	Elderly/Handicapped	1
<input type="checkbox"/> Holliston	Family	2, 3, 4
<input type="checkbox"/> Holliston	Elderly/Handicapped	1
<input type="checkbox"/> Holyoke	Family	2, 3
<input type="checkbox"/> Holyoke	Elderly/Handicapped	1
<input type="checkbox"/> Holyoke	Congregate Elderly/Handicapped	1
<input type="checkbox"/> Hopedale	Elderly/Handicapped	1
<input type="checkbox"/> Hopkinton	Family	2, 3
<input type="checkbox"/> Hopkinton	Elderly/Handicapped	1
<input type="checkbox"/> Hudson	Elderly/Handicapped	1
<input type="checkbox"/> Hull	Family	2, 3, 4
<input type="checkbox"/> Hull	Elderly/Handicapped	1
<input type="checkbox"/> Ipswich	Family	2, 3, 4
<input type="checkbox"/> Ipswich	Elderly/Handicapped	1
<input type="checkbox"/> Kingston	Elderly/Handicapped	1
<input type="checkbox"/> Lancaster	Elderly/Handicapped	1
<input type="checkbox"/> Lawrence	Family	1, 2, 3, 4
<input type="checkbox"/> Lawrence	Elderly/Handicapped	1
<input type="checkbox"/> Lee	Family	2, 3
<input type="checkbox"/> Lee	Elderly/Handicapped	1
<input type="checkbox"/> Leicester	Elderly/Handicapped	1



Community	Housing Selection	# of Bedrooms
<input type="checkbox"/> Lenox	Family	2, 3
<input type="checkbox"/> Lenox	Elderly/Handicapped	1, 2
<input type="checkbox"/> Leominster	Family	2, 3, 4
<input type="checkbox"/> Leominster	Elderly/Handicapped	1
<input type="checkbox"/> Lexington	Family	3
<input type="checkbox"/> Lexington	Elderly/Handicapped	1
<input type="checkbox"/> Littleton	Family	2, 3
<input type="checkbox"/> Littleton	Elderly/Handicapped	1
<input type="checkbox"/> Lowell	Family	2, 3, 4, 5
<input type="checkbox"/> Lowell	Elderly/Handicapped	1
<input type="checkbox"/> Ludlow	Family	2, 3, 4
<input type="checkbox"/> Ludlow	Elderly/Handicapped	1, 2
<input type="checkbox"/> Lunenburg	Family	2, 3
<input type="checkbox"/> Lunenburg	Elderly/Handicapped	1
<input type="checkbox"/> Lynn	Family	2, 3, 4, 5
<input type="checkbox"/> Lynn	Elderly/Handicapped	1
<input type="checkbox"/> Lynn	Congregate Elderly/Handicapped	1
<input type="checkbox"/> Lynnfield	Elderly/Handicapped	1
<input type="checkbox"/> Malden	Elderly/Handicapped	1
<input type="checkbox"/> Manchester	Family	2, 3
<input type="checkbox"/> Manchester	Elderly/Handicapped	1
<input type="checkbox"/> Mansfield	Family	2, 3, 4
<input type="checkbox"/> Mansfield	Elderly/Handicapped	1, 2
<input type="checkbox"/> Marblehead	Family	2, 3
<input type="checkbox"/> Marblehead	Elderly/Handicapped	1
<input type="checkbox"/> Marlborough CDA	Elderly/Handicapped	1

Community	Housing Selection	# of Bedrooms
<input type="checkbox"/> Marshfield	Family	3, 4, 6
<input type="checkbox"/> Marshfield	Elderly/Handicapped	1
<input type="checkbox"/> Marshfield	Congregate Elderly/Handicapped	1
<input type="checkbox"/> Mashpee	Family	3
<input type="checkbox"/> Mashpee	Elderly/Handicapped	1
<input type="checkbox"/> Mattapoisett	Family	2, 3
<input type="checkbox"/> Mattapoisett	Elderly/Handicapped	1
<input type="checkbox"/> Maynard	Elderly/Handicapped	1
<input type="checkbox"/> Medfield	Elderly/Handicapped	1, 2
<input type="checkbox"/> Medford	Elderly/Handicapped	1
<input type="checkbox"/> Medway	Elderly/Handicapped	1
<input type="checkbox"/> Melrose	Family	2, 3, 5
<input type="checkbox"/> Melrose	Elderly/Handicapped	1
<input type="checkbox"/> Mendon	Elderly/Handicapped	1
<input type="checkbox"/> Merrimac	Family	2, 3
<input type="checkbox"/> Merrimac	Elderly/Handicapped	1
<input type="checkbox"/> Methuen	Family	1, 2, 3, 4, 5
<input type="checkbox"/> Methuen	Elderly/Handicapped	1
<input type="checkbox"/> Methuen	Congregate Elderly/Handicapped	1
<input type="checkbox"/> Middleborough	Family	2, 3
<input type="checkbox"/> Middleborough	Elderly/Handicapped	1
<input type="checkbox"/> Middleton	Family	2, 3
<input type="checkbox"/> Middleton	Elderly/Handicapped	1
<input type="checkbox"/> Milford	Family	1, 2, 3, 4, 5
<input type="checkbox"/> Milford	Elderly/Handicapped	1
<input type="checkbox"/> Millbury	Family	1, 2, 3, 4
<input type="checkbox"/> Millbury	Elderly/Handicapped	1
<input type="checkbox"/> Millbury	Congregate Elderly/Handicapped	1



Community	Housing Selection	# of Bedrooms
<input type="checkbox"/> Millis	Family	2, 3
<input type="checkbox"/> Millis	Elderly/Handicapped	1
<input type="checkbox"/> Milton	Family	2, 3
<input type="checkbox"/> Milton	Elderly/Handicapped	1
<input type="checkbox"/> Monson	Family	2, 3, 4
<input type="checkbox"/> Monson	Elderly/Handicapped	1
<input type="checkbox"/> Montague	Family	2, 3
<input type="checkbox"/> Montague	Elderly/Handicapped	1, 2
<input type="checkbox"/> Nahant	Family	2, 3, 4
<input type="checkbox"/> Nahant	Elderly/Handicapped	1
<input type="checkbox"/> Nantucket	Family	2, 3, 4
<input type="checkbox"/> Nantucket	Elderly/Handicapped	1
<input type="checkbox"/> Natick	Family	2, 3, 4
<input type="checkbox"/> Natick	Elderly/Handicapped	1, 2
<input type="checkbox"/> Needham	Elderly/Handicapped	1
<input type="checkbox"/> New Bedford	Family	1, 2, 3, 4
<input type="checkbox"/> New Bedford	Elderly/Handicapped	1, 2
<input type="checkbox"/> Newburyport	Family	2, 3
<input type="checkbox"/> Newburyport	Elderly/Handicapped	1
<input type="checkbox"/> Newton	Family	1, 2, 3
<input type="checkbox"/> Newton	Elderly/Handicapped	1, 2
<input type="checkbox"/> Norfolk	Family	2, 3
<input type="checkbox"/> Norfolk	Elderly/Handicapped	1
<input type="checkbox"/> North Andover	Family	2, 3
<input type="checkbox"/> North Andover	Elderly/Handicapped	1
<input type="checkbox"/> North Andover	Congregate Elderly/Handicapped	1
<input type="checkbox"/> North Attleborough	Family	2, 3
<input type="checkbox"/> North Attleborough	Elderly/Handicapped	1, 2

Community	Housing Selection	# of Bedrooms
<input type="checkbox"/> North Brookfield	Family	2
<input type="checkbox"/> North Brookfield	Elderly/Handicapped	1
<input type="checkbox"/> North Reading	Family	2, 3
<input type="checkbox"/> North Reading	Elderly/Handicapped	1
<input type="checkbox"/> Northampton	Family	1, 2, 3, 4
<input type="checkbox"/> Northampton	Elderly/Handicapped	1, 2
<input type="checkbox"/> Northborough	Family	2, 3
<input type="checkbox"/> Northborough	Elderly/Handicapped	1
<input type="checkbox"/> Northbridge	Elderly/Handicapped	1, 2
<input type="checkbox"/> Norton	Family	2, 3, 4
<input type="checkbox"/> Norton	Elderly/Handicapped	1
<input type="checkbox"/> Norwell	Elderly/Handicapped	1
<input type="checkbox"/> Norwood	Family	2, 3
<input type="checkbox"/> Norwood	Elderly/Handicapped	1
<input type="checkbox"/> Orange	Family	2, 3
<input type="checkbox"/> Orange	Elderly/Handicapped	1
<input type="checkbox"/> Orleans	Family	2, 3, 4
<input type="checkbox"/> Orleans	Elderly/Handicapped	1
<input type="checkbox"/> Oxford	Family	2, 3
<input type="checkbox"/> Oxford	Elderly/Handicapped	1
<input type="checkbox"/> Oxford	Congregate Elderly/Handicapped	1
<input type="checkbox"/> Palmer	Elderly/Handicapped	1
<input type="checkbox"/> Peabody	Family	1, 2, 3, 4
<input type="checkbox"/> Peabody	Elderly/Handicapped	1
<input type="checkbox"/> Peabody	Congregate Elderly/Handicapped	1
<input type="checkbox"/> Pembroke	Family	2, 3, 4
<input type="checkbox"/> Pembroke	Elderly/Handicapped	1



Community	Housing Selection	# of Bedrooms
<input type="checkbox"/> Pepperell	Family	2
<input type="checkbox"/> Pepperell	Elderly/Handicapped	1
<input type="checkbox"/> Pittsfield	Family	2, 3, 4
<input type="checkbox"/> Pittsfield	Elderly/Handicapped	1
<input type="checkbox"/> Plainville	Elderly/Handicapped	1
<input type="checkbox"/> Plymouth	Family	2, 3
<input type="checkbox"/> Plymouth	Elderly/Handicapped	1
<input type="checkbox"/> Provincetown	Family	1, 2, 3
<input type="checkbox"/> Provincetown	Elderly/Handicapped	1
<input type="checkbox"/> Quincy	Family	2, 3, 4
<input type="checkbox"/> Quincy	Elderly/Handicapped	1, 2
<input type="checkbox"/> Randolph	Elderly/Handicapped	1
<input type="checkbox"/> Raynham	Elderly/Handicapped	1
<input type="checkbox"/> Reading	Family	2, 3
<input type="checkbox"/> Reading	Elderly/Handicapped	1
<input type="checkbox"/> Revere	Family	1, 2, 3, 4
<input type="checkbox"/> Revere	Elderly/Handicapped	1
<input type="checkbox"/> Rockland	Elderly/Handicapped	1
<input type="checkbox"/> Rockport	Family	2, 3, 4
<input type="checkbox"/> Rockport	Elderly/Handicapped	1
<input type="checkbox"/> Rowley	Family	2, 3
<input type="checkbox"/> Rowley	Elderly/Handicapped	1
<input type="checkbox"/> Salem	Family	1, 2, 3
<input type="checkbox"/> Salem	Elderly/Handicapped	1
<input type="checkbox"/> Salem	Congregate Elderly/Handicapped	1, 2
<input type="checkbox"/> Salisbury	Elderly/Handicapped	1

Community	Housing Selection	# of Bedrooms
<input type="checkbox"/> Sandwich	Family	2, 3
<input type="checkbox"/> Sandwich	Elderly/Handicapped	1
<input type="checkbox"/> Sandwich	Congregate Elderly/Handicapped	1
<input type="checkbox"/> Saugus	Family	2, 3
<input type="checkbox"/> Saugus	Elderly/Handicapped	1
<input type="checkbox"/> Scituate	Elderly/Handicapped	1
<input type="checkbox"/> Seekonk	Family	2, 3
<input type="checkbox"/> Seekonk	Elderly/Handicapped	1, 2
<input type="checkbox"/> Sharon	Family	2
<input type="checkbox"/> Sharon	Elderly/Handicapped	1
<input type="checkbox"/> Shelburne	Elderly/Handicapped	1, 2
<input type="checkbox"/> Shrewsbury	Family	1, 2, 3
<input type="checkbox"/> Shrewsbury	Elderly/Handicapped	1
<input type="checkbox"/> Somerset	Elderly/Handicapped	1
<input type="checkbox"/> Somerville	Family	1, 2, 3
<input type="checkbox"/> Somerville	Elderly/Handicapped	1
<input type="checkbox"/> South Hadley	Family	2, 3, 4
<input type="checkbox"/> South Hadley	Elderly/Handicapped	1
<input type="checkbox"/> Southborough	Family	2, 3
<input type="checkbox"/> Southborough	Elderly/Handicapped	1
<input type="checkbox"/> Southbridge	Family	3, 4
<input type="checkbox"/> Southbridge	Elderly/Handicapped	1
<input type="checkbox"/> Southwick	Family	3, 4
<input type="checkbox"/> Southwick	Elderly/Handicapped	1
<input type="checkbox"/> Spencer	Family	3
<input type="checkbox"/> Spencer	Elderly/Handicapped	1
<input type="checkbox"/> Spencer	Congregate Elderly/Handicapped	1



Community	Housing Selection	# of Bedrooms
<input type="checkbox"/> Springfield	Family	3
<input type="checkbox"/> Springfield	Elderly/Handicapped	1, 2
<input type="checkbox"/> Springfield	Congregate Elderly/Handicapped	1
<input type="checkbox"/> Sterling	Elderly/Handicapped	1
<input type="checkbox"/> Stockbridge	Elderly/Handicapped	1, 2
<input type="checkbox"/> Stoneham	Family	2, 3
<input type="checkbox"/> Stoneham	Elderly/Handicapped	1
<input type="checkbox"/> Stoughton	Family	2, 3, 4
<input type="checkbox"/> Stoughton	Elderly/Handicapped	1
<input type="checkbox"/> Stoughton	Congregate Elderly/Handicapped	1
<input type="checkbox"/> Sudbury	Family	2, 3, 4
<input type="checkbox"/> Sudbury	Elderly/Handicapped	1
<input type="checkbox"/> Sutton	Elderly/Handicapped	1
<input type="checkbox"/> Swampscott	Family	2, 3
<input type="checkbox"/> Swampscott	Elderly/Handicapped	1
<input type="checkbox"/> Swansea	Elderly/Handicapped	1
<input type="checkbox"/> Taunton	Family	1, 2, 3, 4
<input type="checkbox"/> Taunton	Elderly/Handicapped	1
<input type="checkbox"/> Templeton	Family	2, 3
<input type="checkbox"/> Templeton	Elderly/Handicapped	1, 2
<input type="checkbox"/> Tewksbury	Family	2, 3, 4
<input type="checkbox"/> Tewksbury	Elderly/Handicapped	1
<input type="checkbox"/> Topsfield	Elderly/Handicapped	1
<input type="checkbox"/> Tyngsborough	Family	2, 3
<input type="checkbox"/> Tyngsborough	Elderly/Handicapped	1
<input type="checkbox"/> Tyngsborough	Congregate Elderly/Handicapped	1
<input type="checkbox"/> Upton	Elderly/Handicapped	1

Community	Housing Selection	# of Bedrooms
<input type="checkbox"/> Uxbridge	Family	2, 3
<input type="checkbox"/> Uxbridge	Elderly/Handicapped	1
<input type="checkbox"/> Wakefield	Family	2
<input type="checkbox"/> Wakefield	Elderly/Handicapped	1
<input type="checkbox"/> Walpole	Family	2, 3
<input type="checkbox"/> Walpole	Elderly/Handicapped	1
<input type="checkbox"/> Waltham	Family	1, 2, 3, 4
<input type="checkbox"/> Waltham	Elderly/Handicapped	1
<input type="checkbox"/> Waltham	Congregate Elderly/Handicapped	1
<input type="checkbox"/> Ware	Family	2, 3, 4
<input type="checkbox"/> Ware	Elderly/Handicapped	1
<input type="checkbox"/> Wareham	Elderly/Handicapped	1
<input type="checkbox"/> Warren	Family	2, 3
<input type="checkbox"/> Warren	Elderly/Handicapped	1, 2
<input type="checkbox"/> Watertown	Family	1, 2, 3, 4, 5
<input type="checkbox"/> Watertown	Elderly/Handicapped	1
<input type="checkbox"/> Webster	Family	1, 2, 3
<input type="checkbox"/> Webster	Elderly/Handicapped	1
<input type="checkbox"/> Wellesley	Family	2, 3
<input type="checkbox"/> Wellesley	Elderly/Handicapped	1
<input type="checkbox"/> Wenham	Elderly/Handicapped	1
<input type="checkbox"/> West Boylston	Family	2, 3
<input type="checkbox"/> West Boylston	Elderly/Handicapped	1
<input type="checkbox"/> West Bridgewater	Elderly/Handicapped	1
<input type="checkbox"/> West Brookfield	Family	2, 3
<input type="checkbox"/> West Brookfield	Elderly/Handicapped	1
<input type="checkbox"/> West Newbury	Family	3
<input type="checkbox"/> West Newbury	Elderly/Handicapped	1



Community	Housing Selection	# of Bedrooms
<input type="checkbox"/> West Springfield	Family	2, 3, 4
<input type="checkbox"/> West Springfield	Elderly/Handicapped	1
<input type="checkbox"/> Westborough	Family	2, 3
<input type="checkbox"/> Westborough	Elderly/Handicapped	1
<input type="checkbox"/> Westborough	Congregate Elderly/Handicapped	1
<input type="checkbox"/> Westfield	Family	2, 3, 4
<input type="checkbox"/> Westfield	Elderly/Handicapped	1, 2
<input type="checkbox"/> Westford	Family	2, 3
<input type="checkbox"/> Westford	Elderly/Handicapped	1
<input type="checkbox"/> Westport	Elderly/Handicapped	1
<input type="checkbox"/> Weymouth	Family	1, 2, 3, 4, 5
<input type="checkbox"/> Weymouth	Elderly/Handicapped	1
<input type="checkbox"/> Whitman	Family	3, 4
<input type="checkbox"/> Whitman	Elderly/Handicapped	1
<input type="checkbox"/> Wilbraham	Family	2, 3
<input type="checkbox"/> Wilbraham	Elderly/Handicapped	1
<input type="checkbox"/> Williamstown	Family	2, 3, 4
<input type="checkbox"/> Williamstown	Elderly/Handicapped	1
<input type="checkbox"/> Wilmington	Family	1, 3
<input type="checkbox"/> Wilmington	Elderly/Handicapped	1

Community	Housing Selection	# of Bedrooms
<input type="checkbox"/> Winchendon	Family	2, 3
<input type="checkbox"/> Winchendon	Elderly/Handicapped	1
<input type="checkbox"/> Winchendon	Congregate Elderly/Handicapped	1
<input type="checkbox"/> Winchester	Family	2, 3
<input type="checkbox"/> Winchester	Elderly/Handicapped	1
<input type="checkbox"/> Winthrop	Family	1, 2, 3, 4
<input type="checkbox"/> Winthrop	Elderly/Handicapped	1
<input type="checkbox"/> Woburn	Family	2, 3
<input type="checkbox"/> Woburn	Elderly/Handicapped	1
<input type="checkbox"/> Worcester	Family	1, 2, 3, 4
<input type="checkbox"/> Worcester	Elderly/Handicapped	1
<input type="checkbox"/> Wrentham	Family	2, 3, 4
<input type="checkbox"/> Wrentham	Elderly/Handicapped	1
<input type="checkbox"/> Yarmouth	Elderly/Handicapped	1

