

MOSKOWITZ/TV SPONSOR – Sponsor Purchase Application

Dear Prospective Resident:

Thank you for your interest in Moskowitz/TV Sponsor:

65-05 Yellowstone Blvd.	105-28 65 th Avenue
65-15 Yellowstone Blvd.	105-34 65 th Avenue
65-35 Yellowstone Blvd.	105-21 66 th Avenue
65-45 Yellowstone Blvd.	105-33 66 th Avenue

Enclosed is your Purchase Application. Please read all pages carefully and make sure to complete the application in its entirety. Applications that are incomplete or missing any documentation will not be accepted for processing and will be returned to the applicant.

Please complete and forward the application, along with required documents and fees, directly to Argo Real Estate, LLC for processing

50 West. 17th Street 7th Floor
New York, NY 10011
ATTN: Sales Department

For your convenience, a digital copy of this application is available as a fillable PDF on our website www.argo.com.

If you have any questions regarding your application, please contact your sales agent.

Sincerely,

ARGO REAL ESTATE LLC

Sales Department

MOSKOWITZ TV SPONSOR. – Required Documents & Important Information

The following is a list of the items that you are required to submit for the sponsor to review your application. Please be sure to provide all the information requested. Applications received that are missing ANY of the following items will NOT be accepted for processing and will be returned to the applicant.

Important Information (please read carefully before completing your application)

Please submit one (1) original set of the completed application package. Please make sure that application packages contain ALL required documentation. All documents should be provided as single sided (NOT printed on both sides), and be free of any staples or small paper clips. Required documents may be separated by dividers. Please note that documents will not be returned and that the applicant is advised to retain a copy for their records.

Complete & Return the Following Forms Provided

- 1. Purchase Application – Part I (5 pages)
MUST BE COMPLETED IN ITS ENTIRETY & SIGNED. APPLICATION WILL NOT BE REVIEWED IF SECTIONS ARE LEFT BLANK. MUST BE TYPED OR PRINTED LEGIBLY IN BLACK OR BLUE INK
- 2. Purchase Fees Acknowledgement Form (1 page)
MUST BE SIGNED BY APPLICANT(S).
- 3. Credit Report Authorization Form (1 page)
MUST INCLUDE SOCIAL SECURITY NUMBER AND US RESIDENTIAL ADDRESS (NO P.O. BOXES) MUST BE TYPED OR PRINTED LEGIBLY IN BLACK OR BLUE INK

Provide the Following Documentation

- 1. Copy of Contract of Sale (including all riders)
MUST BE EXECUTED BY ALL PARTIES.
- 2. Loan Commitment Letter (**Provide ONLY if Financing**)
MUST INCLUDE MONTHLY MORTGAGE PAYMENT & INTEREST AMOUNT.
- 3. Aztech Recognition Agreements (**Provide ONLY if Financing**)
THREE (3) ORIGINALS MUST BE PROVIDED. NO OTHER FORM WILL BE ACCEPTED.

Additional Information (Documents will be provided at closing)

- 1. House Rules and Policies
 - 2. "Protect Your Family from Lead in Your Home" EPA Pamphlet.
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Address for Delivery of Application Packages

Please submit all completed application packages, along with fees, directly to:

ARGO REAL ESTATE, LLC
Attn: Sales Department
50 W. 17th Street, 7th Floor
New York, NY 10011

All inquiries concerning applications should be directed to your sales agent at Argo Real Estate, LLC.

THURMAN VERONA APTS. CORP. – Application Fees Acknowledgement

The following is the schedule of fees required with the submission of all applications. All checks can be personal checks unless otherwise noted.

Fees Due Upon Submission

- | | | | |
|----|---------|--|-----------------------------------|
| 1. | \$45.00 | Credit Check Fee / per person (non-refundable) | Payable to: ARGO REAL ESTATE, LLC |
|----|---------|--|-----------------------------------|

AUTHORIZATION OF ELECTRONIC DEBIT:

You are hereby on notice that all checks submitted to this office can be processed electronically, at first presentment and any re-presentments, by transmitting the amount of the check, routing number, account number and check serial number to your financial institution. By submitting a check for payment, you are authorizing us to initiate an electronic debit from your bank or asset account as early as the same day the check is received in our office. Please note that you will not receive a cancelled check with your bank or asset account statement with respect to any checks processed electronically, but such amounts will appear as debits on the statement issued by your bank or asset account.

Fees Acknowledgement

I /We hereby acknowledge that all fees paid pursuant to this application are non-refundable, unless otherwise noted.

Purchaser Signature

Date:

Co- Purchaser Signature

Date:

Part I – Purchase Application Information

Building Address: _____ Apt #: _____ Shares: _____

Monthly Maintenance: _____ Assessments (if any): _____

Purchase Price: _____ Down Payment: _____ Amount Financed: _____

Special Conditions (if any): _____

Seller(s)

Name(s): _____ SS#: _____

_____ SS#: _____

Present Address: _____ City: _____ State: _____ Zip: _____

Forwarding Address: _____ City: _____ State: _____ Zip: _____

Phone: _____ Cell: _____ Email: _____

Seller's Attorney: _____ Attorney's Firm: _____

Attorney's Phone: _____ Cell: _____ Email: _____

Attorney's Address: _____ City: _____ State: _____ Zip: _____

Seller's Broker (if any): _____ Phone: _____ Email: _____

Applicant(s) / Purchaser(s)

Purchaser Name: _____ SS#: _____

Phone: _____ Cell: _____ Email: _____

Co- Purchaser Name: _____ SS#: _____

Phone: _____ Cell: _____ Email: _____

Purchaser's Attorney: _____ Attorney's Firm: _____

Attorney's Phone: _____ Cell: _____ Email: _____

Attorney's Address: _____ City: _____ State: _____ Zip: _____

Purchaser's Broker (if any): _____ Phone: _____ Email: _____

Name(s) Co-operative Stock will be held in: _____

Residence History

Purchaser

Present Address: _____ City: _____ State: _____ Zip: _____

Length of Residency: _____ Monthly Rent / Mortgage Payment: _____

Landlord / Managing Agent: _____ Phone: _____ Fax: _____

If owned, list Mortgage Lender and Account Number: _____

Previous Address: _____ City: _____ State: _____ Zip: _____

Length of Residency: _____ Monthly Rent / Mortgage Payment: _____

Landlord / Managing Agent: _____ Phone: _____ Fax: _____

If owned, list Mortgage Lender and Account Number: _____

Co-Purchaser

Present Address: _____ City: _____ State: _____ Zip: _____

Length of Residency: _____ Monthly Rent / Mortgage Payment: _____

Landlord / Managing Agent: _____ Phone: _____ Fax: _____

If owned, list Mortgage Lender and Account Number: _____

Previous Address: _____ City: _____ State: _____ Zip: _____

Length of Residency: _____ Monthly Rent / Mortgage Payment: _____

Landlord / Managing Agent: _____ Phone: _____ Fax: _____

If owned, list Mortgage Lender and Account Number: _____

Employment Information

Purchaser

Employer: _____ Phone: _____ Fax: _____

Business Address: _____ City: _____ State: _____ Zip: _____

Length of Employment: _____ Annual Income: _____

Co-Purchaser

Employer: _____ Phone: _____ Fax: _____

Business Address: _____ City: _____ State: _____ Zip: _____

Length of Employment: _____ Annual Income: _____

Business / Professional References

Applicant

Co-Applicant

1. Name: _____

1. Name: _____

Company: _____

Company: _____

Address: _____

Address: _____

Title / Position: _____

Title / Position: _____

Phone: _____

Phone: _____

2. Name: _____

2. Name: _____

Company: _____

Company: _____

Address: _____

Address: _____

Title / Position: _____

Title / Position: _____

Phone: _____

Phone: _____

Personal References

Applicant

Co-Applicant

1. Name: _____

1. Name: _____

Address: _____

Address: _____

Relationship to Applicant: _____

Relationship to Applicant: _____

Phone: _____

Phone: _____

2. Name: _____

2. Name: _____

Address: _____

Address: _____

Relationship to Applicant: _____

Relationship to Applicant: _____

Phone: _____

Phone: _____

Bank References

Applicant

Co-Applicant

Checking Account #: _____

Checking Account #: _____

Bank: _____ Branch: _____

Bank: _____ Branch: _____

Savings Account #: _____

Savings Account #: _____

Bank: _____ Branch: _____

Bank: _____ Branch: _____

Other Account #: _____

Other Account #: _____

Bank: _____ Branch: _____

Bank: _____ Branch: _____

Additional Information

Please list the name and Social Security Number of each person who will reside in the apartment (other than the applicant(s)/purchaser(s)).

Name	Social Security
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

Representations / Authorizations

Please answer the following: (if any of these questions are answered "YES", please provide details in the space provided or attach additional pages if needed)

1. Are you now, or in the past five (5) years have you been, privy to any lawsuits or other legal actions? YES NO

please describe: _____

2. Has the applicant(s) and/or occupant(s) ever been convicted of a felony? YES NO

please describe: _____

3. Are there any outstanding judgments against you? YES NO

please describe: _____

4. Do you intend to finance any part of the purchase? YES NO

If YES, Name & Address of Lender: _____

What are the terms of your loan? _____

5. Will any part of the cash payment for the purchase of the apartment be borrowed? YES NO

6. Do you plan to keep any pets in the apartment? YES NO

If YES, please list and include Species, Breed, Weight, and Age of ALL animals.

please describe: _____

7. Do you intend to play any musical instruments in the apartment? YES NO

please describe: _____

8. Do you intend to use the apartment for professional or business purposes? YES NO

please describe: _____

Sellers Signature

Date:

Co-Seller's

Date:

Purchaser Signature

Date:

Co- Purchaser Signature

Date:

The undersigned authorizes the co-operative corporation or its agents to retain a credit reporting agency. This agency may obtain, prepare and furnish credit reports on my/our character, general reputation, personal characteristics, and mode of living. (The above complies with Section 606 of the Fair Credit Reporting Act.)

Purchaser Signature

Date:

Co- Purchaser Signature

Date:

Credit Report Authorization (page 1 of 2)

I/We authorize Argo Real Estate LLC and or/its agents to obtain a tenant background search or consumer report through **CoreLogic Saferent c/o Consumer Relations Department** 7300 Westmore Road, Suite 3, Rockville, MD 20850-523 and any other information it deems necessary, for the purpose of evaluating my application. I/We understand that such information may include, but is not limited to credit history, housing court, sex offender search, criminal background check, employment/income verification, prior residency verification and/or any other necessary information. I/We understand that subsequent consumer reports may be obtained and utilized under this authorization in connection with an update, renewal, extension or collection, with respect to or in connection with the rental of a residence for which application was made. I/We agree to hold the above named company and procurer or furnisher of information, free from any liability what-so-ever in the use, procurement, or furnishing of such information. I/We further consent and authorize Argo Real Estate LLC and/or its agents to furnish this information to the Board of Directors, and/or its agents of the cooperative building or condominium to which I/We have applied, or to the Landlord of the rental apartment and his/her agents.

Pursuant to federal and state law:

1. If the Landlord takes adverse action against you on the basis of information contained in a tenant screening report, the Landlord must notify you that such action was taken and supply you with the name and address of the consumer reporting agency that provided the tenant screening report on the basis of which such action was taken;
2. If any adverse action is taken against you based on information contained in a consumer screening report, you have the right to inspect and receive a free copy of the report by contacting the consumer reporting agency;
3. Every tenant or prospective tenant is entitled to one free tenant screening report from each national consumer credit reporting agency (Equifax, Experian and TransUnion) annually, in addition to a credit report that should be obtained from www.annualcreditreport.com; and
4. Every tenant or prospective tenant may dispute inaccurate or incorrect information contained in a

Signature of Applicant

Date

Signature of Co-Applicant

Date

Signature of Guarantor

Date

Credit Report Authorization Form (page 2 of 2)

Applicant's Name (print)

Applicant's Signature

Social Security #: _____ Date of Birth: _____ Phone: _____

Current Address: _____ City: _____ State: _____ Zip: _____

Co-Applicant's Name (print)

Co-Applicant's Signature

Social Security #: _____ Date of Birth: _____ Phone: _____

Current Address: _____ City: _____ State: _____ Zip: _____

Guarantor's Name (print)

Guarantor's Signature

Social Security #: _____ Date of Birth: _____ Phone: _____

Current Address: _____ City: _____ State: _____ Zip: _____

Authorization for Electronic Debit:

You are hereby on notice that all checks submitted to this office can be processed electronically, at first presentment, and any re-presentments, by transmitting the amount of the check, routing number, account number and check serial number of your financial institution. By submitting a check for payment, you are authorizing us to initiate an electronic debit from your bank or asset account as early as the same day the check is received in our office. Please note that you will not receive a cancelled check with your bank or asset account statement with respect to any checks processed electronically, but such amounts will appear as debits on the statement issued by your bank or asset account.