9115 LAMONT AVENUE APARTMENTS INC 9115 Lamont Avenue Elmhurst, NY 11373

APARTMENT#:

Enclosed is your application to purchase the above-mentioned apartment. The purpose of this application is to permit the Admissions Committee and the Board of Directors of 9115 LAMONT AVENUE APARTMENTS INC.. to expeditiously process your request to purchase. Please answer all questions. Do not leave any questions blank or unanswered. If the questions do not apply to your situation, write N/A (not applicable) in the space provided. THE COMMITTEE AND BOARD WILL NOT PROCESS AN INCOMPLETE APPLICATION. APPLICATIONS WHICH DO NOT HAVE ALL OF THE SUPPORTING DOCUMENTATION WILL BE CONSIDERED INCOMPLETE AND MAY BE SUMMARILY REJECTED BY THE ADMISSIONS COMMITTEE. It is strongly recommended that you submit this application as soon as possible to avoid any delay in the approval process. Before this application can be processed, the following information must be forwarded to the Admissions Committee:

- 1. Letter from current employer verifying salary, position, length of employment and the likelihood of continued employment. (Please note we do not request employment verification by internet).
- 2. Statements for ALL banks or financial institutions where funds are held confirming present balance or three (3) month of bank statements from all institutions.
- 3. Letter from current landlord verifying status of tenancy.
- 4. Three (3) letters of personal reference from persons other than relatives.
- 5. Copy of Contract of Sale.
- 6. Copy of Mortgage Commitment Letter.
- 7. Most recent tax returns, State and Federal, with W-2 Form and schedules attached.
- 8. Most recent pay stub.
- 9. Signed and Notarized acceptance of House Rules and Pet Affidavit.
- 10. Signed Credit Release and a Non-refundable credit fee in the form of a Certified Check or Money Order payable to First Management Corp. must accompany application.
 - \$30.00 for a single individual \$40.00 for a married couple \$50.00 for two single individuals
- _____11. A non-refundable application fee in the form of a **Certified Check** or **Money Order** must accompany the **application**, payable as follows:

\$150.00 made payable to FIRST MANAGEMENT CORP.

12. A refundable move in fee of \$500.00 and a move out fee of \$500.00 in the form of a Certified Check or Money Order made payable to 9115 Lamont Avenue Apartments Inc.

If you are self employed, you must furnish the following additional information:

- 13. Business financial statement.
- _____14. Business tax returns for the last three (3) years.
- _____15. Supplier credit reference.

PLEASE NOTE THERE WILL BE A FLIP TAX OF 10% OF THE DIFFERENCE BETWEEN THE ORIGINAL PURCHASE PRICE AND SELLING PRICE.

Please note that the application and all supporting documentation submitted must remain the property of 9115 Lamont Avenue Apartments Inc. Submit the application to:

Applications Department c/o First Management Corp. 34-03 Broadway, Astoria, NY 11106

All questions in connection with your application should be referred to the Applications Dept. at (718) 726-4792 from Monday thru Friday 10 a.m. to 5 p.m.

After review by the Admissions Committee, applicant(s) will be contacted to arrange for a personal interview. The interview must be attended by all applicant(s). Upon the conclusion of the interview, the Committee will submit recommendation to the Board of Directors. The Board will then act upon the application and advise you of its decision. PLEASE ALLOW FOUR (4) TO SIX (6) WEEKS FOR THE ENTIRE APPLICATION PROCESS.

Please Note:

The Board of Directors may require further information and may request that the Applicant(s) appear for personal interview or interviews.

The Applicant is advised that its application is subject to the approval of the Board of Directors without which the proposed purchase may not be consummated. In this regard, the Applicant is directed to the By-Laws of <u>9115 Lamont Avenue Apartments Inc.</u> and the provisions of the Proprietary Lease.

The Applicant is directed to the Proprietary Lease and House Rules which govern the occupancy of <u>9115</u> <u>Lamont Avenue Apartments Inc.</u> by its residents and which would govern the occupancy of the Applicant.

In no event will <u>9115 Lamont Avenue Apartments Inc.</u> the Board of Directors or its agents be responsible for any liabilities or expenses incurred by any Applicant whose application is disapproved. While the Board of Directors will attempt to promptly review all applications, <u>9115 Lamont Avenue Apartments Inc.</u> the Board of Directors and its agents assume no responsibility for expenses or liabilities resulting from any delay in its review.

<u>9115 Lamont Avenue Apartments Inc.</u> the Board of Directors or its agents, assume no responsibilities for expenses or liabilities resulting from any delay in closing of title or occupancy of apartment.

Please note that ANY AND ALL TERMS AGREED UPON concerning the purchase of the Shares of Stock pertaining to this apartment, including the terms of payment, return of down-payment, etc., ARE STRICTLY between the Seller(s) and Purchaser(s), and the Cooperative Corporation is not a party to the transaction and assumes no responsibility whatsoever in connection with any claim that may arise from these transactions between the Seller(s) and Purchaser(s).

The applicant is advised that falsification of any of the foregoing information or omission of material information herefrom may result, without limitations, in revocation of the Board of Directors approval and termination of the Applicant's Proprietary Lease.

The undersigned hereby authorize(s) the Board of Directors to contact any of the employers, banks, landlords, educational institutions, references, etc., application, including Credit reporting agencies.

Subletting of any kind is not permissible without the express written consent of the Board of Directors of <u>9115 Lamont Avenue Apartments Inc.</u>

THE UNDERSIGNED CERTIFIES THAT THE INFORMATION FURNISHED HEREIN IS TRUE:

APPLICANT:

APPLICANT:

So agreed:	

State of) County of)

Sworn to before me this _____ of 201___.

NOTARY PUBLIC

DATE:

I.	PURCHASE INFORMATION		
Apartm	nent #: Number of Shares:		Apartment Size:
Seller:		Telephone #:	
Current	t Address:	-	
Broker			
	ATTORNEY INFORMATION		
	APPLICANT'S ATTORNEY		SELLER'S ATTORNEY
Name:		Name:	
Telepho	one #:	Telephone #:	
Addres	S:	Address:	
П.	PERSONAL INFORMATION		
APPLIC		CO-APPLICANT:	
Addres		Address:	
Addies		Add(033.	
Own:	Rent:	Own:	Rent:
Phone:		Phone: (Cell)	
FIIUIIE.		. ,	
	(Email)	(Email)	
DOB:	SS#:	DOB:	SS#:
	Status:	Marital Status:	
Name c	of Dependents:		
Name(s	s) stock will be held in:		
-	, Tional Background And/or Vocational Train		
	SCHOOL/COLLEGE	DATES ATTEN	DED GRADUATED
Applica		BRIEGRATER	
Co-App	plicant:		
Do you	own any cars: Year/Make/Model:		
•	of <u>ALL</u> other persons who will occupy apartment:		
NAME	RELATIONSHIP TO	APPLICANT	AGE
Name a	and telephone numbers of any residents of Co-operativ	e who know the App	licant(s):
III.	PURCHASE TERMS		
	1. Purchase Price:	2. Amount to be	e Financed:
	3. Approx. Monthly Financing Costs:		
	5. Total (Lines 3 + 4):		
	6. State Source of Unfinanced Portion of Purchase	Price:	

IV. INCOME AND EMPLOYME	<u>INT</u>			
APPLICANT		CO-APPLICANT		
1. Current Base Salary				
Annual: Monthly:	Annual:	Monthly:		
Other Income (Bonuses, Overtime, Inte	rest, etc.): Other Incom	e (Bonuses, Overtime, Interest, etc.):		
2. Present Employer:				
Contact Person:	Contact Pers	son:		
Company:	Company:			
Address:	Address:	Telephone #: Position Held:		
Telephone #:	Telephone #			
Position Held:	Position Hel			
Nature of Business:	Nature of Bu			
Period of Employment:	Period of Em	nployment:		
3. Previous Employer				
Contact Person:	Contact Pers	son:		
Company:				
Address:	Address:			
Telephone #:	Telephone #			
Position Held:	Position Hele	d:		
Nature of Business:	Nature of Bu			
Period of Employment:		nployment:		
IF THE PAST 2 POSITIONS OF EN EMPLOYMENT HISTORY ON A SEPARA		LESS THAN 5 YEARS, LIST FURTHER		
4. Self-Employment				
Name and Nature of Business:				
Address:				
Years Applicant has been in this busin	ess:			
Age of Business:	Percentage Owned	l:		
Is this a Family Business:	Relationship to Ow	/ner(s):		
Business Sales:	Net Worth:			
V. <u>ASSETS</u> A. CASH (Including Money Funds	s or Equivalents):			
Bank Tyr	be of Account & Account Number	Current Balance		
B. STOCKS AND BONDS				
Description of Security	<u>Market Value Per Unit</u>	Number of Units		

Total	Value	of Sec	urities:

C. REAL ESTATE

Current Residence (Disregard if a rental):				
Address:				
Holder(s) of Title:				
Mortgage Indebtedness: <u>\$</u>	Monthly Mortgage Costs: <u>\$</u>			
Other Monthly Expenses (Utilities, Taxes, etc.):	\$			
Do you plan to sell your current residence if approved	d?:			
If so, have you entered into a Contract of Sale?:	Closing Date:			
Will mortgage be paid upon sale?:				
D. OTHER REAL ESTATE				
Location:				
Туре:	Extent of Ownership:			
Market Value: <u>\$</u>	Mortgage Indebtedness: <u>\$</u>			
Annual Expenses: <u>\$</u>	Annual Income: <u>\$</u>			
VI. <u>LIABILITIES</u>				
NAME OF ORIGINAL TYPE <u>CREDITOR</u> AMOUNT	OUTSTANDINGMONTHLY# OF MONTHSAMOUNTPAYMENTSREMAINING			
Do you pay alimony or child support?	Monthly Payments: <u>\$</u>			
Are you a Guarantor of another's indebtedness?: If so, describe:				
VI. <u>Residences</u>				
If you own your own home, DO NOT complete this see	ction.			
Present Landlord:	Telephone #:			
Rent: <u>\$</u>	Dates of Occupancy:			
Previous Landlord:	Telephone #:			
Rent: <u>\$</u>	Dates of Occupancy:			
Please provide any information not contained in th Committee in evaluating your application. (Use space	ne application that you feel would be helpful to the Admissions e below and additional sheets if necessary.)			

FAIR CREDIT REPORT ACT

PRE-NOTIFICATION

This is to inform you that as part of our procedure for processing your application, an investigative consumer report may be made whereby information is obtained through consumer credit agencies, personal interviews with third parties, such as family members, business associates, financial sources, friends, neighbors or others with whom you are acquainted. This inquiry includes information as to your character, general reputation, personal characteristics and mode of living, whichever may be applicable. You have the right to make a written request within a reasonable period of time for a complete and accurate disclosure of additional information concerning the nature and scope of the investigation.

DATE

APPLICANT'S SIGNATURE

DATE

APPLICANT'S SIGNATURE