

SAMPLE COOP APPLICATION

The following is a list of the items you are required to submit for the Board of Directors to review your application. Please be certain to provide ALL of the information requested. **All packages must include a Table of Contents with color dividers.** The Board requires prospective purchasers to submit three (3) collated copies of the following documents and information to the attention of the Closing Department

1. Purchase application (attached)
2. Fully Executed Contract of Sale
3. Landlord/managing agent reference letter
4. A letter from the prospective purchaser's employer verifying annual salary, position held & length of employment. If self-employed please provide a letter from your accountant detailing the same.
5. Letter from bank(s) stating types of account, and amounts on deposit. Please include account numbers.
6. Statement of Financial Condition showing all personal assets and liabilities with documentation (brokerage statements, bank statements, etc.) supporting all assets listed for the most recent two months (attached)
7. Three personal reference letters
8. Submission of the preceding two (2) years Federal Income Tax returns (complete with schedules and W-2's).
9. Three (3) recent and consecutive pay stubs
10. Consent Form (attached)
11. Two (2) forms of personal identification must be submitted with this application
12. Fully executed certificate of foreign status (attached)
13. Lead Based Disclosure Form (attached)
14. Window Guard Form (attached)
15. Door Protocol form (attached)
16. Emergency Contact Information (attached)

*****This application was created using Adobe Acrobat. The forms can be opened, filled out, and printed using Adobe Acrobat or Adobe Acrobat Reader (versions 5.0 and above). If you do not have Adobe Acrobat Reader on your computer, you can download it free of charge from www.adobe.com. Where a signature is required, please sign after printing the application. Electronic signatures are not permitted.***

IF PURCHASE IS BEING FINANCED:

1. Loan Application
 2. Letter of Commitment
 3. Three original Recognition Agreements (Aztech form only).
- *No more than 80% of the purchase price may be financed)*

Fees to be submitted with application (CERTIFIED CHECKS OR MONEY ORDERS ONLY):

1. \$125.00 credit report fee, per applicant, payable to (non-refundable)
2. \$600.00 application fee, payable to (non-refundable)
3. \$1,000.00 move-in fee payable to (non-refundable)
4. \$1,000.00 move-in deposit payable (refundable)
5. \$1,000.00 move-out fee payable to (non-refundable)
6. \$1,000.00 move-out deposit payable to (refundable)

If the purchaser(s) is/are approved, the following checks will be required at closing:

Closing Fees –Seller

1. \$750.00 Closing Fee payable to
2. \$0.05 per share transfer stamp tax payable to

Closing Fees – Purchaser

3. \$300.00 Recognition Agreement Fee, if applicable payable to

If closing occurs after the 15th of the month, the following month's maintenance will be collected.

Notes:

- All applications must be submitted no later than the first Monday of every month. If the submitted application is acceptable, an interview between the purchaser(s) and the Board of Directors will be granted, normally on the third Wednesday of every month.
- Incomplete applications will not be considered.
- Prospective applicants will only be interviewed at the night of the monthly board meeting without exception.
- Ensure all forms/contracts are signed and initialed where necessary by all relevant parties.
- All supporting documentation must be submitted in English (if original is in another language, please provide both original and translated versions).
- The amounts set forth on the Financial Statement form must be equal to the amounts on the supporting documentation.
- Financial Statement amounts and all supporting documentation must be in USD. If funds are held in overseas accounts, a certified bank letter verifying the USD value must accompany said documentation.
- Bank statements must clearly show Applicant's name and mailing address.
- The Work Number is not an acceptable form of employment verification.
- Reference letters must be unique and signed (email is not acceptable).
- No application will be presented to the Board where the shareholder is not current in all obligations, monetary and otherwise, to

COOPERATIVE
PURCHASE APPLICATION

APPLICANT'S Name _____ S.S. # _____
(Name(s) must be entered above in manner that Stock Certificate and other documents are to be drawn)

APPLICANT'S Name _____ S.S. # _____

Applicant's Attorney _____ Telephone _____

Attorney's Firm and Address _____

SELLER'S Name _____ S.S. # _____

Seller's Telephone _____ Forward Address _____

Seller's Attorney _____

Attorney's Firm and Address _____ Telephone _____

Closing Date and Time _____ Date of Possession _____

The undersigned hereby offers to purchase _____ shares of the capital stock/percent
of the common interest of _____ and the accompanying proprietary lease for Apartment # _____ in
the building located at _____ Street, New York, NY _____ on the following terms and conditions:

Purchase Price of Stock \$ _____

Current Estimated Maintenance Charges per month \$ _____

Deposit _____ Required Cash Down: _____

FINANCING - NO

YES AMOUNT _____

BANK _____ Address _____

Broker _____ Firm _____

Address _____ Phone _____

INFORMATION REGARDING APPLICANT(S)

Home Address _____

Telephone _____

Business or Professional Affiliation and Position _____

Business Address _____

Telephone _____

Names of all persons and relationships who will reside in the apartment and if children, please state number and their approximate
ages _____

Name of all residents in the building known by the applicant _____

Does applicant wish to maintain any pets, and if so, please specify _____

Does applicant have any alteration plans for the apartment NO YES
Specify _____

REFERENCES

LANDLORD

Present Landlord or Agent _____

Address _____

Approximate Length of Occupancy _____

Previous Landlord or Agent _____

Address _____

Address of previous residence and approximate length of occupancy _____

FINANCIAL

a. Bank (Personal Account) _____

Address _____

b. Bank (Personal Account) _____

Address _____

c. Bank (Business Account) _____

Address _____

d. Stock Broker, C.P.A., Executor, if any _____

Address _____

e. For information regarding source(s) of income, contact _____

BUSINESS/PROFESSIONAL

1. Name _____

Address _____

2. Name _____

Address _____

3. Name _____

Address _____

4. Name _____

Address _____

SPECIAL REMARKS

Please give any additional information which may be pertinent or helpful _____

The undersigned hereby affirms that the information contained in this application is true and accurate to the best of his/her knowledge and belief.

Signature of Purchase Applicant

Signature of Spouse/Co-Applicant

All information above has been supplied by the applicant(s), and implied, as to the accuracy or completeness thereof.

, make no representations, nor are any

Financial Statement

Applicant: _____ Co-Applicant: _____

Address: _____ Address: _____

The following is submitted as being a true and accurate statement of the financial condition of the undersigned on the:

_____ day of _____ 20__

ASSETS			LIABILITIES		
	Applicant	Co-Applicant		Applicant	Co-Applicant
Cash in banks (Schedule A)			Notes Payable (Schedule E)		
Money Market Funds			To Banks		
Contract Deposit			To Relatives		
Investments: Stocks and Bonds (Schedule B)			To Others		
Investments in Own Business			Installment Accounts Payable:		
Accounts and Notes Receivable			Automobile		
Real Estate Owned (Schedule C)			Other		
Automobiles:			Other Accounts Payable		
Year			Mortgages Payable on Real Estate (Schedule F)		
Make			Unpaid Real Estate Taxes		
Personal Property and Furniture			Unpaid Income Taxes		
Life Insurance			Chattel Mortgages		
Cash Surrender Value			Loans on Life Insurance Policies (Include Premium Advances)		
Retirement Funds/ IRA			Outstanding Credit Card Debt		
401K			Other Debts (Schedule G)		
KEOGH			TOTAL LIABILITIES		
Profit Sharing/ Pension Plan			NET WORTH		
Other Assets (Schedule D)					
TOTAL ASSETS					
COMBINED ASSETS			COMBINED LIABILITIES		

SOURCES OF INCOME / MONTHLY			PROJECTED EXPENSES / MONTHLY		
	Applicant	Co-Applicant		Applicant	Co-Applicant
Base Salary			Maintenance		
Overtime Wages			Apartment Financing		
Bonus and Commissions			Other Mortgages		
Dividends and Interest Income			Bank Loans		
Real Estate Income (Net)			Auto Loans		
Other Income Including Gifts (Schedule H)			Other:		
TOTAL			TOTAL		
COMBINED TOTAL			COMBINED TOTAL		

GENERAL INFORMATION			CONTINGENT LIABILITIES	
	Applicant	Co-Applicant		
Personal Bank Accounts at			An Endorser or Co-maker on Notes	
Savings and Loan Accounts at			Allimony Payments (Annual)	
Purpose of Loan			Child Support	
			Are you a defendant in any legal action?	<input type="checkbox"/> Yes <input type="checkbox"/> No
			Are there any unsatisfied judgments?	<input type="checkbox"/> Yes <input type="checkbox"/> No
			Have you ever taken bankruptcy? Explain:	<input type="checkbox"/> Yes <input type="checkbox"/> No

Itemized Schedules

Please include verification statements and proof of liquid assets as required by your coop or condo.

A: ITEMIZED SCHEDULE OF CASH

Applicant or Co-Applicant	Financial Institution	Type of Account	Account Balance

B: ITEMIZED SCHEDULE OF STOCKS AND BONDS

Amount/ No. of Shares	Description	Marketable Value	Non-Marketable Value

C: ITEMIZED SCHEDULE OF REAL ESTATE

Description and Location	Date Acquired	Cost	Actual Value	Mortgage Amount	Maturity Date	Monthly Operating Costs	Residential or Commercial (If commercial, what are the gross rents?)

D: ITEMIZED SCHEDULE OF OTHER ASSETS

Description	Amount

E: ITEMIZED SCHEDULE OF NOTES PAYABLE

To Whom Payable	Date	Amount	Due	Interest	Pledged as Security
				0.0000%	
				0.0000%	
				0.0000%	
				0.0000%	

F: ITEMIZED SCHEDULE OF MORTGAGES PAYABLE

To Whom Payable	Mortgage Amount	Principal Remaining	Maturity Date

G: ITEMIZED SCHEDULE OF OTHER LIABILITIES

Description	Amount	Date	Payments	Security

H: ITEMIZED SCHEDULE OF OTHER INCOME

Source	Amount Last Year	is this recurring?

IF YOU ARE A PRINCIPAL OF OR ARE EMPLOYED BY A FAMILY BUSINESS, PLEASE COMPLETE THIS SECTION:

	Applicant	Co-Applicant
Dividend or partnership income (present year)		
Dividend or partnership income (prior year)		
Dividend or partnership income (second prior year)		

The foregoing application has been carefully prepared, and the undersigned hereby solemnly declare(s) and certify(s) that all information contained herein is complete, true, and correct. The information is submitted as being a true and accurate statement of the financial condition of the undersigned on the _____ day of _____, 20__.

X _____ Date _____
 Applicant

X _____ Date _____
 Co-Applicant

CONSENT FORM – DISCLOSURE OF INFORMATION

Applicant

Name: _____
Date of Birth: _____ Social Security #: _____
Home Address: _____
City: _____ State: _____ Zip: _____

Co-Applicant

Name: _____
Date of Birth: _____ Social Security #: _____
Home Address: _____
City: _____ State: _____ Zip: _____

If Applicable

Guarantor/Other Adult

Name: _____
Date of Birth: _____ Social Security #: _____
Home Address: _____
City: _____ State: _____ Zip: _____

I hereby give consent for an investigative consumer report to be done on me for tenancy purposes. I hereby authorize, without reservation, any law enforcement agency, administrator, state agency, state repository, former employer, corporation, credit agency, educational institution, city, state, federal court, military institution, information service bureau, employer or insurance company contacted by _____ or Tenant Alert to furnish any and all information required. I do understand the investigation will include information from law enforcement agencies, state agencies and public records information, such as credit, social security, criminal, motor vehicle and workers' compensation in accordance with the American with Disabilities Act. This report will include information as to my character work habits, performance and experience, along with the reasons for termination of past employment from previous employers. This releases the aforesaid parties from any liability and responsibility for collecting the above information at any time.

According to the Fair Credit Reporting Act (Law 91-508) SS 606:

A person may not procure or cause to be prepared an investigative consumer report on any consumer unless it is clearly and accurately disclosed to the consumers that an investigative consumer report including information as to his character, general reputation, personal characteristics and mode of living and employment history, whichever are applicable, may be made. I also understand that if I am denied tenancy because of the consumer investigation, it is my right to have the name of the agency or agencies disclosed to me within the time allowed. This authorization, in original or copy form, shall be valid for this and any further reports or updates that may be requested.

Applicant's Signature: _____ Date: _____

Co-Applicant's Signature: _____ Date: _____

Guarantor/Other Adult's Signature: _____ Date: _____

CERTIFICATE OF FOREIGN STATUS

The undersigned hereby certifies the following:

1. The prospective purchaser(s) is not a non-resident alien for purpose of the U.S. taxation (as such term is defined in the Internal Revenue Code and Income Tax Regulations).
2. If the prospective purchaser(s) is a non-resident alien then we will require a copy of your visa and/or green card, as part of this application.
3. The prospective purchaser(s) taxpayer identification number (social security number) is _____ and _____.
4. The prospective purchaser(s) address is _____ and _____.

The prospective purchaser(s) understand that the cooperative board is relying on the representations made in this application.

Dated: _____

By: _____

By: _____

By: _____

Disclosure of Information on Lead-Based Paint and/or Lead-Based Paint Hazards

Lead Warning Statement

Every purchaser of any interest in residential real property on which a residential dwelling was built prior to 1978 is notified that such property may present exposure to lead from lead-based paint that may place young children at risk of developing lead poisoning. Lead poisoning in young children may produce permanent neurological damage, including learning disabilities, reduced intelligence quotient, behavioral problems, and impaired memory. Lead poisoning also poses a particular risk to pregnant women. The seller of any interest in residential real property is required to provide the buyer with any information on lead-based paint hazards from risk assessments or inspections in the seller's possession and notify the buyer of any known lead-based paint hazards. A risk assessment or inspection for possible lead-based paint hazards is recommended prior to purchase.

Seller's Disclosure

(a) Presence of lead-based paint and/or lead-based paint hazards (check (i) or (ii) below):

(i) _____ Known lead-based paint and/or lead-based paint hazards are present in the housing (explain).

(ii) _____ Seller has no knowledge of lead-based paint and/or lead-based paint hazards in the housing.

(b) Records and reports available to the seller (check (i) or (ii) below):

(i) _____ Seller has provided the purchaser with all available records and reports pertaining to lead-based paint and/or lead-based paint hazards in the housing (list documents below).

(ii) _____ Seller has no reports or records pertaining to lead-based paint and/or lead-based paint hazards in the housing.

Purchaser's Acknowledgment (Initial)

(c) _____ Purchaser has received copies of all information listed above.

(d) _____ Purchaser has received the pamphlet *Protect Your Family from Lead in Your Home*.

(e) Purchaser has (check (i) or (ii) below):

(i) _____ received a 10-day opportunity (or mutually agreed upon period) to conduct a risk assessment or inspection for the presence of lead-based paint and/or lead-based paint hazards; or

(ii) _____ waived the opportunity to conduct a risk assessment or inspection for the presence of lead-based paint and/or lead-based paint hazards.

Agent's Acknowledgment (Initial)

(f) _____ Agent has informed the seller of the seller's obligations under 42 U.S.C. 4852d and is aware of his/her responsibility to ensure compliance.

Certification of Accuracy

The following parties have reviewed the information above and certify, to the best of their knowledge, that the information they have provided is true and accurate.

_____ Seller	_____ Date	_____ Seller	_____ Date
_____ Purchaser	_____ Date	_____ Purchaser	_____ Date
_____ Agent	_____ Date	_____ Agent	_____ Date



THE CITY OF NEW YORK
 DEPARTMENT OF HEALTH
 AND MENTAL HYGIENE

Michael R. Bloomberg Thomas R. Frieden, MD, MPH
 Mayor Commissioner

WINDOW GUARDS REQUIRED

Notice to Tenant or Occupant

You are required by law to have window guards installed in all windows if a child 10 years of age or younger lives in your apartment.

Your landlord is required by law to install window guards in your apartment: if a child 10 years of age or younger lives in your apartment,

OR

if you ask him to install window guards at any time (you need not give a reason).

It is a violation of law to refuse, interfere with installation, or remove window guards where required.

CHECK ALL THAT APPLY

CHILDREN 10 YEARS OF AGE OR YOUNGER LIVE IN MY APARTMENT

WINDOW GUARDS ARE INSTALLED IN ALL WINDOWS*

NO CHILDREN 10 YEARS OF AGE OR YOUNGER LIVE IN MY APARTMENT

WINDOW GUARDS ARE NOT INSTALLED IN ALL WINDOWS*

I WANT WINDOW GUARDS EVEN THOUGH I HAVE NO CHILDREN 10 YEARS OF AGE OR YOUNGER

WINDOW GUARDS NEED MAINTENANCE OR REPAIR

WINDOW GUARDS DO NOT NEED MAINTENANCE OR REPAIR

 Occupant (Print)

 Tenant's Signature:

 Date

 Tenant's Address

 Apt No.

RETURN THIS FORM TO:

**For Further Information Call:
 Window Falls Prevention (212) 676-2162**

***Except windows giving access to fire escapes or a window on the first floor that is a required means of egress from the dwelling unit**