

DORIAN OWNERS INC.
72-11 110th Street
Forest Hills, NY 11375

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 Dorian Owners 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 for the last two (2) months.
- _____ 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 and Recognition Agreements
- _____ 7. Last two (2) years 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.
- _____ 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.**
\$250.00 made payable to **DORIAN OWNERS INC.**
- _____ 12. Submit **ONE (1)** original set and **THREE (3)** copies with social security #'s and account # blocked.

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 an administration fee of \$1,500.00 will be collected from the seller at the time of closing.

Please note that the application and all supporting documentation submitted must remain the property of Dorian Owners 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 **DORIAN OWNERS INC.** and the provisions of the Proprietary Lease.

The Applicant is directed to the Proprietary Lease and House Rules which govern the occupancy of **DORIAN OWNERS INC.** by its residents and which would govern the occupancy of the Applicant.

In no event will **DORIAN OWNERS INC.** 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, **DORIAN OWNERS INC.** the Board of Directors and its agents, assume no responsibility for expenses or liabilities resulting from any delay in its review.

DORIAN OWNERS INC. 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.

First Management Corp. and the Board of Directors of the Dorian Owners Inc. does not and shall not discriminate on the basis of race, color, religion (creed), gender, gender expression, age, national origin (ancestry), disability, marital status, sexual orientation, or military status, in any of its activities or operations.

Subletting of any kind is not permissible without the express written consent of the Board of Directors of **DORIAN OWNERS INC.**

THE UNDERSIGNED CERTIFIES THAT THE INFORMATION FURNISHED HEREIN IS TRUE:

APPLICANT: _____

APPLICANT: _____

State of)
County of)

Sworn to before me this _____
day of _____ of 20____.

NOTARY PUBLIC

DATE: _____

I. PURCHASE INFORMATION

Apartment #: _____ Number of Shares: _____ Apartment Size: _____
Seller: _____ Telephone #: _____
Current Address: _____
Broker: _____

ATTORNEY INFORMATION

APPLICANT'S ATTORNEY

SELLER'S ATTORNEY

Name: _____
Telephone #: _____
Address: _____

Name: _____
Telephone #: _____
Address: _____

II. PERSONAL INFORMATION

APPLICANT: _____
Address: _____

CO-APPLICANT: _____
Address: _____

Own: _____ Rent: _____
Phone: (Cell) _____
(E-mail) _____

Own: _____ Rent: _____
Phone: (Cell) _____
(E-mail) _____

DOB: _____ SS#: _____

DOB: _____ SS#: _____

Marital Status: _____

Marital Status: _____

Name of Dependents: _____

Name(s) stock will be held in: _____

EDUCATIONAL BACKGROUND AND/OR VOCATIONAL TRAINING:

	<u>SCHOOL/COLLEGE</u>	<u>DATES ATTENDED</u>	<u>GRADUATED</u>
Applicant:	_____	_____	_____
Co-Applicant:	_____	_____	_____

Do you own any cars: _____ Year/Make/Model: _____

Name of ALL other persons who will occupy apartment:

<u>NAME</u>	<u>RELATIONSHIP TO APPLICANT</u>	<u>AGE</u>
_____	_____	_____
_____	_____	_____

Name and telephone numbers of any residents of Co-operative who know the Applicant(s): _____

III. PURCHASE TERMS

- Purchase Price: _____
- Amount to be Financed: _____
- Approx. Monthly Financing Costs: _____
- Monthly Maintenance: _____
- Total (Lines 3 + 4): _____
- State Source of Unfinanced Portion of Purchase Price: _____

IV. INCOME AND EMPLOYMENT

APPLICANT

CO-APPLICANT

1. Current Base Salary

Annual: _____ Monthly: _____

Annual: _____ Monthly: _____

Other Income (Bonuses, Overtime, Interest, etc.):

Other Income (Bonuses, Overtime, Interest, etc.):

2. Present Employer:

Contact Person: _____

Contact Person: _____

Company: _____

Company: _____

Address: _____

Address: _____

Telephone #: _____

Telephone #: _____

Position Held: _____

Position Held: _____

Nature of Business: _____

Nature of Business: _____

Period of Employment: _____

Period of Employment: _____

3. Previous Employer

Contact Person: _____

Contact Person: _____

Company: _____

Company: _____

Address: _____

Address: _____

Telephone #: _____

Telephone #: _____

Position Held: _____

Position Held: _____

Nature of Business: _____

Nature of Business: _____

Period of Employment: _____

Period of Employment: _____

IF THE PAST 2 POSITIONS OF EMPLOYMENT HAVE LASTED FOR LESS THAN 5 YEARS, LIST FURTHER EMPLOYMENT HISTORY ON A SEPARATE SHEET OF PAPER.

4. Self-Employment

Name and Nature of Business: _____

Address: _____

Years Applicant has been in this business: _____

Age of Business: _____

Percentage Owned: _____

Is this a Family Business: _____

Relationship to Owner(s): _____

Business Sales: _____

Net Worth: _____

V. ASSETS

A. CASH (Including Money Funds or Equivalents):

<u>Bank</u>	<u>Type of Account & Account Number</u>	<u>Current Balance</u>
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B. STOCKS AND BONDS

<u>Description of Security</u>	<u>Market Value Per Unit</u>	<u>Number of Units</u>
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Total Value of Securities: _____

C. REAL ESTATE

Current Residence (Disregard if a rental): _____

Address: _____

Holder(s) of Title: _____

Mortgage Indebtedness: \$ _____ Monthly Mortgage Costs: \$ _____

Other Monthly Expenses (Utilities, Taxes, etc.): \$ _____

Do you plan to sell your current residence if approved?: _____

If so, have you entered into a Contract of Sale?: _____ Closing Date: _____

Will mortgage be paid upon sale?: _____

D. OTHER REAL ESTATE

Location: _____

Type: _____ Extent of Ownership: _____

Market Value: \$ _____ Mortgage Indebtedness: \$ _____

Annual Expenses: \$ _____ Annual Income: \$ _____

VI. LIABILITIES

<u>TYPE</u>	<u>NAME OF CREDITOR</u>	<u>ORIGINAL AMOUNT</u>	<u>OUTSTANDING AMOUNT</u>	<u>MONTHLY PAYMENTS</u>	<u># OF MONTHS REMAINING</u>

Do you pay alimony or child support? _____ Monthly Payments: \$ _____

Are you a Guarantor of another's indebtedness?: _____

If so, describe: _____

VI. RESIDENCES

If you own your own home, DO NOT complete this section.

Present Landlord: _____ Telephone #: _____

Rent: \$ _____ Dates of Occupancy: _____

Previous Landlord: _____ Telephone #: _____

Rent: \$ _____ Dates of Occupancy: _____

Please provide any information not contained in the application that you feel would be helpful to the Admissions Committee in evaluating your application. (Use space 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