

HOUSING QUESTIONNAIRE FOR LEVERETT RESIDENTS 55 AND OLDER

The Leverett Affordable Housing Trust is collecting information about the housing needs of residents in Leverett so as people age they can continue to live in Leverett if they choose to. We want to know what your needs, goals and plans are so we can research resources and programs that are most appropriate. No identifying information is requested.

Family members and caregivers are also encouraged to complete this questionnaire. Check here if you are a caregiver or family member NO REPLIES

Additional copies are available at Town Hall (front entrance) and on the Town website.

PLEASE RETURN QUESTIONNAIRE BY OCTOBER 31 (details below)

How long have you lived in Leverett:

Less than 10 years 3 10 – 20 years 7 more than 20 years 38

Live alone 12 With spouse/partner 32 With family or others 8

Your age and ages of others living with you: See Overview for information

Rent 1 Own Home 46 Mortgage: Yes 14 No 21

Do you plan to remain in your current residence as you age?

Yes 22 No 4 Maybe 30

If No or Maybe: Check all that may apply

- 19 Move to another Town/area with lower housing costs/taxes
- 19 Move to area with more accessible services (stores, transportation, etc.)
- 13 Move because of availability of Senior Housing with more services
- 8 Move to smaller residence in Leverett/smaller house
- 6 Move to be closer to, or live with, family
- Other/Comments:

(Continued on reverse side)

If Yes or Maybe: what financial and/or support services might you need to remain in your home?

Tax relief__28___ Home repair/modification__22___
Home/Health Care __22___
Transportation help__23___ Home maintenance help__31___
Other/Comments:

Would you choose to remain in Leverett (or seriously consider the option) if some type of Senior Housing facility was available at the same or lower cost to you?

Yes__22___ No__13___ Maybe__10___

If Yes or Maybe, what type of housing would you be interested in? Check all that apply

Rental unit __12___ Condominium__18___ Small Senior Community__16___
Mixed age housing__17___
Other/Comments:

What services would you like included:

Transportation__28___ Maintenance__30___ Health assistance__19___
Other services:

What is your (including spouse/partner) current annual income:

under \$20,000__3___ \$20,000-\$50,000__13___ over \$50,000__31___

In the future my income is likely going to be:

Under \$20,000__5___ \$20,000-\$50,000__16___ over \$50,000__25___

Are you aware of local and State tax relief and home repair/maintenance assistance programs for seniors? Yes__17___ No__26___

Have you ever received this assistance? Yes__4___ No__42___

Other Comments and Suggestions: As you, or your family member, plan for the future, what are your most critical needs, concerns, and mainly suggestions? Please provide as specific information as possible to help the Affordable Housing Trust consider options for Leverett. Please attach additional sheet with your comments.

**RETURN QUESTIONNAIRE BY OCTOBER 31 to the Senior Housing Survey Box
Town Hall front entrance or mail to: Town of Leverett, Attn: Senior Survey,
9 Montague Road, Leverett, MA 01054. Additional copies available at Town Hall front
entrance and on the Town website.**

THANK YOU FOR YOUR HELP!